



Community Planning Aberdeen Board

Meeting on MONDAY, 16 MARCH 2015 at 4.00 pm

****ACVO, 38 Castle Street, Aberdeen, AB11 5YU, Aberdeen****

B U S I N E S S

1 Introductions and Apologies

2 Minutes

2.1 Minute of Previous Meeting of 3 December 2014 - for approval (Pages 1 - 10)

2.2 Minute of the CPA Management Group of 19 January 2015 - for information (Pages 11 - 24)

3 Group Infrastructure

3.1 CPA Management Group Membership - Alcohol and Drugs Partnership - verbal report

4 Horizon Scanning

4.1 SOA and Priorities Refresh - verbal update

4.2 Scottish Parliament Audit Committee – 21 January 2015 - Community Planning - Turning Ambition Into Action (Pages 25 - 66)

5 Accountability

5.1 Communication and Engagement Group Action Plan 2014-2015 - to follow

5.2 Fairer Aberdeen Fund Annual Report 2013/2014 - for information - hard copies to be circulated at the meeting

6 **Due Reports**

- 6.1 Older People's Change Fund Outcomes (Pages 67 - 72)
- 6.2 Third Sector Interface Community Planning Improvement Service Programme (Pages 73 - 74)
- 6.3 Protecting Vulnerable Adults (Pages 75 - 92)
- 6.4 Bromley-by-Bow Visit (Pages 93 - 96)
- 6.5 Smarter Places Review (Pages 97 - 100)

7 **Deep Dive**

- 7.1 There are no items under this heading

8 **Board Development**

- 8.1 There are no items under this heading

9 **Board Blether**

10 **Date of Next Meeting - 6 July 2015 at 4pm**

Should you require any further information about this agenda, please contact Allison Swanson, tel. 01224 522822 or email aswanson@aberdeencity.gov.uk

COMMUNITY PLANNING ABERDEEN BOARD

3 DECEMBER 2014

Present:-

Councillor Laing, Chair,
Innes Walker (as a substitute for Adrian Watson), Police Scotland,
Councillors Allan, Graham and Kiddie
Ken Eddie, Civic Forum,
Charles Muir, NHS Board,
Francesca Osowska, Scottish Government,
Angela Scott, Aberdeen City Council,
Duncan Smith, Scottish Fire and Rescue Service,
Linda Smith, (as a substitute for Susan Webb), Public Health
John Tomlinson, ACVO

Also Present:-

Joanna Murray (Integrated Transport); and
Pete Leonard, Lyndsay Johnstone, Joanne Larsen, Donald Urquhart and Alison Swanson (Aberdeen City Council)

Apologies:-

Gordon McIntosh.

Topic	Discussion/Decision	Action By
1. Welcome and Agenda Order	The Chair welcomed all present to the meeting and proposed that the Board consider item 4.2 (Health and Transport Action Plan – Refresh) as the first item of business to enable officers to attend another meeting.	
2. Health and Transport Action Plan - Refresh	With reference to item 16 of the minute of the meeting of the CPA Management Group of 17 November 2014, the Board had before it a report which advised of and presented the refresh of the Health and Transport Action Plan (HTAP) for consideration. The report recommended – that the Board endorse the refreshed Grampian Health and Transport Action Plan and accept ownership and responsibility for delivery of the Plan to enshrine the work into collaborative working practices, along with the Community Planning Partnership Boards in Moray and Aberdeenshire.	

Topic	Discussion/Decision	Action By
	<p>Partners welcomed the report, in particular the objectives contained within the Action Plan and recommended that the Action Plan be considered by all relevant Thematic and Multi-lateral Priority Groups. In this regard, the Board discussed the role of the Partnership in holding the Health and Transport Steering Group accountable for delivery of the Action Plan.</p> <p>The Board also sought clarification on whether reliable local data was available to measure the key indicators as detailed in the report. In response, Joanna Murray explained that some local data was being collated which would be used to measure some of the indicators, whilst discussion to identify metrics which was pertinent to some of the outcomes was currently ongoing.</p> <p>The Board resolved:-</p> <ul style="list-style-type: none"> (i) to approve the recommendation and to agree that the annual report be submitted to the Management Group for consideration and that strategic matters be submitted to the Board as and when appropriate; and (ii) to agree that the Health and Transport Action Plan be shared with all appropriate Thematic and Multi-lateral Priority Groups for consideration. 	Joanna Murray Joanna Murray Joanna Murray
3. Minute of Previous Meeting of 2 July 2014	<p>The Board had before it the minute of its previous meeting of 2 July 2014, for approval.</p> <p>In relation to item 2 (Third Sector Interface Community Planning Improvement Service), the Board noted that the deadline for completed surveys had now passed and the Management Group were now awaiting confirmation of a date for the survey feedback and action plan development session. The draft action plan would be reported to the next meeting of the Board for consideration.</p> <p>With regards item 3 (Scottish Fire and Rescue Service Case Study), the Board agreed to request Tom Cowan, Aberdeen City Council's Head of Adult Services to co-ordinate the integrated training of front line employees to ensure that organisations worked better together to protect vulnerable adults and that staff were trained to identify referrals and record a baseline of data measures which measured the impact of interventions.</p> <p>In relation to item 4 (UK Government's Counter Terrorism Strategy), the Board noted that at present in relation to counter terrorism there was a partner wide local resilience (react) group and a local contest (prevent) group, however this was not linked to the Community Planning structure and as such Angela Scott and Adrian Watson would report to a future meeting with proposals on</p>	Joyce Duncan Tom Cowan Angela Scott/Adrian Watson

Topic	Discussion/Decision	Action By
	<p>how this area would link to the Partnership moving forward.</p> <p>With regards item 6 (Thematic and Multi-lateral Priority Group Presentations), the Board heard from the Chair who explained that the resolutions of the previous meeting had now been superseded by the review of the Single Outcome Agreement (SOA) and its priorities and therefore all Thematic and Multi-lateral Group would feed into this process.</p> <p>In relation to item 7 (Minute of Previous Meeting), the Board noted that since Sir Lewis Ritchie, Director of Public Health had been invited to become a member of the Board he had retired and as such Susan Webb would now be the Public Health representative on the Board.</p> <p>With regards item 7 (Minute of Previous Meeting), the Board noted that the Management Group had considered a report on the future governance arrangements of Community Justice Authorities and that a report on this matter would be submitted to the Board at its next meeting for consideration.</p> <p>In relation to item 8 (Smarter Places Reviews), to note that this matter was now being progressed by John Quinn, Aberdeen City Council's Head of Land and Property Assets and that he had recently reconvened the North East Property Group and would report its workplan to the next meeting of the Board.</p> <p>The Board resolved:-</p> <ul style="list-style-type: none"> (i) to approve the minute as an accurate record; and (ii) to approve the updates and actions as recorded above. 	<p>Donald Urquhart/All Thematic and Multi-lateral Priority Groups</p> <p>Tom Cowan</p> <p>John Quinn</p> <p>Jo Larsen</p> <p>In relation to item 2 (Membership Request from Skills Development Scotland (SDS)), the Board noted that the Learning and Workforce Thematic Group had not managed to discuss this request for membership, but had confirmed that SDS was a member of the Thematic Group. The Board discussed the membership request and agreed that SDS be invited to become a member of the CPA Management Group.</p>
4. Minutes of Meetings of the Community Planning Aberdeen Management Group of 17 November 2014	The Board had before it the minute of meeting of the Community Planning Aberdeen Management Group of 17 November 2014, for information.	

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	<p>With regards item 7 (Alcohol and Drugs Partnership), the Board noted that the Alcohol and Drugs Partnership Delivery Plan would be reported to its next meeting for consideration.</p> <p>In relation to item 10 (Third Sector Interface and ACVO Update), the Board heard from Angela Scott who explained that partners had a valuable visit to the Bromley-by-Bow Centre in East London and would report on their findings to the next meeting of the Board.</p> <p>With regards item 11 (Community Empowerment Bill), the Board noted that Dave Kilgour had contacted partners regarding the refresh in membership of the Community Empowerment Bill Working Group and would report to the next meeting of the Management Group in this regard.</p> <p>In relation to item 13 (Partnership Winter Readiness), the Board heard from Angela Scott who provided an overview of the rationale for the partnership winter readiness approach which provided the Partnership with the opportunity to take a more holistic approach and include areas of concern that might not have been tackled under winter readiness previously and therefore would assist in improving the wellbeing and resilience of the city. She also highlighted the findings of the British Red Cross Emergency Preparedness in Scotland 2014 survey. Partners were reminded to provide information to Joanne Larsen directly as soon as possible and noted that a report regarding this matter would be submitted to a future meeting.</p>	<p>Sandy Kelman</p> <p>Angela Leonard</p> <p>Dave Kilgour</p> <p>All Partners/Joanne Larsen</p>
5. SOA Priorities Refresh	<p>The Board resolved:-</p> <ul style="list-style-type: none"> (i) to note the minutes; and (ii) to approve the updates and actions as recorded above. 	<p>With reference to (1) items 5 and 6 of the minute of the meeting of the Board of 1 October 2014 and item 8 of the minute of the Management Group of 17 November 2014, the Board had before it a report which provided an update on the consideration of the issues that were identified following the discussion at the Board's previous meeting regarding progress in relation to the current Thematic and Multi-lateral Priority Groups and the reliability and relevance of metrics within the Single Outcome Agreement (SOA).</p> <p>The report explained that the Chair of the Management Group in referring to the decisions of the last Board meeting emphasised that it was important that the refreshed SOA was outcome and not demand focused and also that it had a robust and cohesive data strategy. She had also</p>

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	<p>highlighted Audit Scotland's recommendation that the Partnership review the number of priorities and advised that as part of this review process a complete reassessment of the SOA priorities, metrics and data sets would be undertaken.</p> <p>As part of preparatory work for the review all Thematic and Multi-lateral Groups had been asked to identify metrics which focused on local outcomes and reliable data sources and to provide this information to Donald Urquhart, Aberdeen City Council's Head of Communities and Housing.</p>	<p>With regards the timeline and process for completing the review, it was advised that this was currently under discussion with partners and a report in this regard would be provided to the next CPA Management Group on the 19 January 2015. It was currently requested that the refreshed SOA should be completed for the start of the 2015 financial year which given the tight timescale involved might require moving the next CPA Board meeting to later in March 2015. However, it was highlighted that a refreshed SOA within this timeframe could only realistically refresh the information currently held and include some of the metrics already requested and did not realistically provide the basis for a more ambitious and wider ranging rewrite. Any rewrite must focus clearly on delivering identified strategic priorities and also local issues where actions were urgently required 'on the ground'. Above all a clear action plan for delivery required to be agreed.</p> <p>The report reminded partners that community planning was now located under the Aberdeen City Council's Director of Communities, Housing and Infrastructure. In this regard, the Director was required to submit a proposed structure for all services within his remit to the Council's Communities, Housing and Infrastructure Committee in January 2015. A proposal currently being developed by the Council's Head of Communities and Housing would allow for a step change in the Council's approach to Community Planning and importantly this would permit a number of substantial improvements both to the processes for joint work on the SOA but critically to the delivery of improved services and outcomes for communities. Details of the benefits from such a restructure were provided.</p> <p>The report recommended – that the Board endorse the CPA Management Group's planned review of the Single Outcome Agreement priorities, actions and metrics and support the proposal that the timeline and process for completing this work should be agreed at the next CPA Management Group on 19 January 2015.</p>

Topic	Discussion/Decision	Action By
	<p>Speaking in furtherance of the report Donald Urquhart explained that there were a number of matters to be addressed and that he believed that the refresh of the SOA provided the partnership with an opportunity to enhance resources and how they perform at a local level. In this regard, he explained that the SOA cannot be taken in isolation and required commitment from all partner organisations in order to be truly effective and therefore he wished to bring it into line with timescales of the mainstream budgetary process of partner organisations. Thereafter, he provided an update on the future direction of neighbourhood planning and advised that this would be reported to a future meeting.</p> <p>Partners welcomed the report and agreed with approach proposed, however emphasised the importance of all partners fully committing to and supporting Donald Urquhart in undertaking the refresh of the SOA.</p> <p>The Board resolved:-</p> <ul style="list-style-type: none"> (i) to approve the recommendation; and (ii) given the tight timescales and the importance of commitment of all partners to the SOA, to agree that all partner organisations provide support to Donald Urquhart in taking forward the refresh of the SOA. 	<p>Donald Urquhart All Partners</p>
6. CPA Management Group Progress Report	<p>With reference to item 5 of the minute of its meeting of 1 October 2014, the Board had before it a report which provided an update from the Community Planning Aberdeen Management Group (CPAMG) on its activity since the last meeting of the Board.</p> <p>The report recommended – that the Board note progress at the last meeting of the Management Group.</p> <p>The Board resolved:- to approve the recommendation.</p>	
7. Participatory Budgeting		<p>The Board had before it a report which presented information on participatory budgeting, a method of including local communities in the decision making process of how some public budget should be allocated, for consideration.</p>

Topic	Discussion/Decision	Action By
	<p>The report explained that although participatory budgeting was still in its infancy in the UK, it was recommended that this was a good time to start to take notice of and monitor developments in it. By keeping on top of new developments the Partnership could ensure that, should participatory budgeting come to have a more direct influence Local Authority / Partnership funding in the future, the Partnership would be able to deal proactively with any challenges and opportunities this presented. The UK context was unique in that central government heavily promoted participatory budgeting and had announced that it wanted every local authority in England to implement it in some form by 2015 and Scottish Government were actively promoting pilot events across Scotland with offers of additional training and support available.</p> <p>The report advised that annually the Council, Police, Fire and Rescue and the National Health Service made decisions on what they felt the communities needed and in planning their budgets, decided how to distribute public money to achieve those goals. Participatory budgeting allowed the citizens living in an area (or within a specific community) to participate in the debate about what needed to be done and to take decisions on the allocation of at least some of the available public funding. Participatory budgeting worked on the ideology of “one person = one vote” to determine how the allocated money was spent.</p> <p>It was also highlighted that it was important to recognise that only a small percentage of any public budget would be allocated to be used in participatory budgeting and that the process would have to be formally mandated and ‘signed off’ by the elected legislature as the control and audit for the process would be the legal responsibility of the Local Authority.</p> <p>Participatory budgeting directly involves local people in making decisions on the priorities and spending for a defined public budget. This means engaging residents and community groups representative of all parts of the community to discuss and vote on spending priorities, make spending proposals and vote on them, as well as giving local people a role in the scrutiny and monitoring of the process.</p>	<p>The report recommended – that the Board – (a) consider the benefits of introducing a Small Grants Participatory Budget model perhaps through the Fairer Aberdeen Fund and discuss the budgetary implications to all of the Partners; and</p>

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	<p>(b) if agreement to move forward with considering the introduction of participatory budgeting, approve:</p> <ul style="list-style-type: none"> • the putting forward of Aberdeen Community Planning Partnership for additional training and support; • creation of a Steering/Planning Group representing key stakeholders to manage the process; and • discussion amongst the partners about Securing Funds to allocate to projects and to cover process costs – event, publicity etc <p>Partners welcomed the report and asked a number of questions regarding the administration of such a fund; where the funding would come from and how this would work in connection with existing fund/grant processes. In response, officers advised that they were at the very initial discussion stages regarding participatory budgets and that is was before the Board today for consideration of the proposal prior to further detailed scoping work being undertaken.</p> <p>Partners agreed that in principle they were supportive of the proposal, but would require a further report with greater detail on the aforementioned areas before a final decision could be made.</p> <p>The Board resolved:-</p> <ol style="list-style-type: none"> (i) to request Joanne Larsen to indicate the Partnership's interest in introducing a Small Grants Participatory Budget model to the Scottish Government and that it would welcome any support should this be pursued; (ii) to request Joanne Larsen to contact all partners regarding participatory budgets and to ask for feedback from each regarding their potential financial commitment to this model; and (iii) to request Joanne Larsen to submit a further report with greater detail on participatory budgets and proposals on how this could be implemented by the Partnership in line with existing grants. 	Joanne Larsen Joanne Larsen Joanne Larsen All Partners/Gail Woodcock
8. Board Blether	<p>The following matters were noted by the Board:</p> <ul style="list-style-type: none"> • this was Charles Muir's last meeting before he stepped down from his position as a member of NHS Grampian's Board. The Board thanked Charles for his contribution to the Partnership and wished him well in future endeavours; • through a Partnership with the University of Aberdeen, Aberdeen City Council was 	

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	<p>arranging for a visit from Professor Enrico Giovanni and that this would include a public event hosted by the Lord Provost on the evening of 15 January 2015 in the Town House to which all partners would be invited. Professor Giovanni was previously the Head of Statistics for the Organisation for Economic Co-operation and Development (OECD) and then Statistics Italy and was prominent in developing wellbeing indicators for the OECD and Italian Government. In addition, it was advised that the University of Aberdeen had also expressed an interest in working with the Partnership to measure wellbeing in communities;</p> <ul style="list-style-type: none"> • John Tomlinson had been appointed as ACVO's Board member on the Partnership for a further year and ACVO had offered to host the next Board meeting; and • the Joint Inspection of Children's Services in Aberdeen had been completed and the inspection report was awaited; once this had been received it would be reported to the Board. 	Angela Scott
9. Date of Next Meeting	The Board noted that its next meeting was scheduled to be held on 16 March 2015 at 4pm.	

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Agenda Item 2.2

COMMUNITY PLANNING ABERDEEN MANAGEMENT GROUP

2 MARCH 2015

Present:- Angela Scott (Aberdeen City Council) (Chair), Innes Walker (Police Scotland) (Vice Chair), Jamie Bell (as a substitute for David Rennie) (Scottish Enterprise), Neil Bruce (Culture City), Ally Birkett (Scottish Fire and Rescue Service), Neil Carnegie (Community Safety Partnership), Joyce Duncan (ACVO), Sandy Kelman (Alcohol and Drugs Partnership), Danny Logue (Skills Development Scotland), Joanna Murray (Integrated Transport), Liz Taylor (Health and Wellbeing and Older People), Sheila Sansbury (Priority Families and Children and Young People), Paul Sherrington (Universities and Colleges Representative), Richard Sweetnam (Digital City and Economic Growth) and Gail Woodcock (Learning and Workforce).

Also Present:- Lyndsay Johnstone, Joanne Larsen and Pete Leonard (Aberdeen City Council), Louise Beaton and James Simpson (Children and Young People), Lesley Thomson and Alex Paterson (Culture City) and Rita Stephen (Digital City and Economic Growth).

<u>Topic</u>	<u>Discussion/Decision</u>	<u>Action By</u>
1. Minute of Previous Meeting of 19 January 2015	The Management Group had before it the minute of its previous meeting of 19 January 2015, for approval.	Joyce Duncan
	In relation to the Third Sector Interface Community Planning Improvement Programme, Joyce Duncan advised that a new process had now been agreed and as such one to one meetings would be held and she would be in touch with Partners in the next week in this regard.	
	With regards item 5 (Priority Families), Neil Carnegie advised that a meeting to consider the priority families strategy was being held on Friday 6 March 2015.	
	In relation to item 7 (Total Place), the Management Group noted that a report would be submitted to its next meeting.	Gail Woodcock
	With regards item 9 (Participatory Budgetary Training), Joanne Larsen advised that a scoping meeting would be held in the beginning of April, however she was still awaiting names of participants from all Partners and requested that Partners who had not yet provided her with names do so as soon as possible.	Partners

Topic	Discussion/Decision	Action By
	<p>In relation to item 11 (Developing an Evidence led Business Model), Neil Carnegie advised that he had identified budget within Aberdeen City Council for a strategic analyst and therefore he was in the process of drafting a business case.</p> <p>With regards item 14 (Health and Social Care Integration Scheme for Aberdeen City), to note that Joanne Larsen was drafting a report in consultation with Kevin Toshney and that this would be reported to Donald Urquhart in the first instance rather than presented to the Management Group and thereafter it would be reported to the Partnership for consideration.</p> <p>The Management Group resolved: to approve the minute as a correct record and to note the updates as recorded above.</p>	Neil Carnegie Joanne Larsen
2. Review of Priorities and Single Outcome Agreement	With reference to item 10 of the minute of its previous meeting of 19 January 2015, the Management Group had before it the proposed new metrics (including details of data source and targets and qualitative impact) for inclusion within the Partnership's Single Outcome Agreement (SOA) for 2014/2015 from the following Thematic and Multi-lateral Priority Groups: <ul style="list-style-type: none"> • Children and Young People Thematic Group • Culture City Multi-lateral Priority Group • Digital City Multi-lateral Priority Group • Economic Growth Thematic Growth • Health and Wellbeing Thematic Group • Integrated Transport Multi-lateral Priority Group • Learning and Workforce Thematic Group • Safer Communities Thematic Group 	Prior to each of the Thematic and Multi-lateral Priority Groups presenting their proposed new metrics Joanne Larsen set the context for requested revision to the metrics contained within the current 2014/2015 SOA wherein she reminded partners that at the October 2014 CPA Board meeting all Thematic and Multi-lateral groups were asked to present their annual reports and resulting from this all groups were then asked to re-consider their current set of

Topic	Discussion/Decision	Action By
	<p>Outcomes for the 2014/2015 SOA. This action was subsequently discussed by the Management Group and a specific metrics meeting held on 16 January 2015 at which a representative from all groups attended along with the researchers/analysts to discuss options to clarify / streamline the current outcomes and to consider locality based outcomes.</p> <p>Joanne also reminded partners that the Management Group had advised Thematic and Multi-lateral Priority Group that proposed Outcomes for the SOA refresh should:</p> <ul style="list-style-type: none"> • Be supported by timely, relevant and local data (recognising if there were neighbourhood / regeneration targets) • Be only achievable through partnership working • Support existing strategies of internal and/or external partner • Show a journey • Have interim measures that could determine direction of travel <p>In addition, demand metrics should be included as an appendix to each groups' respective submissions.</p>	<p>Thereafter, Joanne provided a description of the new template and explained that the rationale for the new template was the ability to give a much fuller view of the impacts and added value work the Partnership was contributing towards the local/citywide/national outcomes.</p> <p>With regarding the membership of the groups, she explained that during the gathering of the proposals it had become clear that there had been some changes to roles, responsibilities and groups and it was important that given all of the new structures, roles, integrations and other changes across partnership organisations that the Partnership was sure the existing groups: had the correct membership; were still engaged and linking across partners; and that the balance was still equitable (not mainly local authority led and managed) and therefore asked if any group had reviewed its membership or felt that there were areas that still required reviewed that they raise this during presentation of their metrics. Also, she explained it was important for partners to understand the Consultation process used by the groups when refreshing their metrics and therefor asked for all groups to advise on the process they used and who was involved when talking through their proposal.</p>

Topic	Discussion/Decision	Action By
	<p>Finally, she advised that following today's meeting it was hoped that the Management Group would be in a position to approve the proposed refreshed changes from each group and also changes to any reporting processes so that the refreshed 2014/2015 SOA could be presented to the CPA Board at its meeting on 16 March 2015 for consideration.</p> <p>Thereafter each of the Thematic and Multi-lateral Priority Groups presented their proposed new metrics for discussion.</p> <p>Children and Young People Thematic Group</p> <p>The Management Group heard from Sheila Sansbury who provided an overview of the process undertaken to select each of the proposed metrics, and thereafter spoke Partners through each of the metrics, highlighting the rationale for its inclusion, the availability of a valid data source and its target for 2014/2015.</p>	<p>There followed an extensive discussion in relation to each of the proposed metrics. Specifically, regarding the proposed new metrics % of school children in the bottom 20% SIMD deciles by resident address, the Management Group sought clarification on what the Thematic Group was doing to demonstrate added value across the value and queried, given the Scottish Index of Multiple Deprivation was the proxy indicator, whether this was metrics was a measure of population profile rather than the output of the Partnership. The Management Group agreed that at present this metrics was too generic and could not be measured. Recognising the importance of measuring this area, it was proposed that such metrics be included in a wider population profile analysis.</p> <p>In relation to both the gap between average tariff scores of lowest performing 20% of pupils in S4 compared to middle 60% and the gap between average tariff scores of lowest performing 20% of pupils in S4 compared to highest performing 20% metrics, Partners queried the availability of the data and whether these were single system metrics, rather than for the Partnership and during the course of the discussion it was suggested that further work was required to develop metrics that linked specifically to the Partnership's role.</p>

Topic	Discussion/Decision	Action By
	<p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) to request the Children and Young People Thematic Group to clarify when data on the % of children reaching all expected developmental milestones at the time of the child's 27-30 month child health review metric could be obtained and whether unvalidated data locally could be provided at an earlier date; (ii) to agree to remove the % of children reaching all expected developmental milestones at the time the child starts primary school metric; (iii) to agree: (a) to remove the original % of children living in poverty metric; (b) that the proposed new metric % of school children in the bottom 20% SIMD deciles by resident address be included within a wider population profile analysis; and (c) that the Children and Young People Thematic Group liaise with the Welfare Reform Board on the establishment of its dashboard and the Priorities Families Multi-lateral Priority Group; (iv) to agree to remove the % of children re-registered on the Children Protection Register within two years of being taken off the register metric and to request the Children and Young People Thematic Group to develop early intervention outcome based metrics for child protection; (v) to retain the number of young people involved in offending metric whilst noting that this value currently included young people up to the age of 16, however in the near future this would increase to the age of 17; and to request the Children and Young People Thematic Group include the number of repeat offenders as a metric in the 2015/2016 SOA with the aim of focusing on a preventative early intervention approach and mirroring the outcome of the number of young people involved in offending metric; and (vi) to agree to remove the gap between average tariff scores of lowest performing 20% of pupils in S4 compared to middle 60% metric and to request the Children and Young People Thematic Group to further explore the role of the Partnership in adding value in this area and to develop metrics for inclusion in the 2015/2016 SOA; (vii) to agree to remove the gap between average tariff scores of lowest performing 20% of pupils in S4 compared to highest performing 20% metric and to request the Children and Young People Thematic Group to further explore the role of the Partnership in adding value in this area and to develop metrics for inclusion in the 2015/2016 SOA; and (viii) in relation to the % of leavers from public funded schools in positive initial destinations metric, to note that a similar metric was also included within the Learning and Workforce 	Sheila Sansbury/Children and Young People Thematic Group

Topic	Discussion/Decision	Action By
<p>Thematic Group proposed metrics and to agree that it was a shared metric and was to be included in the SOA once and under one theme.</p> <p>Culture City Multi-lateral Priority Group</p> <p>The Management Group heard from Lesley Thomson who provided an overview of the process undertaken to select each of the proposed metrics, and thereafter spoke Partners through each of the metrics, highlighting the rationale for its inclusion, the availability of a valid data source and its target for 2014/2015. She explained that due to timing the proposed metrics had not been shared with the Culture Network, however the next step was to receive the Network's endorsement. She also highlighted that the majority of the proposed metrics relied on the Scottish Household Survey as its data source and given the limited sample size this caused concern.</p> <p>There followed an extensive discussion in relation to each of the proposed metrics, in particular on the reliability of the Scottish Household Survey as a data source. Following the discussion, Partners agreed that the Scottish Household Survey was not a reliable data source and that metric could not be included in the 2014/2015 SOA on the basis of survey as its data source. The Management Group also highlighted that the proposed metrics were Aberdeen City Council outcomes and therefore agreed that new Partnership focused metrics needed to be identified.</p> <p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) to request the Culture City Multi-lateral Priority Group, in consultation with Joanne Larsen and data and research colleagues, to review all of its proposed metrics and to develop further metrics and on doing so to ensure that the metrics were Partnership, not single system focused; added value and all had a reliable data source; and (ii) to agree that any metrics reliant on the Scottish Household Survey could not be included in the 2014/2015 SOA. 	Neil Thomson/Culture Network Bruce/Lesley	

Topic	Discussion/Decision	Action By
	<p>Economic Growth Thematic Growth</p> <p>The Group heard from Rita Stephen who advised that SQW was currently undertaking a refresh of the ACSEF Strategy and Action Plan and part of that included the development of a set of key performance indicators which would allow ACSEF to monitor the performance of the Economic Strategy and also its contribution to the Strategy. In line with this, ACSEF's draft Economic Outcome Indicators had been presented rather than proposed new metrics and in light of the current process and timescales it was proposed that the current economic growth metrics contained within the 2014/2015 SOA remain and that the metrics for the 2015/2016 SOA be reviewed in conjunction with the completion of the refreshed ACSEF Strategy and Action Plan.</p> <p>The Management Group welcomed Richard Sweetnam, Aberdeen City Council's new Head of Economic Business Development</p> <p>Partners discussed the proposal to accept the current economic growth metrics for 2014/2015 during which it was highlighted that the disparity within the city needed to be reflected. Also, during the course of the discussion it was noted that the Skills Strategy would be considered by ACSEF in June 2015 and it was agreed that the broader issue of skills across all sectors needed to be reflected in the SOA.</p>	<p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) to agree that the current economic growth metrics for 2014/2015 SOA metrics remain and that Richard Sweetnam and ACSEF start developing the proposed economic growth metrics for 2015/2016; (ii) to agree that baseline measures for the Partnership and the local economy be included within the 2015/2016 SOA, by means of a population profile; and (iii) to agree that Danny Logue, Paul Sherrington and Richard Sweetnam explore how the broader issue of skills and the impact of skills on the local population could be reflected within the SOA and report back to a future meeting by way of the 2015/2016 SOA review. <p>Richard Sweetnam/ACSEF Joanne Larsen/Richard Sweetnam Danny Logue/Paul Sherrington/Richard Sweetnam</p>

Topic	Discussion/Decision	Action By
Digital City Multi-lateral Priority Group <p>The Management Group heard from Rita Stephen who advised that the sole metric for the Digital City Multi-lateral Priority Group was superfast broadband availability and the data source for this was published annually from UK Fixed Broadband Data.</p> <p>The Management Group resolved: to agree that this was a single system, Aberdeen City Council, metric and therefore to remove the metric and the outcome from the SOA for 2014/2015 and that this area be in the SOA review for 2015/2016.</p> <p>Health and Wellbeing Thematic Group</p>	<p>The Management Group heard from Linda Smith who provided an overview of the process undertaken to select each of the proposed metrics, and thereafter spoke Partners through each of the metrics, highlighting the rationale for its inclusion, the availability of a valid data source and its target for 2014/2015.</p> <p>There followed an extensive discussion in relation to each of the proposed metrics, in particular the importance of the metrics being Partnership focused and not NHS metrics was highlighted. Specifically in this regard, Partners advised that for the number of alcohol brief interventions (ABI) being delivered to 'hazardous' drinkers in primary care in Aberdeen metric to remain in the SOA in future the interventions need to be across the Partnership and not just the NHS.</p> <p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) to agree to remove the % of clients who received alcohol treatment within 21 days of referral metric, on the basis that at present only NHS could make referrals; (ii) to agree to remove the proportion of population reporting to participate in sporting activity (including walking) in the last 4 weeks metric, on the basis of the reliability of the data source; (iii) to agree to remove the proportion of population reporting no participation in any sport or exercise activities in the last 4 weeks metric, on the basis of the reliability of the data 	Joanne Larsen Liz Smith/Health Wellbeing Group Taylor/Linda and Thematic Group

Topic	Discussion/Decision	Action By
	<p>source;</p> <p>(iv) to agree to remove the frequency of visits made to outdoors – one or more times per week metric, on the basis of the reliability of the data source; and</p> <p>(v) to agree to remove any single system metrics.</p> <p>Older People Thematic Group</p>	<p>The Management Group heard from Liz Taylor who provided a background to the Thematic Group wherein she explained that the Group had not yet been established. The Older People's theme was the responsibility of the CHP General Manager, and was discharged through the Health and Social Care Partnership Board. It was the intention to transfer this theme to an older people's group and as such, she had had a discussion with the Chair of the Older People's Advisory Group which was to be disbanded by Aberdeen City Council about it potentially becoming the Older People thematic group and they were agreeable to this.</p> <p>Thereafter, Liz circulated the proposed metrics for the 2014/2015 SOA for consideration. Partners noted that there was no data source identified for any of the metrics and that some metrics were single system.</p> <p>The Management Group resolved:</p> <p>to agree that Liz Taylor further review the Older People Thematic Group metrics for inclusion in the 2014/2015 SOA ensuring that all metrics were Partnership focused and had a reliable data source and that she discuss the proposed metrics with the Chair outwith meeting.</p> <p>Integrated Transport Multi-lateral Priority Group</p> <p>The Management Group heard from Joanna Murray who advised that the Integrated Transport Multi-lateral Priority Group had yet to be established, however in light of reviewing the proposed metrics she had noted that a number of the metrics proposed by Integrated Transport had been included in other Thematic and Multi-lateral Priority Group metrics and therefore suggested that instead of the Integrated Transport Multi-lateral Priority Group being established the Transport Manager and his team would attend the meetings of the</p>

Topic	Discussion/Decision	Action By
	<p>respective groups to support them in achieving their transport related metrics.</p> <p>Partners were supportive of the suggestion and agreed that the metrics that were not included within other groups submissions could be included in the population profile which was to be established for the Partnership.</p> <p>The Management Group resolved: to agree that the: (a) Integrated Transport be disbanded as a standalone Multi-lateral Priority Group; (b) Transport Manager and his team would attend the meetings of the respective groups to support them in achieving their transport related metrics; and (c) Integrated Transport outcomes and metrics be transferred into the relevant theme or to the population profile.</p> <p>Learning and Workforce Thematic Group</p>	<p>Joanna Murray/Hugh Murdoch/Joanne Larsen</p> <p>The Management Group heard from Gail Woodcock who provided an overview of the process undertaken to select each of the proposed metrics, and thereafter spoke Partners through each of the metrics, highlighting the rationale for its inclusion, the availability of a valid data source and its target for 2014/2015.</p> <p>There followed an extensive discussion in relation to each of the proposed metrics, in particular, Partners highlighted the volume of metrics and agreed that the Thematic Group needed to streamline the number of metrics and on reviewing should ensure that the metrics were partnership focused and added value.</p> <p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) in relation to the % of school leavers from public funded schools entering a positive destination metric, to note that a similar metric was also included within Children and Young People Thematic Group proposed metrics and to agree that it was a shared metric and was to be included in the SOA once and under one theme; (ii) to agree that a metric should only be contained in the SOA once and the same metric should not be contained under separate themes; (iii) to request the Learning and Workforce Thematic Group to review whether the metrics

Topic	Discussion/Decision	Action By
	<p>with Education Scotland as the sole data source were single system metrics rather than Partnership metrics;</p> <ul style="list-style-type: none"> (iv) to request the Learning and Workforce Thematic Group to confirm that ACVO held the data for the economic impact of volunteering in Aberdeen (per annum); (v) to agree that the number of individuals from under-represented groups in further/higher education metric be removed and included in the population profile; (vi) to agree to remove the % of population voting in elections/referendum metric, on the basis it was an Aberdeen City Council metric; (vii) to agree to remove the % of tenant participation groups that were registered metric, on the basis that it was an Aberdeen City Council metric; and (viii) to request the Learning and Working thematic Group to review and streamline the metrics on the basis of partnership interventions which were outcome focused, had a reliable data source, and were not business as usual. 	<p>Priority Families Multi-lateral Priority Group</p> <p>The Management Group heard from Neil Carnegie who proposed that metrics in relation to Priority Families be removed for 2014/2015. The Chair explained that this was an important area of work and highlighted that officers had an event in the near future and asked that officer identify potential metrics for inclusion.</p> <p><u>The Management Group resolved:</u> to request Neil Carnegie to identify potential metrics for the Priority Families theme for inclusion in the 2014/2015 SOA.</p> <p>Safer Communities Thematic Group</p> <p>The Management Group heard from Neil Carnegie who provided an overview of the process undertaken to select each of the proposed metrics, and thereafter spoke Partners through each of the metrics, highlighting the rationale for its inclusion, the availability of a valid data source and its target for 2014/2015.</p>

Topic	Discussion/Decision	Action By
	<p>There followed an extensive discussion in relation to each of the proposed metrics, in particular, Partners discussed whether a metric for domestic abuse should be added.</p> <p>The Management Group resolved: in relation to the % of adult residents stating they feel very safe or fairly safe when walking alone in the local neighbourhood after dark and increase the % of adult residents stating they feel very safe or fairly safe when walking alone in the local neighbourhood after dark metrics, to remove on the basis of reliance on the Scottish Household Survey.</p> <p>The Management Group resolved:</p> <ul style="list-style-type: none"> (i) to agree to remove any metrics reliant on data from the Scottish Household Survey and that all groups continue to work to identify reliable data sources; (ii) to request Joanne Larsen to draft a population profile for the Partnership and to submit it to a future meeting for consideration; and (iii) to request Thematic and Multi-lateral Priority Groups to redraft their proposed 2014/2015 SOA metrics on the basis of the actions recorded above, in consultation with Joanne Larsen, and that a further draft be submitted to its next meeting on 20 April and to note that on this basis of today's discussion and the actions to be undertaken an oral update on the progress with the SOA would be provided to the CPA Board at its meeting on 16 March 2015. 	<p>Neil Carnegie</p> <p>All Thematic and Multi-lateral Priority Groups Joanne Larsen</p> <p>All Thematic and Multi-lateral Priority Groups</p> <p>All Thematic and Multi-lateral Priority Groups</p>
3. Reporting Timeline	The Management Group had before it the proposed 2015 reporting timeline for Thematic and Multi-lateral Priority Groups.	<p>Joanne Larsen</p> <p>The Management Group resolved: in light of the decision earlier on today's agenda that the 2014/2015 SOA would be resubmitted to the next CPA Management Group meeting (item 2 of this minute refers), to request Joanne Larsen to redraft the reporting timeline and to agree that no Thematic or Multi-lateral Priority Group would report to the next meeting.</p>
4. Countesswells PLACE Group	The Management Group had before it the minute of the Countesswells PLACE Group meeting of 27 January 2015.	

Topic	Discussion/Decision	Action By
	<u>The Management Group resolved:</u> to defer consideration to its next meeting on 20 April 2015.	

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Community planning

Turning ambition into action



ACCOUNTS COMMISSION

AUDITOR GENERAL

Prepared by Audit Scotland
November 2014

The Accounts Commission

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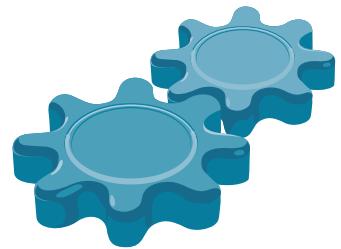
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- government agencies, eg the Scottish Prison Service, Historic Scotland
- NHS bodies
- further education colleges
- Scottish Water
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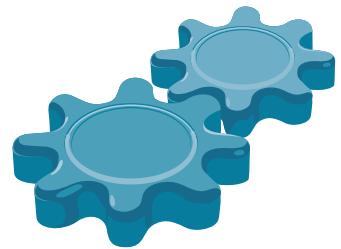
Audit Scotland is a statutory body set up in April 2000 under the Public Finance and Accountability (Scotland) Act 2000. We help the Auditor General for Scotland and the Accounts Commission check that organisations spending public money use it properly, efficiently and effectively.

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Summary



Key messages

- 1** Since the publication of the Statement of Ambition, there is a strong sense of renewed energy nationally and locally to improving community planning. Community planning continues to become more of a shared enterprise, with more active participation by partners and evidence of more shared ownership of the priorities in Single Outcome Agreements (SOAs). Although aspects of community planning are improving, leadership, scrutiny and challenge are still inconsistent. There is little evidence that CPP boards are yet demonstrating the levels of leadership and challenge set out in the Statement of Ambition.

- 2** The Scottish Government and the National Community Planning Group (NCPG) have taken steps to promote the importance of community planning across government and in partner organisations. The National Community Planning Group is now starting to focus its activity on the areas where national leadership is most needed. It recently issued a set of key principles that are intended to set out an ambitious but realistic improvement agenda for community planning that draws on the practical experience of implementing the Statement of Ambition by CPPs. It now needs to set out what this refocused approach to community planning means for the Statement of Ambition, its expectation of CPPs and how success in implementing these principles will be assessed. Alongside that, the Scottish Government needs to demonstrate a more systematic approach to implementing its outcomes approach by clarifying the links between longer-term outcomes, its priorities and performance measures across all policy areas.

- 3** Many CPPs are still not clear about what they are expected to achieve and the added value that can be brought through working in partnership. Although SOAs have improved, many still do not set out the specific improvements CPPs are aiming to achieve. They also lack a focus on how community planning will improve outcomes for specific communities and reduce the gap in outcomes between the most and least deprived groups in Scotland. This reflects a wider ambiguity both nationally and locally about the extent to which the focus of community planning should be on local needs or about delivering national priorities. CPPs need to use local data to help set relevant, targeted priorities for improvement that will address inequalities within specific communities.

- 4** CPPs are starting to better understand what resources they have available to deliver their SOA. They have begun to identify how partners use their resources, such as money and staff, in particular

there
have been
significant
national
developments
in community
planning

priority areas or specific communities. But discussions about targeting these resources at their priorities and shifting them towards preventative activity are still in the early stages. CPPs do not yet know what a strategic approach to prevention will look like, and in many areas the evidence base for this is underdeveloped. The current pace and scale of activity is contributing to an improved focus on prevention but is unlikely to deliver the radical change in the design and delivery of public services called for by the Christie Commission.

- 5** At present, there is no coherent national framework for assessing the performance and pace of improvement of CPPs. This means that there is no overall picture of how individual CPPs are performing and what progress is being made towards the effective implementation of the Statement of Ambition. The Scottish Government is now starting to use existing performance management and accountability arrangements to monitor the contribution of public bodies to community planning. But it is not yet consistently holding central government bodies or the NHS to account for their performance within CPPs.
 - 6** The Statement of Ambition places community planning at the core of public service reform, but many CPPs are not clear about what their specific role in these programmes should be. While some CPPs have a good overview of public service reform in their area, CPP oversight of and engagement with some important aspects of reform, such as the integration of health and social care services and national reform programmes such as the Early Years Collaborative, remains underdeveloped. Scottish Government guidance is not clear enough about the specific role that CPPs should play in the implementation of public service reforms.
-

Recommendations

The National Community Planning Group should:

- set out what its refocused approach to community planning means for the Statement of Ambition and its performance expectations of CPPs.

The Scottish Government and COSLA should:

- clarify their performance expectations for CPPs in the context of the National Community Planning Group's refocused approach to community planning
- develop a national framework for assessing and reporting progress in improving community planning and implementing the Statement of Ambition
- work with the Improvement Service and other national improvement agencies to establish and coordinate a programme of well-targeted, practical support that will help CPPs to implement the Statement of Ambition effectively.

The Scottish Government should:

- ensure that future guidance on the implementation of public service reform programmes is clear about the specific role that CPPs should play and the contribution they are expected to make in supporting improved outcomes
- implement its outcomes approach more systematically across all policy areas
- ensure that its review of national performance measurement arrangements streamlines approaches and creates a stronger prevention and outcome focus
- hold central government bodies and the NHS to account more consistently for their performance within CPPs
- review the role of location directors.

CPPs should:

- strengthen the effectiveness of the leadership, challenge and scrutiny role at CPP board level
- streamline local partnership working arrangements and ensure they are aligned with local improvement priorities
- ensure that local community planning arrangements are clear about who is responsible for:
 - agreeing the priorities of the CPP and SOA
 - allocating resources and coordinating activity
 - implementing activity
 - scrutinising performance and holding partners and others to account for their performance
- work with the new health and social care integration joint boards to develop services that meet the needs of local people and support SOA priorities
- set clearer improvement priorities focused on how they will add most value as a partnership, when updating their SOA
- use local data on the differing needs of their communities to set relevant, targeted priorities for improvement
- start to align and shift partners' resources toward agreed prevention and improvement priorities.

Background

1. Community planning is the process by which councils and other public bodies work together, with local communities, businesses and voluntary groups, to plan and deliver better services and improve the lives of people who live in Scotland. The Local Government in Scotland Act 2003 provides the statutory basis for community planning. Community planning is led by Community Planning Partnerships (CPPs). There are 32 CPPs, covering each council area, which include representatives from the following:

- The council: It has a statutory duty to 'initiate, facilitate and maintain' community planning. It is therefore responsible for taking the steps necessary to ensure community planning takes place.
- Statutory partners: NHS boards, Scottish Enterprise, Highlands and Islands Enterprise, Police Scotland, Scottish Fire and Rescue Service and Regional Transport Partnerships.
- Other partners: These include other public bodies, further and higher education institutions, voluntary groups, community groups and business organisations.

2. Scotland's public sector, like those across the UK and beyond, is facing pressure on budgets because of a combination of increased demand for services and reduced funding.¹ At the same time, there continues to be a wide gap in outcomes between and within communities. For example, healthy life expectancy, crime levels, and the chance of being in work are better in wealthier communities than the more deprived ones. Significant changes are needed in how public services are provided to meet these challenges.

3. In March 2012, the Scottish Government and the Convention of Scottish Local Authorities (COSLA) published a shared statement on their expectations for community planning (the Statement of Ambition).² It drew on the findings of the Christie Commission and highlighted that significant improvements to community planning were needed to respond to the challenges of reducing public finances while demand for services increased, and to address the widespread inequalities of outcomes seen across communities in Scotland.³ The Statement of Ambition places CPPs at the centre of public service reform and emphasises the important role they have to play in delivering better outcomes for communities by:

- planning and providing services better to meet the differing needs of local people and to reduce inequalities within populations and between areas
- changing the way services are provided so that they are more focused on preventing problems rather than dealing with them when they happen (eg, reducing reoffending)
- getting local communities more involved in planning and providing local services
- providing the foundation for local oversight of implementation of the Scottish Government's wider public service reform initiatives, such as health and social care integration.

Recent developments in community planning

4. Since our report [*Improving community planning in Scotland \(PDF\)*](#) in March 2013, there have been significant national developments in community planning, all of which we explore further in this report.⁴

- In summer 2013, all 32 CPPs developed new Single Outcome Agreements (SOAs) based on guidance reflecting the Statement of Ambition.⁵ SOAs are agreements between the Scottish Government and CPPs that set out how CPPs will work towards improving outcomes for local people. Each draft SOA went through a quality assurance process by senior leaders from various organisations. They agreed strengths and areas for development with CPPs, before the SOAs were agreed with ministers and council leaders.
- In September 2013, the Scottish Government and COSLA issued an agreement setting out their expectation that partner organisations would work together through CPPs to target resources towards the priorities in their SOA.⁶
- In December 2013, the Scottish Government announced changes to community justice services. This included transferring responsibility from eight Community Justice Authorities to the 32 CPPs for planning and overseeing these services.
- In June 2014, the Scottish Government introduced the Community Empowerment (Scotland) Bill to the Scottish Parliament, which includes proposals for:
 - establishing in legislation a set of national outcomes for Scotland
 - providing greater rights for communities to participate in planning and managing public services
 - placing CPPs on a statutory basis, by putting a legal duty on a range of public sector bodies to work together in partnership to plan to improve outcomes for their areas.
- In July 2014, the chair of the National Community Planning Group wrote to the chairs of all CPPs, emphasising that CPPs should focus their collective activity on where they can make the most difference for their communities, with particular attention on reducing inequalities.

5. The Statement of Ambition expects community planning to be at the core of wide-ranging public service reform. On 1 April 2013, a new national police service and a single fire and rescue service for Scotland began operating. A programme of reform of colleges that includes mergers and the restructuring of the sector into 13 regions is ongoing. The Scottish Parliament passed the Public Bodies (Joint Working) (Scotland) Act in February 2014, requiring all councils and NHS boards to integrate health and social care services.

About this report

6. This report provides a national update on community planning in Scotland since March 2013. It assesses progress locally and nationally and identifies opportunities for further improvement. We have sought to capture the direction of travel for community planning in the context of the ambitious long-term agenda for improvement set out in the Statement of Ambition. Although there are common themes emerging from our work, we recognise that each CPP has its particular history and faces its own specific local challenges. CPPs need to address these local challenges alongside the significant shared strategic challenges, such as reducing resources and dealing with increasing demand for public services, that face the whole of the public sector. A **Summary** is provided on progress against the recommendations in *Improving community planning in Scotland (PDF)* .

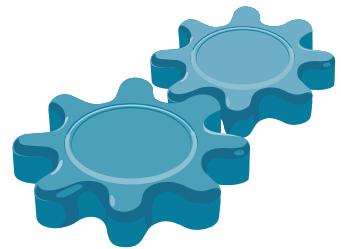
7. We have based our assessment of local progress on our audits of five CPPs in 2014 (Glasgow, Falkirk, Moray, West Lothian and the Orkney Islands), and follow-up work in three CPPs we audited in 2012/13 (Aberdeen City, North Ayrshire and Scottish Borders). We have used examples from these audits to highlight local progress and areas for improvement. Our audit methodology is in the **Appendix**.

8. The report is structured around four key themes:

- Part 1: How CPPs are led and run
- Part 2: How CPPs are planning for communities
- Part 3: How CPPs are using resources
- Part 4: Monitoring performance and helping CPPs improve.

Part 1

How CPPs are led and run



Key messages

- 1** Since the publication of the Statement of Ambition, there is a strong sense of renewed energy nationally and locally to improving community planning. Community planning continues to become more of a shared enterprise, with more active participation by partners and evidence of more shared ownership of the priorities in SOAs. Although aspects of community planning are improving, leadership, scrutiny and challenge are still inconsistent. There is little evidence that CPP boards are yet demonstrating the levels of leadership and challenge set out in the Statement of Ambition.

- 2** The Scottish Government and the National Community Planning Group have taken steps to promote the importance of community planning across government and in partner organisations. The National Community Planning Group is now starting to focus its activity on the areas where national leadership is most needed. It recently issued a set of key principles that are intended to set out an ambitious but realistic improvement agenda for community planning that draws on the practical experience of implementing the Statement of Ambition by CPPs. It now needs to set out what this refocused approach to community planning means for the Statement of Ambition, its expectation of CPPs and how success in implementing these principles will be assessed.

- 3** The practical links between the Scottish Government's public service reform programmes and community planning are not clear. Many CPPs are unsure about what their specific role in these programmes should be and what this means in practice, in particular in the integration of health and social care services.

there are a range of views, both nationally and locally, about the role and purpose of community planning

Partners are demonstrating more collective ownership of community planning and participation has improved

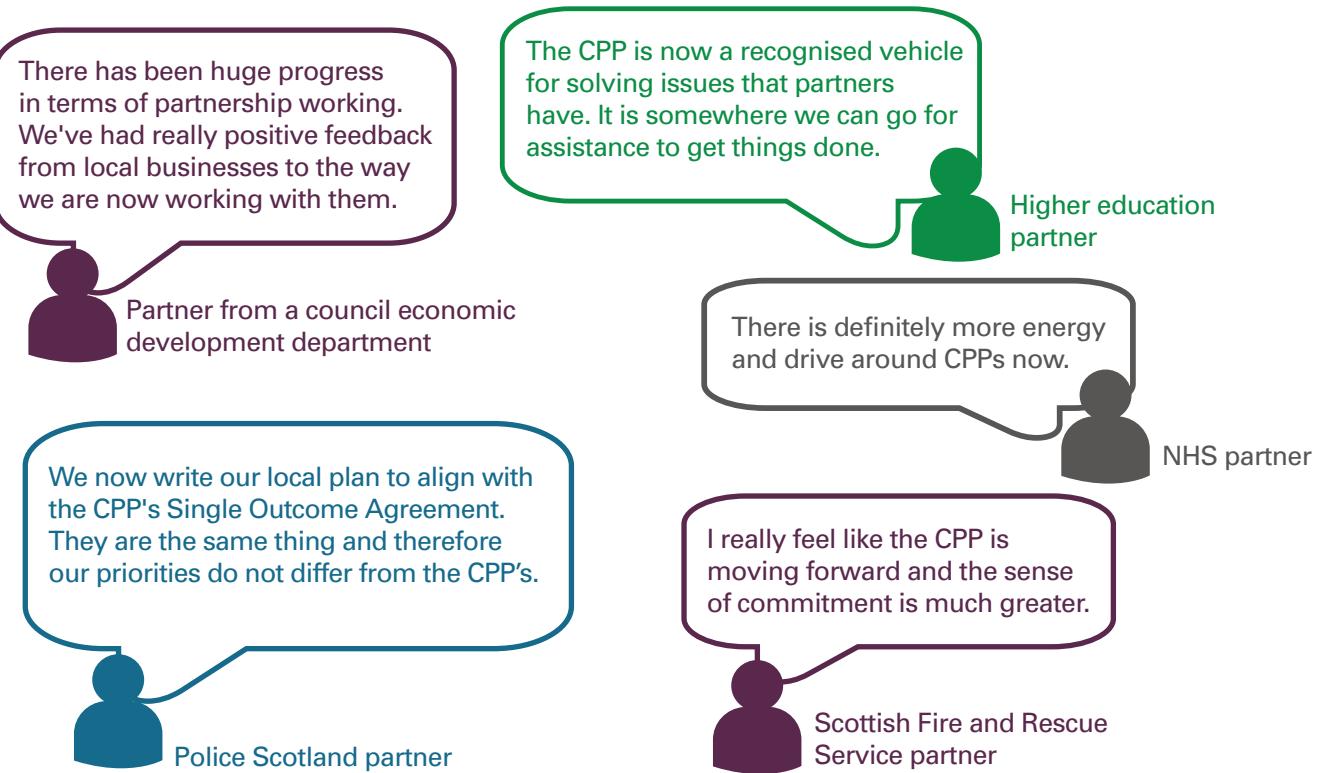
- 9.** Community planning was introduced as a statutory duty on some public bodies in Scotland in 2003 ([paragraph 1, page 7](#)).⁷ In the decade since its introduction, community planning has helped to develop a better understanding between partners of each other's business, created a greater climate of trust and strengthened the networks required for effective joint working.

10. Before the introduction of the Statement of Ambition in 2012, community planning had tended to be seen as a council-led exercise in which partners participated but did not lead.⁸ In 2013, we reported that partners were starting to see community planning as a shared enterprise rather than something that councils led. We are now seeing partners increasingly demonstrating collective ownership of the priorities in the SOA ([Exhibit 1](#)). Partners are starting to make the CPP's priorities part of their own organisation's work. For example:

- the corporate plan for Borders College for 2013–16 highlights how the college is contributing to specific outcomes in the SOA
- in North Ayrshire, the Scottish Fire and Rescue Service has set up its local management structures to mirror the six neighbourhoods that the CPP is focusing its activity on ([Case study 3, page 23](#))
- Scottish Enterprise has allocated a location director role to 19 of its most senior staff, who lead on Scottish Enterprise's contribution to the 27 CPPs it is represented on.

Exhibit 1

What do partners say?



Source: Audit Scotland

11. Non-council partners are demonstrating a greater leadership role in CPPs. For example, in Scottish Borders CPP the Chief Executive of Eildon Housing Association chairs the Future Services Reform thematic group, and chief officers from various partner organisations are leading on different aspects of the CPP's

improvement programme. Increased participation and leadership by partners provides a good foundation for the proposals in the Scottish Government's Community Empowerment (Scotland) Bill to:⁹

- remove the existing statutory duty on councils to 'initiate, facilitate and maintain' community planning
- place new statutory duties on more partners to help the CPP fulfil its functions and improve outcomes for communities.

12. In most areas, councils have a unique role as the only organisation whose services cover the council area (in six areas, the council and NHS board have the same boundaries – Dumfries and Galloway, Fife, Orkney, Scottish Borders, Shetland and Western Isles). Councils also have a distinctive role in community planning, given the democratic nature of local authorities. This means that councils have a particular role in understanding the interests and needs of their local community. It is important that, under the proposed new arrangements, an appropriate balance is struck by councils between demonstrating a community leadership role and allowing other partners to contribute equally to the community planning process.

13. The number of dedicated staff available to manage and support the operation of CPPs varies. There are some examples of jointly funded posts, for example between the council and NHS board, but overall council staff do most of the day-to-day management of CPPs. For most CPPs the level of support they receive reflects an historic approach to supporting community planning. If the statutory duty on councils to facilitate community planning is removed, partners will need to ensure that they consider collectively how the process will be resourced and supported in future to deliver the expectations set out in the Statement of Ambition.

14. All partners have an important contribution to make towards improving outcomes for local people. The specific contribution of national and regional bodies at a local level will depend on the extent to which local CPP priorities reflect the individual body's role and responsibilities. CPPs now need to gain a better understanding of the specific contributions that individual partners can make to improving agreed outcomes. This will include partners using their resources, including money, skills and equipment, to meet shared and agreed community planning priorities ([Part 3](#)).

Leadership at a national level is improving but many CPPs are not clear about what they are expected to achieve

15. The Statement of Ambition sets ambitious and challenging improvements for community planning to make ([paragraph 3, page 7](#)). This has contributed to a sense of renewed energy in CPPs and more active participation by partners in the community planning process. The Scottish Government, COSLA and the National Community Planning Group (NCPG) have an important role in providing leadership around the expectations of the Statement of Ambition.

16. The Scottish Government has taken steps to highlight the importance of community planning in some areas of government and in some partner organisations. For example, it emphasised the role of community planning in the Community Empowerment (Scotland) Bill and in guidance to NHS boards to

include specific reference to community planning in their Local Delivery Plans.¹⁰ It is also working to better embed community planning in the work of national and regional bodies, such as the police service, fire and rescue service, colleges and non-departmental public bodies (eg, Scottish Enterprise).

17. The NCPG was established in 2012 to provide the strategic leadership needed to push the community planning process forward, in line with the Statement of Ambition. Members are senior leaders from across the public sector, ministers, elected members and the third sector. Since its first meeting in August 2012, the group has met eight times. The group has helped to raise awareness of community planning, and highlight the importance the Scottish Government places on it, at a senior level across the public sector. But it has not met the expectations of CPPs and individual partner organisations, who want clear and consistent messages about what successful community planning looks like in practice.

18. In October 2013, the NCPG agreed four priority areas for its programme of work, where it feels it can most usefully provide leadership. These are:

- joint resourcing
- governance and accountability
- community engagement
- prevention.

19. The NCPG also re-established a Senior Officer Group to provide it with advice and support. In doing this, the NCPG recognised that it needed to do more to use members' practical experience of delivering community planning on the ground to inform CPP policy-making and guidance, and to ensure more effective sharing of emerging good practice with CPPs. Membership of the Senior Officer Group includes representatives from COSLA, Improvement Service, NHS boards, Scottish Government, Society of Local Authority Chief Executives (SOLACE) and Voluntary Action Scotland. The group aims to provide more focus and momentum to the NCPG.

20. Although the Statement of Ambition provided a renewed focus on community planning, it is being interpreted in different ways. There are a range of views, both nationally and locally, about the role and purpose of community planning and what it can be expected to achieve. A significant area of ambiguity is the extent to which community planning should meet specific local concerns and the weight that CPPs should give to national priorities. There are also differences of opinion about the extent to which community planning should focus on prevention and inequalities or whether it should have a broader role in improving and reforming mainstream public services. This has important implications for the level and range of resources that CPPs see as falling under their influence. This in turn influences the likely scope and potential impact of community planning in the local area.

21. In June 2014, the NCPG considered a paper by the Senior Officer Group on the important role of CPPs in improving prevention, joint resourcing, community engagement and reducing inequalities. Following that meeting, the chair of the NCPG wrote to the chairs of all CPPs highlighting how CPPs can maximise their

impact by focusing on these four areas. The letter emphasised that CPPs should focus their collective activity on where they make the biggest difference to local people. This was intended to set out an ambitious but realistic improvement agenda for community planning that draws on the experience within CPPs in implementing the Statement of Ambition. The NCPG now needs to set out what it expects CPPs to do to deliver this refocused approach to community planning. This refocused approach also needs to be supported and endorsed by the Scottish Government and COSLA as the joint signatories of the Statement of Ambition with key leadership roles in community planning.

22. Effectively implementing the proposed refocused approach to community planning will require a significant programme of change and improvement at both national (NCPG, Scottish Government and COSLA) and local level (individual CPPs). The nature and scale of the change required is such that it will only be delivered by strong and sustained leadership over time.

Governance and accountability in CPPs remains weak and there is limited evidence of challenge at a board level

23. Although aspects of community planning are improving, leadership, scrutiny and challenge remain inconsistent. The Statement of Ambition is clear that 'CPPs must be genuine boards with all the authority, behaviours and roles that implies for them and constituent partners'. Although this language was intended to improve the level of challenge within CPPs, it has created confusion among partners. It implies that partners should be formally accountable to the CPP board, but there is no statutory basis for this. Partners' formal lines of accountability are not to the CPP board, but to their own organisation's board, Scottish ministers, the Scottish Police Authority (in the case of Police Scotland), the Scottish Fire and Rescue Service Board, or to the communities that elected them (in the case of local authorities).

24. CPP boards are not yet fulfilling their role effectively. Strategic leadership, oversight and challenge still tend to be happening at a level, or at levels, below the CPP board. Many boards are overseeing the community planning process but are not showing leadership by setting ambitious improvement targets and holding partners to account for their contribution to delivery of the local SOA. In many CPPs, further work is needed at board level to clarify where added value can be achieved through working in partnership and what that means for partner organisations. Those CPPs that have been able to agree clear and jointly agreed priorities for improvement are now able to focus on the necessary next steps of aligning resources to those priorities and establishing effective performance management arrangements.

25. Partners need to create a more effective leadership, challenge and scrutiny role in CPP boards. But this depends less on formal accountability arrangements and more on trust between partners, a shared commitment to change, and a culture that promotes and accepts challenge among partners. Support is required for CPPs to develop the skills and culture that are needed to create effective challenge within CPP boards given the difficult balance this requires between building and maintaining good ongoing relations and the ability to hold colleagues, and in some cases peers, to account.

26. Coordinating and managing partnership working is complex for CPPs, given the range of leadership boards, local thematic groups, national reform activity and

other forums that are in place in most areas. This can mean that the leadership and oversight of partnership working will often be complicated leading to a lack of clarity about who is holding who to account for what in the local partnership structures. CPPs need to streamline their local partnership working arrangements and ensure they are aligned with their local improvement priorities.

27. An important element of implementing effective governance and accountability arrangements for community planning is ensuring that there is sufficient clarity and distinction between roles and responsibilities. It should be clear who is setting the direction and agreeing the priorities for the CPP, how and when resources are allocated, who is implementing the changes set out in the SOA and where holding to account takes place.

28. Many CPPs are still in the process of agreeing or refining what performance measures will underpin their SOA and clarifying what specific contributions partners will make to implementing the SOA. These are some of the fundamental buildings blocks of effective governance and are necessary prerequisites for effective scrutiny and challenge.

Councillors and non-executive members are becoming more involved in community planning

29. In 2013, we found that councillors and non-executive members did not clearly understand their role in the community planning process, and this was a barrier to providing effective leadership and challenge.¹¹ Since then, some CPPs have taken action to help clarify this role and get them more involved. For example:

- Falkirk CPP is developing a partnership agreement to clarify the CPP's purpose and the roles and responsibilities of the thematic groups, members of the board (including councillors and non-executive members) and council officers who support the CPP's work. The agreement aims to strengthen both the CPP's overall governance arrangements and partners' individual and collective responsibility for achieving outcomes.¹²
- Glasgow CPP reviewed its structures and established 21 area partnerships that match the council's multi-member wards. This restructuring should allow councillors to become more involved with community planning and play an important local leadership role.¹³

30. Councillors and non-executive members are becoming more aware of, and involved in, community planning both at a CPP board level and at a neighbourhood level. But some, who are used to working in a single organisation, are still finding it hard to adapt to working in a partnership setting, as opposed to chairing or serving on a council committee or a board.

The links between community planning and national public service reform programmes are not clear

31. The Statement of Ambition makes it clear that community planning and SOAs should provide the foundation for effective partnership working within which wider public service reforms will happen. These reforms represent major changes to the way public services are arranged and provided. They include establishing single police and fire services, integrating adult health and social care services, restructuring the college sector, and welfare reform. Some CPPs have reflected these reforms in changes to their structures. For example, Scottish Borders CPP

has established a Public Services Reform thematic group. But the extent to which CPPs recognise their role in public service reform and seek to integrate it into their work varies.

32. The Scottish Government's public service reforms include large national programmes, such as the Change Fund and the Early Years Collaborative. While some CPPs have a good overview of public service reform in their area overall, CPP oversight of and engagement with some of these important aspects of reform remains underdeveloped. Scottish Government guidance is not clear enough about the specific role that CPPs should play in the implementation of public service reforms. Going forward, as the Scottish Government refines its approach to public service reform, it should consider at the outset what role and contribution community planning should play in any new developments.

33. The Statement of Ambition notes that community planning and SOAs 'must be core to the implementation of proposals for integration of health and adult social care services and in the operation of the proposed Health and Social Care Partnerships'. But national policies relating to this programme include little reference to the role of community planning.¹⁴ Many CPPs are unsure about their role in health and social care integration and how the practical aspects should operate. For example, the legislation on health and social care integration requires the new health and social care partnerships to identify at least two localities, or neighbourhoods, and to include representatives from them in a strategic planning group. Recent work led by the Joint Improvement Team found that partners:¹⁵

- are not clear about the relationship between CPPs and the locality planning aspect of health and social care integration
- are concerned about the lack of connectedness between CPPs and proposed health and social care partnerships
- are not clear about the respective roles, relationships, delegated authority and reporting accountability for CPPs, health and social care partnerships and localities
- want clarity on how guidance on SOAs, the Community Empowerment (Scotland) Bill, the revised role of CPPs and NHS Local Delivery Plans all relate to each other.

34. We found that activity to integrate health and social care services has been happening largely in parallel to community planning, with many CPP boards simply noting update papers on plans for integration. This may reflect the operational nature of some of the decisions that councils and NHS boards need to make about the model and scope of future health and social care services, not all of which will be directly relevant to all CPP partners. But, given the significant impact these decisions will have on other partners, such as the housing and voluntary sectors, it is important that CPPs give them greater consideration. CPPs need to work with the new health and social care integrated joint boards to develop services that meet the needs of local people and support their SOA priorities. In some CPP areas, such as Moray, health and social care integration planning already formally feeds into the CPP through a thematic group dedicated to this task.

35. The creation of single police and fire and rescue services for Scotland changed the oversight and scrutiny arrangements in ways that offered flexibility for the role of CPPs and related partnership activity such as community safety. A range of different oversight models have been adopted across Scotland. There is no evidence at this stage of these changes impacting negatively on the participation of police and fire and rescue services in local community planning activity.

Recommendations

The National Community Planning Group should:

- set out what its refocused approach to community planning means for the Statement of Ambition and its performance expectations of CPPs.

The Scottish Government and COSLA should:

- clarify their performance expectations for CPPs in the context of the National Community Planning Group's refocused approach to community planning.

The Scottish Government should:

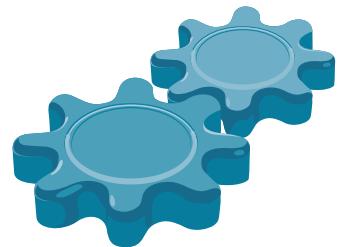
- ensure that future guidance on the implementation of public service reform programmes is clear about the specific role that CPPs should play and the contribution they are expected to make in supporting improved outcomes.

CPPs should:

- strengthen the effectiveness of the leadership, challenge and scrutiny role at CPP board level
 - streamline local partnership working arrangements and ensure they are aligned with local improvement priorities
 - ensure that local community planning arrangements are clear about who is responsible for:
 - agreeing the priorities of the CPP and SOA
 - allocating resources and coordinating activity
 - implementing activity
 - scrutinising performance and holding partners and others to account for their performance
 - work with the new health and social care integration joint boards to develop services that meet the needs of local people and support SOA priorities.
-

Part 2

How CPPs are planning for communities



Key messages

- 1** Many CPPs are still not clear about what they are expected to achieve and the added value that can be brought through working in partnership. CPPs need to use local data to help set relevant, targeted priorities for improvement that will address inequalities within specific communities.
- 2** Although SOAs have improved, many are still not clear about the specific improvements CPPs are aiming to achieve. They lack a focus on how community planning will improve outcomes for specific communities and reduce the gap in outcomes between the most and least deprived groups in Scotland. This reflects a wider ambiguity both nationally and locally about the extent to which the focus of community planning should be on local needs or about delivering national priorities. The Scottish Government needs to demonstrate a more systematic approach to implementing its outcomes approach, by clarifying the links between its national priorities and performance measures and the achievement of longer-term local outcomes.
- 3** CPPs continue to improve the way they consult with local people. But they are not yet routinely working with communities to make sure local people can influence or change the way partners deliver services. The third sector has an important role in working with communities and delivering services. The Improvement Service, Voluntary Action Scotland and the Scottish Government are working with partners to help them better understand the contribution the third sector can make to community planning.

**building
blocks to
support
improvement
in
community
planning are
in place, but
there is still
more to do**

New SOAs place more emphasis on local priorities, but many lack a clear focus on what improvements CPPs aim to achieve

- 36.** Community planning has an important role in the Scottish Government's outcomes-based approach to delivering its objectives. The Scottish Government's National Performance Framework underpins this approach. The framework sets out the Scottish Government's purpose, its strategic objectives, the national outcomes it wants to achieve, and national indicators that track progress towards the achievement of the national outcomes. The SOA guidance states that the direction provided by the National Performance Framework is central to community planning and that SOAs should demonstrate how local outcomes relate to one or more of the national outcomes.¹⁶ The Statement of Ambition

also notes that local circumstances and priorities must be considered within the context of the National Performance Framework.

37. We previously reported that CPPs were not clear enough about the priorities for improvement in their area.¹⁷ We found that SOAs tended to be summaries of existing planned actions, covering all national outcomes, without clearly focusing on things that matter most for the local area.

38. COSLA and the Scottish Government jointly issued revised guidance on SOAs at the end of 2012.¹⁸ This was based on the expectations of community planning in the Statement of Ambition. It highlighted the need for SOAs to:

- demonstrate a clear and evidence-based understanding of local needs and opportunities, including the inequalities facing different areas and population groups
- set out clear and agreed priorities for improving local outcomes
- demonstrate a commitment to working with local communities to help achieve outcomes
- promote early intervention and preventative approaches in reducing inequalities, including a specific plan for how to prevent them.

39. The guidance also stated that SOAs should focus on the following six national priorities:

- economic recovery and growth
- employment
- early years
- safe and stronger communities and reducing offending
- health inequalities and physical activity
- outcomes for older people.

40. All CPPs drafted a new SOA based on the guidance from COSLA and the Scottish Government in early 2013. These SOAs went through a quality assurance process by senior leaders from various public bodies and other organisations such as the Improvement Service. The quality assurance teams agreed strengths and areas for development with CPPs, before the SOAs were agreed with ministers and council leaders in September 2013. The quality assurance process found that:

- all 32 SOAs were better developed than previous versions
- many CPPs had a strong, evidence-based understanding of place and communities
- in most cases, partners had collaborated effectively to set priorities

- all SOAs demonstrated a strategic commitment to the preventative agenda and many had identified existing preventative action
- nearly all CPPs were taking action on the six national priorities in a way that reflected local needs.

41. Although the SOAs published in 2013 place more emphasis on local priorities, tackling inequalities and prevention, many do not provide a true plan for the areas and communities that they serve. Many SOAs do not clearly focus on the specific improvements that community planning is trying to achieve. Few are clear about how community planning will improve outcomes for specific communities and reduce the gap in outcomes between the most and least deprived groups. But some SOAs, such as Glasgow CPP's, have identified a small number of specific priorities for their area with associated outcomes ([Case study 1](#)).

Case study 1

Identifying priorities in Glasgow CPP

The SOA for Glasgow CPP for 2008–11 had over 20 priorities. The new SOA, agreed in August 2013, identifies three thematic priorities over the next ten years: alcohol, youth employment and vulnerable people.

The CPP used available data in selecting these three priorities and has identified outcomes for each of them. It selected these priorities as they affect the work of all partners to varying extents and are interlinked. For example, misuse of alcohol could affect an individual's ability to maintain employment and good health.

In agreeing these three priorities, the CPP has made an important shift towards a more long-term, preventative approach to public services; one that aims to break the cycle of poverty and poor health. The partners in the CPP, in agreeing this focus, have demonstrated strong collective leadership and determination to tackle important social and cultural issues that affect a wide cross-section of people in Glasgow.

Source: *Glasgow Community Planning Partnership*, Audit Scotland, April 2014

The Scottish Government needs to be more systematic in implementing its outcomes approach

42. There is ambiguity both nationally and locally about the extent to which the focus of community planning should be about local needs and 'place' or about delivering national priorities. This is reflected in the ongoing focus on national input/output measures in many current Scottish Government performance measurement arrangements, rather than a focus on places and outcomes. The Scottish Government has clearly set out what it wants to achieve in the National Performance Framework, but it needs to demonstrate a more systematic approach to implementing its outcomes approach. At present, many performance management frameworks are still heavily focused on inputs and processes and lack a clear prevention focus. The Scottish Government has recognised this and is

working with SOLACE and the Improvement Service to identify opportunities for streamlining its performance framework and creating a stronger prevention and outcome focus. As part of this process, the Scottish Government needs to clarify the role that it expects community planning to play in supporting the delivery of national outcomes. In addition, it also needs to more securely embed its approach to planning for outcomes across the whole of the government so that the contribution of all parts of government to supporting delivery of national priority outcomes is identified and understood.

CPPs need to get better at using data to understand local areas and target their improvement activity

43. Overall, CPPs need to make better use of data to improve their understanding of the differing needs of their communities, and to set relevant priorities and identify actions for improvement. Most CPPs are using data at a CPP level, but the more well-developed SOAs use data at a neighbourhood level. For example, North Ayrshire CPP has produced reports on the six neighbourhoods where it is focusing its activity. These present a comprehensive profile of each area. They draw on data from sources including the Scottish Index of Multiple Deprivation (SIMD), the 2011 UK census and partner organisations. The CPP is focusing on analysing data at a very localised level, in some cases using data-sets as small as 20 households, to help it target its activity more effectively towards areas of need.

44. CPPs can do more to use data to monitor outcomes at a neighbourhood level, and some CPPs are taking action to do this. For example, West Lothian CPP has employed a data analyst to measure outcomes at local level ([Case study 2](#)).

Case study 2

Making better use of data in West Lothian CPP

West Lothian CPP has recognised that using data effectively is important to develop a successful CPP. The council recruited a data analyst for the CPP in February 2014, tasked with developing local profiles for areas in West Lothian. The CPP aims to use the data in these local profiles to gain a better understanding of its communities, so that it can:

- target resources, such as funding and staff, to where they are most needed, for both individuals and communities
- try to predict, and then prevent, specific issues arising in the area
- gather evidence to measure the impact the CPP has on the outcomes in its SOA.

There are plans for the data analyst to use geographic information system (GIS) software to identify communities' needs at a very local level. This will help to bring together data across many indicator areas to build up a comprehensive picture of local communities in the CPP area. As part of this process, the data analyst is working closely with partners across the CPP to gauge where they could provide any additional data and where more detailed data would be helpful in their work.

The CPP hopes to see benefits by using a wealth of information that has never been used to full effect and to share relevant data across the

partnership. Increasing the CPP's ability to analyse data should help it to develop a better understanding of West Lothian and its residents.

Source: *West Lothian Community Planning Partnership*, Audit Scotland, October 2014

45. Some CPPs reported difficulties in making full use of local data because some information was not available at neighbourhood level. Examples included data on road safety, crime and fire incidents. Others reported problems in sharing data with partners for technical and cultural reasons, for example because of data protection problems or partners using different information systems and procedures. There are particular challenges for CPPs that operate in rural areas making use of SIMD data. This is because deprivation is often dispersed across isolated pockets in rural areas making numbers small and difficult to work with. Work is happening at a national level to help CPPs use data more effectively. For example:

- the Improving Evidence and Data Group was established in March 2013, and includes representatives from SOLACE, COSLA, the Scottish Government and the Improvement Service. It is exploring ways to help CPPs use and analyse local data and evidence to improve outcomes for local communities, including engaging with the Scottish Government about where there is a need for more data at a local level
- the Improvement Service is redeveloping and expanding the Viewstat mapping tool, which allows users of the system, which is available to CPPs, to visualise neighbourhood information in map form
- three analysts from National Services Scotland Public Health Intelligence (NSS PHI) have been located in North Lanarkshire and Renfrewshire Councils. This initiative has been mutually beneficial. The analysts have supported CPP initiatives by analysing local data, and NSS PHI has gained a better understanding of CPPs' needs and the value of local information and insight. CPPs have reported that local initiatives have made progress as a direct result of the analysts' involvement.

CPPs are improving how they consult with local people, but work with communities to improve local services tends to be small scale

46. The Statement of Ambition expects CPPs to get local people more involved in improving outcomes within their communities. The Scottish Government's Community Empowerment (Scotland) Bill is intended to strengthen the legal basis for doing this. It is important that local communities are involved in changing and improving the way services are provided, to ensure that they meet their needs. CPPs continue to improve how they consult with local people. But, they are not yet routinely working with communities to ensure they influence the CPP's priorities or help to change the way services are provided.

47. Individual partners are working closely with communities, but they tend to do this as an individual organisation rather than at a partnership level. Some CPPs are developing a shared approach to community consultation to help coordinate this activity. For example, Scottish Borders CPP has agreed a shared set of principles for engaging with local communities and has developed a community engagement framework. Individual partners and the partnership use

this framework to ensure that they all consider the priorities and outcomes in the SOA consistently when they are involving, or consulting with, local communities. Partners in North Ayrshire CPP are focusing their community engagement activity in targeted neighbourhoods ([Case study 3](#)).

Case study 3

North Ayrshire neighbourhood planning approach

North Ayrshire CPP has taken a localised approach to involving communities to help achieve the outcomes in its SOA. It has divided the council area into six neighbourhoods – Arran; Irvine; Kilwinning; Three Towns; Garnock Valley; and North Coast, West Kilbride and Cumbrae – reflecting the different demographics and needs of these areas.

CPP partners have analysed these six areas in detail. They have produced in-depth neighbourhood profiles covering local demography, incomes, employment, education, health and crime. By understanding the unique characteristics of each area, the CPP hopes that it can better meet the needs of individuals and reduce inequalities.

A series of community-based planning workshops were held between the end of 2013 and beginning of 2014 in the six neighbourhoods. Over 200 delegates attended these workshops, where community planning partners shared the information in the area profiles, including the challenges facing the local community. Delegates were asked whether this information reflected their experiences of living in the area and were asked to vote on what they thought were the priorities for the neighbourhood.

Many community planning partners are reflecting the neighbourhood planning approach in their work. For example, Police Scotland used the data in the area profiles to develop the priorities in the local policing plan. The Scottish Fire and Rescue Service has aligned its local resilience managers within North Ayrshire to the six neighbourhood planning areas to support service delivery and partnership working at a local level. Increasingly, activity to consult with the local community, for example on health and social care integration, reflects the neighbourhood planning boundaries.

The CPP plans to develop six neighbourhood plans linked to the SOA, with six corresponding neighbourhood forums. The CPP is using the neighbourhood profiles, along with local action planning, to develop local priorities. As the neighbourhood planning approach develops, the CPP hopes that communities will increasingly be able to influence how services are delivered to meet their own needs and priorities.

Source: Audit Scotland

48. There are some small-scale examples of CPPs involving local people in developing local services, but these activities are at an early stage. For example, Falkirk CPP began a one-year pilot project that aims to involve older people in developing new ways of providing services to help them remain independent for as long as possible. The project is funded by the Older People's Change Fund,

and involves partners including Falkirk Community Trust, Falkirk Council, NHS Forth Valley and local voluntary organisations. The project team plans to evaluate the impact of the pilot and then extend it to other areas of Falkirk.¹⁹

49. As CPPs start to develop their approaches to working with local communities to design and provide improved services, this will have implications for the role of elected members. Local councillors have a democratic community leadership role, in that they are elected to make decisions on behalf of the communities they represent. This has been their main role in community planning to date. In future, they may need to make decisions on local services in partnership with the local people who are involved in designing and delivering them, something which many of them are used to doing in a local authority setting. The Commission on Strengthening Local Democracy notes that increased participation by communities does not necessarily weaken the role of democratically elected representatives.²⁰ But, elected members will need to consider how they carry out their democratic community leadership role in the context of increased community participation.

50. In general, CPPs are not clear about what involving communities and local people in changing the way services are provided and achieving local outcomes means in practice for their role. There is also uncertainty about what role communities could, should, or want to play in providing local services. CPPs, the Scottish Government and COSLA need to create a culture that promotes effective engagement with communities, and provides them with the support needed to participate effectively in contributing to improved public services (eg, guidance, training and financial resources).

The third sector has an important role to play in community planning

51. The third sector, which includes charities, voluntary groups and social enterprises, has an important role to play in working with communities and providing services. Each council area has a Third Sector Interface (TSI) to support and develop the third sector locally. Each TSI currently receives an average of around £250,000 each year from the Scottish Government. The role of TSIs include:

- developing volunteering
- supporting social enterprise
- supporting and developing voluntary and community organisations
- building the third sector relationship with community planning.

52. TSIs are represented on all 32 CPPs, but there can be a lack of understanding among partners about their role. In working with CPPs, TSIs may be involved in coordinating engagement with the third sector, sharing knowledge of local resources (eg, community groups and volunteers) and reporting on their knowledge of, and views from, the third sector locally. However, they are not a substitute for consulting and working with individual voluntary bodies or engaging with local communities.

53. The Improvement Service, Voluntary Action Scotland and the Scottish Government are working to improve the impact of TSIs in community planning in five local areas over 2014/15: Aberdeen, North Ayrshire, North Lanarkshire,

Orkney and Scottish Borders. The programme aims to strengthen the links between TSIs and CPPs and help develop a shared definition of the role of TSIs and the wider third sector in community planning. Following the initial phase, the programme will be rolled out to all remaining CPPs.

CPPs need to improve outcomes for local communities through a culture of continuous improvement

54. Many of the building blocks to support improvement in community planning are in place, but there is still more to do. CPPs need to consolidate the progress they have made to date, and focus on where they need to continue to improve. The actions that CPPs need to take to improve outcomes for local communities in a sustainable way are set out in [Exhibit 2 \(page 26\)](#).

Recommendations

The Scottish Government should:

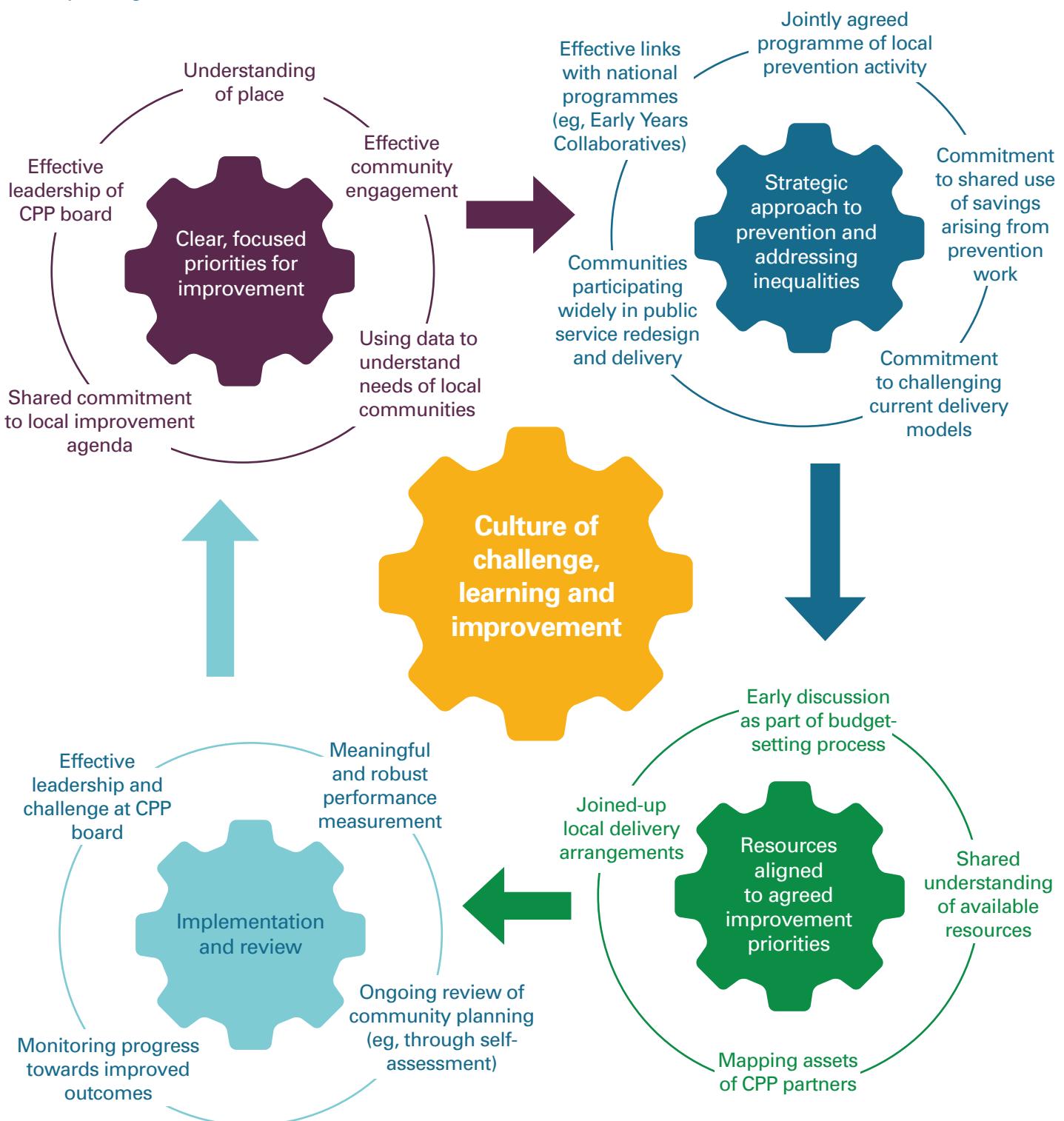
- implement its outcomes approach more systematically across all policy areas
- ensure that its review of national performance measurement arrangements streamlines approaches and creates a stronger prevention and outcome focus.

CPPs should:

- set clearer improvement priorities focused on how they will add most value as a partnership, when updating their SOA
 - use local data on the differing needs of their communities to set relevant, targeted priorities for improvement.
-

Exhibit 2

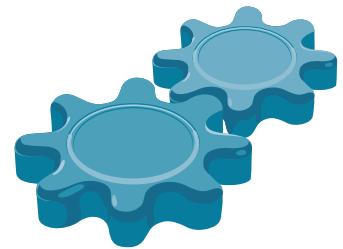
Improving outcomes for local communities



Source: Audit Scotland

Part 3

How CPPs are using resources



Key messages

- 1** CPPs are starting to better understand what resources they have available to deliver their SOA. They have begun to identify how partners use their resources, such as money and staff, in particular priority areas or specific communities. But discussions about targeting these resources at their priorities and shifting them towards preventative activity are still in the early stages. Moving resources will become increasingly challenging as pressures on budgets and staff continue to tighten.
- 2** The way public services are delivered must change to help the public sector manage financial and service demand pressures, and to address the significant variations in outcomes experienced by different communities. Community planning partners increasingly recognise that they need to work together in different ways to help public bodies to deal with these complex long-term challenges. This approach is generally being taken forward through relatively small-scale projects. The current pace and scale of activity is contributing to an improved focus on prevention but is unlikely to deliver the radical change in the design and delivery of public services called for by the Christie Commission.

CPPs are starting to discuss what resources, such as money and staff, they can contribute to improving local outcomes

55. The Scottish Government and COSLA published their agreement on joint working on community planning and resourcing in September 2013.²¹ This places clear expectations on community planning partners to:

- share resource planning information and budget assumptions with each other at an early stage
- work together through CPPs to deploy resources to achieve the jointly agreed priorities set out in the SOA.

56. Although the agreement encourages partners to consider their financial budgets, it notes that the greatest benefits are likely to be realised by using partners' wider resources, such as staff, buildings and other assets. Ministers wrote to councils, NHS boards and other public bodies setting out their expectation that these bodies will implement the agreement on joint resourcing.

**partners
have to make
difficult
choices
about the
allocation of
increasingly
scarce public
resources**

57. CPPs are in the early stages of implementing this approach. Partners are starting to discuss what resources and activities they can contribute to improving local outcomes and where working together differently will improve local services. There are already some small-scale examples of partners sharing resources. For example, jointly-funded roles, such as director of health posts funded by the council and NHS board, and shared properties such as partnership centres in West Lothian. It will be challenging to scale this work up to the level needed to transform how services are provided and make the future savings required from the public sector.

58. In the eight CPPs we looked at, partners are identifying how they currently allocate their budgets and deploy resources. They are approaching this in different ways. Some are looking at the total budget of partners, as suggested in the agreement. But most are focusing on what they are spending in a particular geographic area or on a specific priority. For example, Glasgow CPP partners are focusing on identifying the resources that they are contributing to the CPP's three priority areas. Partners in North Ayrshire CPP have identified how much they spend in the six neighbourhoods that the CPP is focusing its activity in. When we reviewed this work, it was in its early stages and none of the eight CPPs had yet established how they could shift their resources towards their priorities.

59. As well as thinking about pooled and shared budgets, CPPs are starting to identify what people, buildings, equipment and other assets all partners have available to direct towards specific programmes of improvement or geographic areas. For example, in April 2014 West Lothian CPP agreed to develop a CPP Asset Plan for property, information technology resources, and vehicles. This will allow it to identify the assets held by CPP partners across West Lothian and to manage them better to achieve the shared aims of the SOA.

National and regional organisations need to do more to identify the resources available locally

60. Partners that share the same boundary as the CPP are more able to link their budgets and align resources to the SOA's local priorities. It can be difficult for national and regional organisations, with associated national and regional budgets, to estimate how much of their budget they can allocate locally. This includes statutory organisations such as NHS boards, Police Scotland, Scottish Fire and Rescue Service, Highlands and Islands Enterprise, Scottish Enterprise and Regional Transport Partnerships.

61. For example, Skills Development Scotland (SDS) and Scottish Enterprise are national bodies involved in local CPPs. They are working towards national objectives and targets related to employability and economic development respectively:

- SDS is working with CPPs to deliver many of its services at a local level, for example commissioning provision of SDS's Employability Fund with partners at a CPP level.²² But many of the issues relating to employability span regions, rather than fall within CPP boundaries. This means that identifying expenditure at a CPP level is not straightforward. Rather than focus on funding, SDS contributes towards CPP priorities by providing resources in the form of skills, experience and specialist knowledge of the area.

- Scottish Enterprise allocates its budget in response to economic growth opportunities in line with the Scottish Government's economic strategy, rather than on geographic lines. It is working with CPPs to identify areas for local collaboration based on those economic opportunities most likely to deliver the most significant economic outcomes. Through its location director approach ([paragraph 10, page 11](#)) Scottish Enterprise contributes specialist knowledge, skills and networks to individual CPPs.

62. Many CPPs have taken the important first step of developing a shared understanding of what is meant by resources and identifying how much flexibility there is to move them among partners. Given the continuing pressure on public sector budgets, it is important that CPPs now build on the work done to date and identify where there are opportunities for them to share resources more effectively to deliver the priorities in their SOA. For national and regional organisations, this means using local data to get a more detailed understanding of demand for, and supply of, their services and what resources are used to meet this.

Partners have to make difficult choices about allocating resources as budgets tighten

63. CPPs are committed to identifying the resources available to deliver their priorities. But this is not straightforward as CPPs do not have any formal powers to control local budgets. Instead, they must rely on the willingness of individual organisations to support and pay for achieving the partnership's priorities. CPPs face some practical barriers in both identifying available resources and moving them towards agreed priorities, including:

- difficulties in aligning partners' budget-setting processes, for example because of different budget timetables
- difficulties in identifying the resources available for a specific geographic area in organisations that cover different boundaries to the CPP
- the ability and willingness of some partners, in particular national organisations, to commit resources to local priorities
- the fixed nature of much expenditure, for example to deliver specific services in the NHS
- difficulties in developing long-term plans because some partners are required to apply for annual funding.

64. As pressures on budgets and staff tighten, there is a risk that organisations will protect their own resources. While partners' contributions to community planning are becoming a more significant aspect of their accountability arrangements, there are still long-standing forms of accountability for national performance. Many CPP partners are held to account for the performance of mainstream services and their achievement of national targets. This can create challenges when partners have to make difficult choices about the allocation of increasingly scarce public resources.

65. For example, NHS boards are required to meet a number of performance targets that cover health improvement, efficiency, access and treatment (HEAT targets). These aim to ensure that NHS boards focus on making improvements

in areas the Scottish Government has identified as priorities, to help to achieve its overall purpose and objectives. In recent years, the Scottish Government has reduced the number of HEAT targets and has committed to focusing more on outcomes. But the level of performance that boards are expected to achieve has become more challenging at the same time as budgets are tightening. The focus on meeting challenging financial and performance targets each year makes it difficult for NHS boards to focus on long-term outcomes and does not encourage longer-term financial planning.²³

66. Reaching agreement on shifts in resources is likely to be difficult as it may involve reducing some budgets and increasing others. This will be particularly difficult where it involves moving resources away from short-term targets towards longer-term preventative work, which may not return gains directly to the organisations that have invested resources.

67. Strong shared leadership both nationally and locally will be needed to overcome these obstacles. Building strong relationships and trust among partners will be essential in ensuring they use and share their resources as effectively as possible to maximise the impact of the partnership. The Scottish Government also has a role to play in helping national organisations balance national and local priorities and think more flexibly about how they use resources at a local level.

Moving resources towards preventative activity while meeting current demand will be challenging

68. In the context of increasing pressure on budgets and the widening gaps in outcomes for communities, CPPs are starting to focus more on preventative activity. The NCPG defines this as 'actions which prevent problems and ease future demand on services by intervening early, thereby delivering better outcomes and value for money'. Prevention activity among community planning partners is often prompted by national funding or initiatives such as the Change Fund or the Early Years Collaborative.

69. Partners are increasingly recognising that they need to work together in different ways to deal with complex long-term challenges. They are starting to do this through relatively small-scale projects, which often focus on specific themes or within particular targeted communities. For example:

- in Falkirk, local partners are working together to help improve the employment prospects of young people, by offering them vocational opportunities at Forth Valley College. The two-year Schools College Opportunities to Succeed (SCOTS) programme is targeted at secondary school pupils who would not otherwise have considered attending college after leaving school. In August 2013, 120 pupils from across Falkirk's eight secondary schools started the programme. In January 2014, over 100 pupils remained on the programme. Over 90 per cent of these pupils have since chosen to continue with their college courses. Feedback from pupils and staff to date has been positive²⁴
- Aberdeen CPP is piloting a preventative model focusing on the activity and resources in place to prevent domestic abuse in one particular area of the city. This links to the CPP's priority of safer communities, and aims to improve outcomes and reduce long-term costs through prevention.

70. The Scottish Government and COSLA expect SOAs to include a specific plan that sets out what partners are collectively doing and spending on prevention.²⁵ CPPs have started to collate existing preventative activity in plans linked to their SOA. They now need to identify how they can move funding and staff towards more preventative approaches, and start implementing this. Shifting resources in this way will become increasingly challenging as pressures on resources continue to tighten, as initially organisations will need to continue to deliver existing services while investing in prevention initiatives. For example, meeting the Scottish Government's ambitious vision for health and social care will involve providing more care in the community to prevent people going into hospital, at the same time as meeting demanding targets for hospital care and at a time when budgets are tightening.²⁶ The Scottish Government needs to work with partner organisations to explore the options for managing this.

71. If CPP partners are to play an effective part in supporting public bodies to meet the growing financial and service demand pressures facing them, then finding ways of scaling up current developments and making changes across the whole local public sector system will be needed. Making such changes is something public bodies have not yet had to do at scale. There is a risk that the current approaches being adopted, and the pace at which they are moving, will not be sufficient to significantly ease the demand pressures partners will increasingly face.

72. CPPs need national support to help them understand what a successful shift to prevention would look like, and how all partners can contribute towards this (for example, through the What Works Scotland initiative – [\(paragraph 94, page 37\)](#)). The evidence base on good preventative services is underdeveloped, as is the level of understanding across the public sector about how to:

- transfer good practice from one organisation or place to another
- convert innovation from small-scale pilots to large-scale changes in services.

73. The move towards shared resources which are focused increasingly on prevention is not inevitable. It is complex and challenging and it would be unrealistic to expect CPPs not to encounter difficulties and setbacks as they take forward this agenda ([\(Exhibit 3, page 32\)](#)). The variable capacity to lead and deliver change in many CPPs means that there are significant risks associated with delivering the preventative agenda.

Recommendations

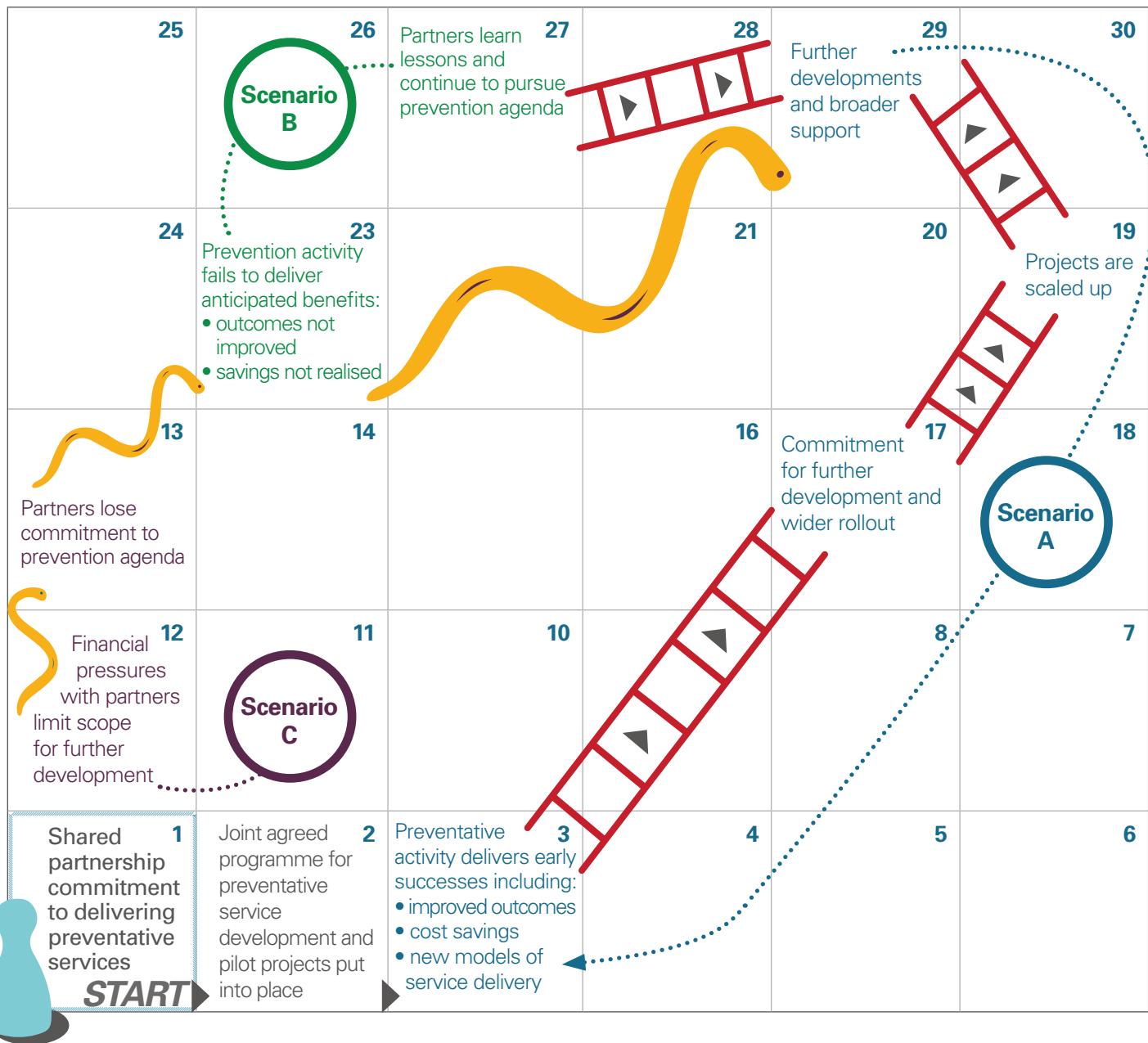
CPPs should:

- start to align and shift partners' resources toward agreed prevention and improvement priorities.

Exhibit 3

The opportunities and challenges of moving resources to prevention

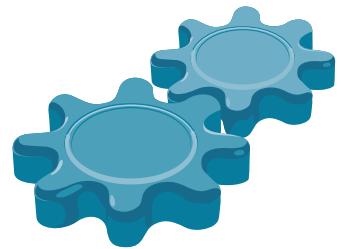
Achieving a decisive shift towards prevention will require strong and sustained leadership.



Source: Audit Scotland

Part 4

Monitoring performance and helping CPPs improve



Key messages

- 1** Performance management continues to be a weakness in CPPs. They need to strengthen their performance management arrangements by routinely gathering information that will enable them to monitor and report progress in improving outcomes for local communities. This is challenging due to difficulties in identifying appropriate indicators and available data, and the different performance management arrangements of partners.
- 2** The Scottish Government is now starting to use existing performance management and accountability arrangements to monitor the contribution of public bodies to community planning. But it is not yet consistently holding central government bodies or the NHS to account for their performance within CPPs.
- 3** There is no coherent national framework for assessing the performance and pace of improvement of CPPs. This means that there is no overall picture of how individual CPPs are performing and what progress is being made towards the effective implementation of the Statement of Ambition.
- 4** Although progress is being made in community planning across Scotland, there is significant variation in the pace of improvement. Some CPPs face having to make significant improvements and it is not clear whether they will be able to make the changes that are required. The Scottish Government has no coordinated national programme for helping CPPs to improve. It is essential that well-targeted, practical support is made available to all CPPs so that progress is consistent across the country.

CPPs are improving the way they work, but some are improving more quickly than others

Performance management continues to be a weakness in CPPs

74. The Scottish Government and COSLA make clear in the Statement of Ambition that they expect CPP boards to hold all partners to account for contributing to and achieving local plans for improvement. An important aspect of this is establishing a performance management framework that will allow:

- the CPP board to monitor progress in implementing the SOA over the short, medium and long term

- partners to hold each other to account for their progress in implementing the SOA.

75. Of the eight CPPs we looked at, most were still developing a performance management framework or revising their existing arrangements. Partners are finding it challenging to develop an effective and meaningful performance management framework that reflects the progress of the partnership and the contribution each partner is making. Few CPPs yet have a good blend of performance evidence that allows them to understand:

- the specific added-value of the partnership, as opposed to the work of its constituent bodies
- how its work is contributing to improving local outcomes
- what contribution individual partners are making to the locally agreed improvement goals.

76. Performance monitoring should also include a balance of data about service performance and the experiences of people who use services. CPPs should consider:

- how well local people feel they are being involved in decision-making
- how they will identify improvements in specific communities that might be masked in data that cover the whole CPP area.

77. Following the development of new SOAs in 2013, CPPs have been working to identify appropriate targets and indicators to allow them to monitor progress in implementing their plans. In doing this, CPPs need to clarify what successfully implementing their SOA would look like in terms of outcomes and what data they can use to monitor this. This work is difficult, for example because the complexity of assessing long-term outcomes can be attributed to many factors, not all of which are under the control of the CPP. Partners are drawing on lessons they have learnt about the challenges of setting meaningful long-term outcome measures, and the difficulty in balancing the need for short-term input measures with the goal of outcome-focused performance management arrangements.

78. Partner organisations have different approaches and arrangements for monitoring performance. These are often set up to monitor how they are performing against national targets rather than local priorities. Applying this to a local partnership context can be difficult. Given the significant contribution that services in areas such as housing, healthcare, policing and education make to longer-term outcomes, it is important that CPPs establish stronger links between their own performance management arrangements and those of individual partners.

79. There is also a role for the Scottish Government to consider how the various national performance frameworks (eg, outcomes for older people, early years, employment and economic growth) can be streamlined and made more outcome focused. This may help to create greater alignment between national performance measurement and local community planning.

80. The lack of relevant, clear performance information is affecting the ability of CPP boards to scrutinise performance and hold partners to account for delivering against outcomes. CPPs are working to improve the performance information that their boards consider. It is important that the information helps them to scrutinise performance effectively, and that those responsible for holding the CPP to account understand it. One challenge facing CPPs is finding clear and straightforward ways of assessing partnership working at each level, that is, neighbourhood, theme and whole area, without creating an industry of monitoring and reporting.

National arrangements for assessing how individual CPPs perform and holding them to account need to improve

81. The Statement of Ambition sets out the agreed accountability arrangements for community planning. Local political oversight of community planning is through elected member involvement in CPPs and, nationally, local government will exercise joint oversight and ensure accountability with the Scottish Government through the SOA.

82. The Scottish Government will hold national bodies to account for their contribution to community planning, within the context of their national remit and responsibilities. It is starting to use existing performance management and accountability arrangements to monitor the contribution of public bodies to community planning. But the Scottish Government is not yet consistently holding partners in central government bodies or the NHS to account for their performance in a community planning context.

83. The Scottish Government has assigned a location director to each CPP. Their role is to provide advice, support and challenge to the CPP and individual partners on developing and delivering the SOA and community planning more broadly.²⁷ Location directors are also expected to take messages and challenges from CPPs back to the Scottish Government, and to advise the Scottish Government and NCPG on what progress CPPs are making in delivering the Statement of Ambition. The visibility and evidence of the effectiveness of Scottish Government location directors in establishing effective working relationships and challenging partners on their delivery varies. The Scottish Government should review the role of location directors in the context of increased expectations for community planning and the need to develop a clearer accountability framework for CPPs.

84. Scottish Government sponsor departments are responsible for monitoring the performance of public bodies that the Scottish Government funds. This includes non-departmental public bodies and NHS boards. Each year, sponsor departments issue letters to public bodies notifying them of their budget and the priorities and targets they are expected to meet. Letters to some bodies such as Scottish Enterprise, Highlands and Islands Enterprise and SDS emphasise the Scottish Government's expectation that they will participate in CPPs to help them achieve better outcomes for communities. Although sponsor departments monitor how public bodies perform against national targets and outcomes, it is not clear how they hold them to account for their performance at a local level or their contribution to community planning.

85. The Scottish Government's guidance to NHS boards on developing their Local Delivery Plans requires them to include a section on the board's contribution to community planning.²⁸ Overall, this section of the plans improved between

2013/14 and 2014/15, but they still vary in quality. The Scottish Government considers progress against Local Delivery Plans at annual and mid-year reviews. Currently, these reviews do not look at NHS boards' contribution to community planning in detail. The Scottish Government is considering how best to monitor how NHS boards take part in community planning, including how they are implementing the agreement on joint resourcing.

86. College outcome agreements were introduced in 2012/13, to enable the Scottish Funding Council and colleges to demonstrate the impact of the sector and its contribution to meeting Scottish Government priorities.²⁹ Since 2014/15, colleges have been required to include a section in their outcome agreements to demonstrate that they are both informing the development of, and contributing effectively to, the delivery of the priorities and outcomes in CPPs' SOAs. In monitoring college outcome agreements, the Scottish Funding Council is looking for evidence that colleges are engaging effectively with CPPs in a way that is delivering better outcomes in the college regions.

87. On 1 April 2013, a new national police service and a single fire and rescue service for Scotland began operating. Both the new services have dedicated senior officers responsible for a specific local area and who are accountable for how police and fire services are provided locally. They are responsible for contributing to community planning and ensuring that local police and fire service plans refer to relevant outcomes in the SOA.

88. The Senior Officer Group of the NCPG wrote to CPPs in August 2014, requesting an update on progress against the development priorities agreed as part of the SOA quality assurance progress and any further development work planned ([paragraph 40, page 19](#)). As part of this update, it also asked CPPs to note the extent to which they have reflected on the letter from the NCPG in July 2014 setting out key principles for CPPs to maximise their impact ([paragraph 21, page 13](#)).

89. Although the quality assurance process for SOAs helped to improve oversight of CPPs at a national level, the Scottish Government and COSLA does not have a coherent national framework for assessing, supporting and challenging CPPs. The Scottish Government also needs to align its performance frameworks to understand more clearly how CPPs are performing across Scotland and what contribution individual public bodies are making to this. The lack of a national framework for assessing how individual CPPs perform and how quickly they are improving means that the Scottish Government does not have a coordinated national picture of how CPPs are performing. This creates risks of significant variations in performance that could compromise the effective and timely implementation of the Statement of Ambition.

There is no coordinated national programme to help CPPs improve

90. One of the priority areas of focus for the NCPG when it was established in 2013 was building and maintaining the capacity of CPPs, including knowledge sharing and best practice, and identifying performance issues that have a national dimension. While it has issued several pieces of guidance on topics such as joint resourcing and more recently principles for how CPPs might maximise their impact, it has made little progress in building and maintaining the capacity of CPPs.

91. The lack of a clear national picture of how CPPs are performing makes it difficult to identify the areas where they need the most support, either nationally or locally. The Improvement Service and Scottish Government are providing support to individual CPPs and partners in various areas. Examples of the help being provided include the following:

- The Improvement Service is working in partnership with the Joint Improvement Team to help individual CPPs with self-assessment and planning improvements. Education Scotland, the Care Inspectorate and NHS Education Scotland have agreed to support this work. By the end of 2014, 26 CPPs will have been through this process – 16 of whom worked with the Improvement Service in developing the approach.
- The Improvement Service, SOLACE, the Scottish Local Authorities Economic Development Group and the Scottish Government are helping CPPs assess their economic footprint. This involves mapping the work community planning partners are doing in the areas of employability, employment and procurement activity, with a key focus on the impacts for deprived communities.
- The Improvement Service, the Scottish Government and statutory community planning partners are working together to support CPPs to understand and improve their approach to performance management. They aim to identify a small core set of measures that will support CPPs to benchmark outcome performance against others and to publish the first version of the framework in March 2015. This work has the potential to contribute to a more consistent evidence base of CPP performance.

92. This work needs to be more joined up and focused on the areas where CPPs need the most support. There is no coordinated national programme for helping CPPs to improve, which brings together all of the improvement support resources available across national and local government in a well-targeted way. The Senior Officer Group of the NCPG has asked CPPs to tell it, in its leadership and coordination capacity, about any specific support that would help them in their ongoing development work ([paragraph 88, page 36](#)). The Scottish Government and Improvement Service need to clarify exactly what help CPPs would benefit from, and coordinate how they deliver training and support and share information at a national level.

93. There is also work going on to support health and social care partnerships through the Joint Improvement Team. This work has clear implications for community planning and is likely to cover similar areas to work by the Improvement Service, such as governance, leadership and planning. There is scope to join up support in these areas.

94. The What Works Scotland (WWS) centre was established in June 2014. The Scottish Government and Economic and Social Research Council provided just under £3 million to the Universities of Glasgow and Edinburgh to lead this initiative over the next three years. The WWS centre will work closely with CPPs and other stakeholders to help improve the way local areas use evidence to make decisions about developing and reforming public services. WWS is working with four CPPs as case study areas (Aberdeenshire, Fife, Glasgow and West Dunbartonshire). Through this work, WWS aims to:

- encourage collaborative learning with a range of partners
- better understand what effective policy interventions and effective services look like
- promote the use of evidence in planning and providing services
- help organisations get the skills and knowledge they need to use and interpret evidence.

95. As pressures on budgets and staff tighten, it will become increasingly challenging for partners to change the way public services are provided. CPPs are improving the way they work, but some have more work to do than others and some are improving more quickly than others. In CPPs where the necessary foundations for effective partnership working are not yet in place, the Scottish Government and partners need to take urgent action to ensure that they are challenged and get the help they need to improve their performance. This will be essential to help CPPs improve their performance and work towards the expectations in the Statement of Ambition.

Recommendations

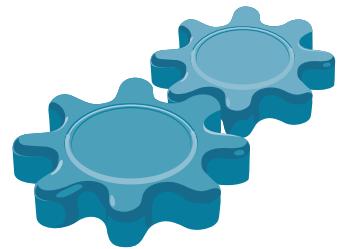
The Scottish Government and COSLA should:

- develop a national framework for assessing and reporting progress in improving community planning and implementing the Statement of Ambition
- work with the Improvement Service and other national improvement agencies to establish and coordinate a programme of well-targeted practical support that will help CPPs to implement the Statement of Ambition effectively.

The Scottish Government should:

- hold central government bodies and the NHS to account more consistently for their performance within CPPs
 - review the role of location directors.
-

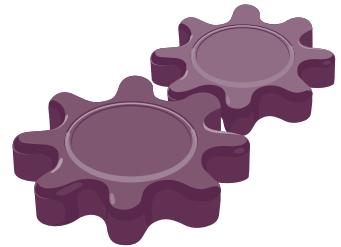
Endnotes



- ◀ 1 [Scotland's public finances: progress in meeting the challenges \[PDF\]](#) Audit Scotland, June 2014.
- ◀ 2 *Review of community planning and single outcome agreements: statement of ambition*, Scottish Government and COSLA, March 2012.
- ◀ 3 *Commission on the future delivery of public services*, June 2011.
- ◀ 4 [Improving community planning in Scotland \[PDF\]](#) Audit Scotland, March 2013.
- ◀ 5 *Single Outcome Agreements: guidance to community planning partnerships*, Scottish Government and COSLA, December 2012.
- ◀ 6 *Agreement on joint working on community planning and resourcing*, Scottish Government and COSLA, September 2013.
- ◀ 7 The Local Government in Scotland Act 2003.
- ◀ 8 [Improving community planning in Scotland \[PDF\]](#) Audit Scotland, March 2013.
- ◀ 9 Community Empowerment (Scotland) Bill, as introduced in the Scottish Parliament on 11 June 2014.
- ◀ 10 *NHS Scotland 2020: Local delivery plan guidance*, Scottish Government, November 2013.
- ◀ 11 [Improving community planning in Scotland \[PDF\]](#) Audit Scotland, March 2013.
- ◀ 12 [Falkirk Community Planning Partnership \[PDF\]](#) Audit Scotland, May 2014.
- ◀ 13 [Glasgow Community Planning Partnership \[PDF\]](#) Audit Scotland, April 2014.
- ◀ 14 *Integration of adult health and social care in Scotland: consultation on proposals*, Scottish Government, May 2012; Public Bodies (Joint Working) (Scotland) Act 2014; *Health and social care integration narrative*, Scottish Government, April 2014.
- ◀ 15 *Health and social care integration: locality planning conversations*, Joint Improvement Team, June 2014. The Joint Improvement Team (JIT) is an improvement partnership between the Scottish Government, NHS Scotland, Convention of Scottish Local Authorities (COSLA) and the third, independent and housing sectors.
- ◀ 16 *Single Outcome Agreements: guidance to community planning partnerships*, Scottish Government and COSLA, December 2012.
- ◀ 17 [Improving community planning in Scotland \[PDF\]](#) Audit Scotland, March 2013.
- ◀ 18 *Single Outcome Agreements: guidance to community planning partnerships*, Scottish Government and COSLA, December 2012.
- ◀ 19 [Falkirk Community Planning Partnership \[PDF\]](#) Audit Scotland, May 2014.
- ◀ 20 *Effective democracy: reconnecting with communities*, The Commission on Strengthening Local Democracy, August 2014.
- ◀ 21 *Agreement on joint working on community planning and resourcing*, Scottish Government and COSLA, September 2013.
- ◀ 22 Skills Development Scotland's Employability Fund aims to support activity to help people develop the skills needed to secure a job or to progress to more advanced forms of training. Skills Development Scotland administers the fund, but services are developed and delivered at a local level.
- ◀ 23 [NHS in Scotland 2013/14 \[PDF\]](#) Audit Scotland, October 2014.
- ◀ 24 [Falkirk Community Planning Partnership \[PDF\]](#) Audit Scotland, May 2014.
- ◀ 25 *Single Outcome Agreements: guidance to community planning partnerships*, Scottish Government and COSLA, December 2012.
- ◀ 26 [NHS in Scotland 2013/14 \[PDF\]](#) Audit Scotland, October 2014.
- ◀ 27 *Single Outcome Agreements: guidance to community planning partnerships*, Scottish Government and COSLA, December 2012.
- ◀ 28 *NHS Scotland 2020: Local delivery plan guidance*, Scottish Government, November 2013.
- ◀ 29 *Delivering college outcome agreements*, Scottish Funding Council, August 2014.

Appendix

Audit methodology



We reviewed a range of published information to inform our audit, including the following:

- Policy documents and guidance on community planning from the Scottish Government and other national organisations.
- Legislation (draft bills and acts), consultations and responses on community planning and public service reform.
- Minutes and papers of the National Community Planning Group.

We drew on the findings and supporting evidence of our audits of five CPPs that were conducted during 2014:

- Glasgow (published April 2014)
- Falkirk (published May 2014)
- Moray (published July 2014)
- West Lothian (published October 2014)
- Orkney (published November 2014).

We carried out follow-up visits in the three CPPs that were audited in 2012/13: Aberdeen, North Ayrshire and Scottish Borders. This included the following:

- a written update from each CPP on the progress made against their improvement agenda
- observing a strategic group meeting in each CPP, including a group discussion on progress since their audit
- interviews with partners from various local and national organisations.

We interviewed staff and representatives from various public bodies and national organisations including:

- Convention of Scottish Local Authorities (COSLA)
- Improvement Service
- National Community Planning Group

- Scottish Enterprise
- Scottish Government
- Skills Development Scotland
- Society of Local Authority Chief Executives (SOLACE)
- Voluntary Action Scotland.

Community planning

Turning ambition into action

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Progress Report	Older People's Change Fund Outcomes
Date of Report	16 March 2015
Lead Officer	Liz Taylor
Report Author	Liz Taylor
Governance Group	Health and Social Care Partnership Board (CHP)

1:	Purpose of the Report
	<p>"The Board agreed to request Liz Taylor (1) to collate more robust data on the outcomes under the various themes and that this information, along with an indication of the projects which the Health and Social Care Partnership might wish to continue to support by way of the Integrated Care Change Fund which would be available in 2015/16 be submitted to the Board this financial year and (2) once the Transitional Leadership Group had determined the delivery model for services post integration to submit a story board on the emerging model."</p> <p>(1) There is a timing issue with reporting on outcomes to this cycle of the Board. The end of Change Fund information is still being reported and collated and data is not yet available for presentation under themes. This involves information on projects over 2013-14 and 2014-15, as funding for both years was treated as a single 'pot' and committed in 2013. The reporting requirements to Scottish Government have been met and information requested on 'key achievements' is included in this report. This will be helpful information for understanding of data under the 5 themes. It is proposed that a further report is brought to the Board.</p> <p>(2) The TLG/shadow IJB has not determined a delivery model for services. It is suggested that this will emerge through the strategic plan and should be reported to a future Board by the Chief Officer.</p>

2:	Summary of Key Information																				
Change Fund annual allocation and spend profile																					
<p>The Change Fund allocation for Aberdeen was as follows, with the required 20% minimum spend to support carers, directly or indirectly, shown:</p> <table border="1"> <thead> <tr> <th></th> <th>2011/12 £'000</th> <th>2012/13 £'000</th> <th>2013/14 £'000</th> <th>2014/15 £'000</th> </tr> </thead> <tbody> <tr> <td>Change Fund</td> <td>2,738</td> <td>3,130</td> <td>3,130</td> <td>2,739</td> </tr> <tr> <td>Direct spend on carers</td> <td>331</td> <td>435</td> <td>216</td> <td>407 (anticipated)</td> </tr> <tr> <td>Indirect spend on carers</td> <td>613</td> <td>929</td> <td>1,268</td> <td>487 (anticipated)</td> </tr> </tbody> </table>			2011/12 £'000	2012/13 £'000	2013/14 £'000	2014/15 £'000	Change Fund	2,738	3,130	3,130	2,739	Direct spend on carers	331	435	216	407 (anticipated)	Indirect spend on carers	613	929	1,268	487 (anticipated)
	2011/12 £'000	2012/13 £'000	2013/14 £'000	2014/15 £'000																	
Change Fund	2,738	3,130	3,130	2,739																	
Direct spend on carers	331	435	216	407 (anticipated)																	
Indirect spend on carers	613	929	1,268	487 (anticipated)																	



Community Planning Aberdeen

The Change Fund has been distributed according to 5 workstreams set by the Scottish Government, in the indicative proportions (some projects fit more than one category) determined by the Change Fund Partnership, as shown:

	Preventative and Anticipatory Care	Proactive Care and Support at Home	Effective Care at Times of Transition	Hospital and Care Home(s)	Enablers	Total (equals 100%)
2011/12	35%	30%	15%	10%	10%	100% £2.738m
2012/13	40%	28%	15%	7%	10%	100% £3.14m
2013/14	45% £1,413,000	30% 942,000	15% 471,000	5% 157,000	5% 157,000	100% £3.14m
2014/15 (anticipated year end spend)	50% £1,369,000	30% 821,000	10% 410,000	5% 137,000	5% 137,000	100% £2.738m

Planning and set up time, difficulties of some projects in securing capacity to deliver, and impact of interdependencies have resulted in carry forward each year of the previous years' allocation. This is common across the country. A few projects underspent and a small number did not proceed, mainly because of capacity issues in delivery, resulting in slippage and re-allocation of funds.

Key Achievements

The Scottish Government asked for the 'key achievements' of the Change Fund to be described. From the contribution of a diverse range of initiatives across all five workstreams, three 'key achievements' provide a summary that reflects the Partnership's commitment to better outcomes for older people through integrated working.

Partnership approach to development of effective joint working and use of resources across sectors provides a strong infrastructure for integration

Our Change Fund process throughout has been built on a partnership approach involving the Council, NHS, 3rd sector and the private sector, and drawing on the contribution of other agencies and communities. This has enabled new ways of working, the redesign and development of services, and has laid a firm foundation for health and social care integration.

Four aspects of development in partnership working are of note:

1)The inclusion of the private sector as an equal partner, through Scottish Care and local providers, has been an important aspect of our whole process that has recognised and raised awareness of the reliance in Aberdeen on the sector for care at home and care home services. It has demonstrated the willingness of private organisations to work collaboratively with other sectors in the planning and development of services and this has resulted in new alliances and new approaches. In particular, Scottish Care is leading and evaluating the implementation of an Enablement approach with care home and care at home



Community Planning Aberdeen

providers, which has shown the need for a 'whole system' plan for further roll-out, potentially with support from the Integration Fund.

2) General Practitioners and Consultants have been given opportunities to become actively involved with other services in Reshaping Care: for instance, in preventing admissions and reducing emergency bed days through Anticipatory Care Plans and direct access to rehabilitation; improving standards in palliative care in care homes; supporting earlier and post-diagnostic support in dementia. Integrated working has been strengthened through funding for initiatives based around GP 'clusters' which are now the basis for locality planning in integration: an Action Learning Set approach has brought together GPS, health and social care practitioners, housing, the independent sector, others such as Scottish Ambulance and Police, and community groups, to tackle locally identified priorities in health and care, and integrated working is supported in the 'clusters' by Organisational Development Facilitators.

3) A multi-agency Workforce partnership of local and national organisations and has been tackling recruitment and retention problems in social care that are affecting capacity to meet the demand for care for older people. Significant benefit has come with the establishment of the Care Centre of Excellence that in 2014 brought 220 new people into social care, trained them and arranged employment with providers, with 88% still employed after three months. As a partner, the DWP has invested staff time and funding, adding to the Change Fund resource. As part of this initiative, collaboration between 3rd and private sectors and SSSC to improve care standards has resulted in the development of new training courses and opportunities for SCQF accredited learning, for sustainable delivery. To further understand the workforce problems in the independent sector, the Workforce partnership has commissioned the Chamber of Commerce to undertake a survey across providers.

4) In the 3rd Sector the Befriending and Social Transport projects involved multiple partners. The Befriending project demonstrated the use of a Collaborative Advantage model with five partners of diverse size and remit, three established third sector and two faith based organisations, working to support the client base and each other in delivering a service. The Social Transport project has been established through a working group comprising ACVO (Third Sector Interface), Robert Gordon University, Nestrans, Aberdeen City Council, Scottish Care, Red Cross, RVS, Buchan Dial-a-Bus and Co-wheels Car Club. A research base provided the foundation for development of a model system of transport for older people to attend social or medical appointments. It has demonstrated the value of transport as an enabler in reducing no-show at clinics and social isolation.

Older people are able to remain at home in safety

Shifting the balance of care by prevention of admission, earlier discharge, expanded options for care and housing, and support for carers has been the purpose of many of the funded programmes, involving all sectors. Older people are safer in their home as a result of an extensive falls prevention programme that has established a City Falls Pathway and will train 15,000 people in falls awareness; medication reviews and improved medication management with training for paid and unpaid carers; telecare for remote monitoring, with an increase in installations of 526% in 2 years and over 2360 people supported; and



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easier access to aids and equipment, including on-line, staff-facilitated self assessment and direction to safe, suitable solutions. A redesign of sheltered housing is increasing the options for accommodation and support, with telecare upgrades to 340 properties.

When people are at risk of going to hospital, a Scottish Ambulance See and Treat service prevents inappropriate admission to A&E, Anticipatory Care Plans lead to better decisions on options for care, and AHP assessment at A&E supports earlier return home. An enablement approach in care at home is showing results in reducing care and increasing independence, at the pilot stage. Intermediate care, e.g. the 20 unit service of accommodation, care and rehabilitation at Clashieknowe, prevents admission and supports discharge. Social and wellbeing opportunities created through community and faith groups, such as the Lunch Club Network, and the Befriending project help to combat isolation and loneliness. The Social Transport project enables people to attend appointments and social events. Provision for carers is enhanced through additional respite and day services, telecare, training for safe caring, alternative therapies, and post-diagnostic support in dementia.

Older people and their families will find support in the 3rd Sector GATE - Good at the End – project to deal with end of life wishes of older people and work with an enjoyable process to build memories and ensure satisfaction with the path to end of life. Where the end of life stage is in a care home setting, the Living and Dying Well programme is rolling out the use of the Palliative and Supportive Care Plan to improve care.

The importance of preventive care through wellbeing and active ageing is established.

The Change Fund has made a significant contribution to preventive approaches through support for initiatives by community groups and social enterprises, such as the Lunch Club Network, C-fine Community food outlets, Silver Darlings fish cooking project, the Shared Roots garden project and Allotment Market Stall, the Helping Hands Centre for Afro-Caribbean elders, and for expansion of the innovative work of Council's Wellbeing team. As a result, older people of all ages and capabilities, in large numbers, are enjoying and benefitting from a wide range of wellbeing opportunities, sports and other activities.

The Wellbeing team aims to establish opportunities and resources through collaborative working, and to support other appropriate groups and organisations to take them over, creating community capacity and freeing the team to work on new initiatives. Achievements have included the Golden Games (600 participants in 2014), Technogym (in 9 sites), chair-based exercise (100 trained) and Otago training, alternative approaches for support of carers and people with dementia, the Great Outdoors Project. Organisations that have worked collaboratively and then taken over projects include the Robert Gordon University, the Sports Village, Sport Aberdeen, Aberdeen F.C. Communities Trust (AFCCT), Cornhill Hospital, Scottish Care and care home providers, and the Council's Environmental service. In terms of accessibility and sustainability, engagement of older people, promotion of positive images of older people and ageing, and challenging stereotypes and negative attitudes, great progress is being made.



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AFCCT has been named as a finalist in the 'transformative innovation award' category for work done with older people throughout Aberdeen in partnership with the Wellbeing team. The Golden Games achieved a national APSE award for the best Health and Wellbeing Initiative.

3: Recommendations for Action

Recommendations are in relation to current Change Fund initiatives that merit consideration of continuing support through the Integration Fund:

- **Telecare** expansion – the large number of installations supported has shown a need for the development of a Responder service to answer calls (for people who have no family or other responders) as the current funding and provision through Bon Accord Care's home care service cannot meet growing demand.
- **Enablement** approach to increase independence and reduce reliance on care – the limited implementation by Scottish Care with home care providers, sheltered housing and care homes has shown the benefit of the approach and necessity of closer collaborative working between care providers, care management, finance, Wellbeing, key stakeholders such as GPs, and family carers, i.e. a 'whole system' approach is needed to establish enablement..
- **Workforce** initiatives – in particular the Care Centre of Excellence and associated developments in training, to support recruitment and retention of staff in social care and establish career pathways.
- **Carer's support** – based on carer's views, in particular in relation to dementia care and options for respite.
- **Befriending** – exploration of options for an affordable service, from the discontinued model or a redesigned service.

With end of year reporting by projects on outcomes, further areas may emerge for consideration.

4: Opportunities and Risks

The Integration Fund is an opportunity to ensure the maintenance and further development of initiatives that have shown their worth under the Change Fund. Without investment the identified initiatives/services will not be able to keep pace with growing demand and outcomes for older people will be diminished.

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Agenda Item 6.2



Community Planning Aberdeen

Progress Report	TSI Community Planning Improvement Service Programme
Lead Officer	Joyce Duncan
Report Author	Joyce Duncan
Date of Report	5 th March
Governance Group	CP Aberdeen Board

1:	Purpose of the Report
	<p>It was agreed at the CPA Management Meeting in December 2014 that an update on the project would be presented to the board in March 2015.</p>

2:	Summary of Key Information
	<p>Evaluation checklists compiled by the Improvement Service (IS) were sent to a number of individuals from CPP partners in the city and to 3rd sector organisations. These checklists requested information and views on the impact, role and understanding of community planning in Aberdeen.</p> <p>The IS collated the feedback but the returns were not sufficient to make it a robust process. This may have been due to the timing close to the festive season.</p>

3:	Recommendations for Action
	<p>It has been agreed with the IS that ACVO will now set up 1:1 short interviews with key CPP partners to gather further information and will also hold a focus group event to elicit 3rd sector responses.</p> <p>Thereafter the action plan will be collated and presented to the CPP Board and Management team for approval prior to implementation. The CPP partners action plan should be available by the next Board meeting.</p>

4:	Opportunities and Risks
	<p>The revised methodology to gain responses from CPA partners will take more time from ACVO but it should ensure a more robust response. The focus group approach will match similar options selected in other areas undergoing the project and it has proved successful there and is anticipated to be equally so in Aberdeen.</p>

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Progress Report	Protecting Vulnerable Adults
Lead Officer	Tom Cowan, Head of Adult Services, Social Care and Wellbeing
Report Author	Sally M Wilkins, Planning and Development Manager, Social Care and Wellbeing
Date of Report	4 March 2015
Governance Group	

1: Purpose of the Report
<p>At earlier meetings of the Board members agreed that the Partnership would focus on a protecting vulnerable adults theme through the Community Safety Partnership, in conjunction with all public sector organisations, and that appropriate metrics for this theme be developed and reported to a future meeting of the Board for consideration; and in order to achieve this partners were to ensure that (1) staff received the appropriate training to identify referrals and (2) information be shared between agencies in accordance with the Data Protection Act.</p> <p>At its meeting on 3 December 2014, the Board agreed to request Tom Cowan, Aberdeen City Council's Head of Adult Services, to co-ordinate the integrated training of front line employees to ensure that organisations worked better together to protect vulnerable adults and that staff were trained to identify referrals and record a baseline of data measures which measured the impact of interventions.</p> <p>The purpose of this report is to update members of the Community Planning Board on the progress made to date.</p>
2: Summary of Key Information
<p>The Adult Support and Protection (Scotland) Act 2007 came into force in 2008 with the aim of identifying "adults at risk", providing support to them when they need it, and to provide the means to protect them from harm.</p> <p>An 'Adult at Risk of Harm' is defined in the law as someone aged 16 and over who is:</p> <ul style="list-style-type: none"> • Unable to safeguard themselves, their property, rights or other interests; AND • At risk of harm; AND • Affected by disability, mental disorder, illness or physical infirmity so that they are more vulnerable to being harmed than others not so affected. <p>All three elements of the definition must be met. It is the whole of an adult's particular circumstances which can combine to make her/him more vulnerable to harm than others and this could be very different from individual to individual.</p>

Section 3(2) states that an adult is at risk of harm if:

- Another person's conduct is causing (or is likely to cause) the adult to be harmed, or
- The adult is engaging (or is likely to engage) in conduct which causes (or is likely to cause) self-harm

All citizens, organisations and agencies have a responsibility to participate in the protection of adults from risk of harm. This means that they have a duty to report any concerns to the appropriate authority.

The legislation requires all councils to establish an independently convened Adult Protection Committee (APC). It is the role of the APC to ensure cooperation and communication within and between agencies to promote support and protection for adults. The purpose is to provide senior leadership, accountability and management of policies, procedures and interagency practice to safeguard adults. The three APCs in the NHS Grampian/ legacy Grampian Police area share the same Independent Convener.

Aberdeen City Council shares a policy and procedure for the support and protection of adults at risk of harm with Aberdeenshire Council, Moray Council, Police Scotland and NHS Grampian. The policy and procedure can be accessed using the following link: www.aberdeencity.gov.uk/AdultProtection.

The Adult Protection Unit, located within Adult Social Work Services, exists to coordinate the Council's response to adults at risk and to ensure that the Council meets its responsibilities under the Act. This includes oversight and delivery of adult support and protection training. This is delivered in line with the Grampian Adult Protection Training Plan, a copy of which is at Appendix A.

Adult protection activity is reported on regularly to Scottish Government, the Adult Protection Committee and the Chief Officers' Public Protection Group. Activity is measured using the national adult protection dataset, as required by Scottish Government.

Information on referrals and referral outcomes for the years 2013 and 2014 is attached as Appendix B. Please note that the data relating to review conferences is not validated. Further, please note that adult support and protection processes comply with the principles of the legislation:

<http://www.gov.scot/Publications/2014/05/6492/3> In compliance with these principles it is the aim to provide measures of support at the earliest stage possible. Reference to Appendix B will demonstrate that the majority of adult support and protection concerns are resolved at initial inquiry stage. This may be, for example, by referral to care management services and/ or to a partner agency for support. Only the most complex issues progress to investigation, case conference and protection planning and then review. Decision making is undertaken on a multi-agency basis.

An Information Sharing Protocol was developed at an early stage but has been subject to revision with the advent of Police Scotland and Scottish Fire and

Rescue. The revised version is currently with Legal Services awaiting sign-off. In the interim, agencies adhere to the requirements of the pre-existing Adult Protection Information Sharing Protocol.

3:	Recommendations for Action
	<p>It is recommended that:</p> <ul style="list-style-type: none">• The Community Planning Board give some consideration as to the regularity with which Members would wish to be updated on Adult Protection activity• The Community Planning Board give some consideration to the development of closer links with the Adult Protection Committee and how this might best be achieved.
4:	Opportunities and Risks
	<p>The Scottish national adult protection database does not enable the recording of the impact of adult support and protection interventions. In 2014 there were 1,099 referrals to the Adult Protection Unit, 378 of which proceeded to inquiry. To extract information on the impact of the intervention would require a manual trawl of electronic and paper records. This type of follow up would be too resource intensive within existing staffing to be adequately reported on.</p>

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APPENDIX A Part 1
GRAMPIAN ADULT SUPPORT AND PROTECTION LEARNING PLAN 2014/15

MODULE	DURATION	LEARNING OUTCOMES	TARGET GROUP	DELIVERED BY	COMMENTS
E -learning		<ul style="list-style-type: none"> Have an awareness of what is meant by adults at risk and our responsibility to protect. Identify the alert signs and indicators of potential harm and to know to where to report concerns. 	<ul style="list-style-type: none"> Staff who have indirect contact with adults at risk but no direct care role eg library staff, cooks, cleaners, porters, environmental services, housing. Third sector staff 	Bookings made through NHSG (nhsg.grampiandevelopment@nhs.net) who issue login details to participants.	Statutory organisations will receive report from service provider detailing levels of activity.
E -learning		<ul style="list-style-type: none"> Have an awareness of what is meant by adults at risk and our responsibility to protect. Identify the alert signs and indicators of potential harm and to know to where to report concerns. 	NHS Grampian staff	Automatically "pushed" to existing staff members personal development plan and new starts induction programme.	Mandatory for all NHS Grampian staff
Distance Learning		<ul style="list-style-type: none"> To ensure a practical understanding of adult protection legislation. To understand the statutory obligations placed on the police. To understand the practical application of the Act. 	All Police Officers.	In house	Compulsory for Police Officers and separate additional section for supervisors and Specialist Officers.
Tell Someone		<ul style="list-style-type: none"> To ensure a practical understanding of adult protection legislation. To understand the 	<ul style="list-style-type: none"> Staff with hands on caring role with adults who may be at risk and have no 	In house by individual service providers.	Training material developed with Scottish Government funding. Training

MODULE	DURATION	LEARNING OUTCOMES	TARGET GROUP	DELIVERED BY	COMMENTS
		statutory obligations placed on the police. To understand the practical application of the Act.	management responsibilities	Training pack developed by Workforce Initiative	pack distributed to all Care Commission registered adult service providers Alternative training to Module 1 training
1	3.0 hours	<ul style="list-style-type: none"> Identify the alert signs and indicators of potential harm and where to report them. Have an awareness of practice, organisation and attitudinal issues which may perpetuate harm. Have an awareness of the Grampian inter agency policies and procedures for people working in health and social care settings. 	<ul style="list-style-type: none"> Staff with hands on caring role with adults who may be at risk and have no management responsibilities. Home Carers, Support Workers, Auxiliaries, Care Assistants, Community Wardens. 	<p>Each organisation will be responsible for providing its employees with the training unless the organisation has less than 15 care staff. Organisations with less than 15 staff can apply to attend training provided by the local authority.</p>	<p>Training for trainers is available via the LA and NHS Training Teams along with Training material.</p>
2	1 Day	<ul style="list-style-type: none"> Identify the alert signs and indicators of potential harm Have an awareness of practice, organisation and attitudinal issues which may perpetuate harm. Have a detailed knowledge of the Grampian inter agency 	<ul style="list-style-type: none"> Staff with direct care role, a requirement to be professionally qualified and/or a management responsibility. Social Workers, Care Managers, Occupational Therapists, 	<p>Members of the Grampian ASP L&D Group including Police input</p>	<p>Delivered as a multi-agency/multi professional training rather than within staff teams/professional groupings</p>

MODULE	DURATION	LEARNING OUTCOMES	TARGET GROUP	DELIVERED BY	COMMENTS
		<p>policies and procedures for people working in health and social care settings</p> <ul style="list-style-type: none"> • Have an overview of adult protection legislation, the role of police, the role of an Appropriate Adult and the inquiry process • Have an awareness of the role of other agencies 	Physiotherapists, Speech & Language Therapists, Senior Support Workers, Registered General Nurses.		
2 Condensed version	2 hours	<ul style="list-style-type: none"> • Identify the alert signs and indicators of potential harm and how to report concerns. • Have a knowledge of the Grampian inter agency policies and procedures for people working in health and social care settings • Have an awareness of adult protection legislation. 	<ul style="list-style-type: none"> • Staff with a direct care role, unable to access desired option of Module 2 above. • Speech & Language Therapists, Physiotherapists, NHS Occupational Therapists, Nursing Staff. 	Members of the Grampian ASP L&D group	Not suitable for Local Authority Occupational Therapists due to requirement to be a Council Officer as defined within the Act
3	2 Day	<ul style="list-style-type: none"> • Participants follow the investigatory process, based on the Grampian inter agency policy from taking a call about an adult protection concern, through the inquiry/investigation, to holding a case conference, undertaking a risk assessment and 	<ul style="list-style-type: none"> • All professional qualified and registered Social Work and NHS staff identified as likely to be involved in Adult Protection Inquiries. • Care Managers, Social Workers, 	Members of the Grampian ASP L&D group	All participants should have completed Module 2 before attending

MODULE	DURATION	LEARNING OUTCOMES	TARGET GROUP	DELIVERED BY	COMMENTS
		producing an adult protection plan.	Occupational Therapists		
4	2 Day	<ul style="list-style-type: none"> Detailed knowledge of the Adult Support and Protection (Scotland) Act and associated code of practice - the requirements of implementation; and an understanding of its practice implications. 	<ul style="list-style-type: none"> Staff employed by local authority identified as meeting legal requirements of Council Officers 	<p>Members of the Grampian ASP L&D group Prescribed training by Scottish Government</p>	<p>Council Officers are those staff employed by the Local Authority with a professional qualification and registration as a Social Worker, Nurse or Occupational Therapist who will be authorised to carry out Adult Protection Investigations.</p> <p>Ideally participants should have attended module 3 before attending</p>
Council Officers forum	1 day	<ul style="list-style-type: none"> To prepare staff to Chair adult protection case conferences 	<ul style="list-style-type: none"> Team Leaders 	<p>Staff in Adult Protection Unit</p>	
Financial Harm	3 hours	<ul style="list-style-type: none"> Acts a refresher and practice development sessions. Provides updates in policy, procedures Skills development 	<ul style="list-style-type: none"> Council Officers 	<p>Staff in Adult Protection Unit</p>	Case study based
	3 hours	<ul style="list-style-type: none"> Highlight awareness of financial harm 	<ul style="list-style-type: none"> Banks, solicitors, voluntary sector, 	Multi agency group established	

MODULE	DURATION	LEARNING OUTCOMES	TARGET GROUP	DELIVERED BY	COMMENTS
Service User Training for Trainers	1 day	<ul style="list-style-type: none"> Awareness of role of OPG, National Resilience Unit, Trading standards 	<ul style="list-style-type: none"> CAB, <ul style="list-style-type: none"> Service provider staff from local authority and third sector 	<ul style="list-style-type: none"> Joint Training Co-ordinator and NHS G Speech and Language department 	

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Appendix A Part 2

Adult Protection Unit Training report for the Meeting of the Community Planning Board on 16 March 2015

Adult Support and Protection courses provided in 2014 by APU of Aberdeen City Council:

Course	Duration	Sessions	Course participants
ASP Module 1	Half day	15	129
ASP Module 2	Day	11	113
ASP Module 3	2 days	4	35
ASP Module 4	2 days	3	29
Council Officer Refresher	Day	1	7
Council Officer Support Group	2.5 hours	1	19
Chairs Training	Day	2	14
City Wardens	Half day	1	6
Social Workers in Training	Half to one hour	5	63
Total		43 courses	415 participants

Adult Support and Protection Training Courses

Listed are the courses which the Adult Protection Unit offers to Aberdeen City Council employees alongside a brief description of the course content.

Adult Protection Module 1

This half-day course provides awareness in adult support and protection, including how to recognise harm and how to respond to it. It is primarily designed for non-professionally qualified staff who have a direct caring role with adults who may be at risk, and is aimed at staff who do not have management responsibilities.

In addition to SCWB staff, participants included:

- Carers and Support Workers from Bon Accord Care.
- Aberdeen City Council Housing Services staff.
- Children's Services staff, for example from Children's Homes.
- Addaction staff
- SMART Money Advice staff
- Grampian Housing
- The Manor Project

Adult Protection Module 2

This one day course addresses all of the material contained in the module 1 course and in addition gives some basic information on how the Council responds to adult protection concerns (via

inquiries, investigations and case conferences), as well as on the Grampian Policy and Procedure for the Support and Protection of Adults at Risk of Harm. This course is primarily designed for staff with a direct caring role with adults who may be at risk and who also have supervisory or managerial responsibilities and/ or staff who are professionally qualified.

The content of Module 1 is covered within Module 2 training. Input and discussion is also provided by Police Scotland and a Solicitor from Aberdeen City Council. The Police Adult Protection Coordinator provides information on the police role and a Solicitor from Aberdeen City Council provides input on data protection and information sharing.

Participants included:

- Social Workers and Care Managers
- Children's Services staff
- Occupational Therapists
- Care First staff
- Self Directed Support staff
- Wellbeing Coordinators, SCWB
- Two Inspectors from the Care Inspectorate
- Managers, Senior Carers and Support Workers from Bon Accord Care who have a supervisory or managerial role
- Internal Verifiers from Bon Accord Care Learning and Development Team
- Third sector organisations employing less than 15 staff, including the Manor Project, Addaction, Living Well Project
- The Director and the Chairperson of Aberdeen Street Pastors
- Manager of Grampian Women's Aid
- Drugs Action staff
- Housing Association managers
- Grampian Housing Project
- Housing staff from Aberdeen City Council with a managerial or supervisory role
- Aberdeen Community Safety Partnership staff
- Advocacy Aberdeen staff, including their Trainer.

Adult Protection Module 3

This two day course covers in some depth the conduct of Inquiries and Investigations into allegations of harm. Risk assessment and case conference arrangements are also covered. This course is primarily designed for staff who will be undertaking specific duties as a 'Council Officer' under Part 1 of the Adult Support and Protection (Scotland) Act 2007.

It is a prerequisite for Module 3 training that staff have already attended the Adult Protection Module 2 course.

Police Scotland provide input on Investigatory Interviewing as an

integral part of the Module 3 courses not only in Aberdeen City, but also in Aberdeenshire and Moray.

Participants included:

- Care Managers, Social Workers and Occupational Therapists from most Adult Services Teams, including the Duty Social Work Team, Criminal Justice Teams and the Out of Hours Team, from Aberdeen City Council and Aberdeenshire Council
- Two Police Scotland Referral Unit Detective Inspectors and a Detective Sergeant
- Senior Practitioner, Aberdeenshire Council Adult Protection Network
- Advocacy Aberdeen staff, including their Trainer.

Adult Protection Module 4

This two day course covers in detail the statutory duties and powers undertaken by Council Officers on the council's behalf under Part 1 of the Adult Support and Protection (Scotland) Act 2007. All Adult Social Work Services staff who meet the criteria under the legislation to be considered as Council Officers are required to attend this training. Staff learn in detail about powers of visit, interview, medical examination, information gathering and the protection orders that can be applied for. Completion of this course and a subsequent online assessment is required before authorisation is given to staff, by the Chief Social Work Officer, to undertake the functions of Council Officers.

It is a prerequisite for Module 4 training that staff have already attended both Module 2 and Module 3 courses.

Participants included:

- Care Managers and Social Workers from Aberdeen City Council and also Aberdeenshire Council. This includes most Adult Services Teams
- Advocacy Aberdeen Advocates and their Trainer.

Adult Protect "Refresher" Training Session

This is a one day 'refresher' course for Council Officers who have already attended Modules 2, 3 and 4, but wish to refresh their knowledge in relation to Adult Support and Protection. It contains standard course content, but is also practitioner led, and allows Council Officers to identify areas of interest they wish to specifically explore during the session.

Adult Protection Chairperson Training

This is a one day training course specifically for staff who will be required to chair adult protection professionals' meetings and case conferences. Staff attending this course will be of Senior

Practitioner or Senior Social Worker or Senior Care Manager level and above.

Council Officers' Support Group

The Council Officers' Support Group is attended by Council Officers and involves a presentation, discussion, then wider discussion on adult support and protection issues. Sharing good practice is the theme of these groups.

Social Workers in Training

Input and discussion is led by the Adult Protection Unit Trainer on Adult Support and Protection at the meetings held at the beginning of their placements, for Social Workers in Training.

Additional training provided in 2014

Third Sector interface presentation

A presentation on Adult Support and Protection was provided to over 100 people attending the February event hosted by Aberdeen Council of Voluntary Organisations: Third Sector Interface. Those attending were from statutory partners, the third sector and the independent sector. The theme was 'Reshaping Care for Older People'.

Multi-Agency Public Protection Workshop

In March 2014 adult protection input was provided to medical students, education students, occupational therapy students, student nurses, social work students and pharmaceutical students. The Adult Protection Unit Trainer facilitated workshops on adult support and protection. This event was the 'Multi-Agency Public Protection Workshop'. The Adult Protection Unit Coordinator was part of the multi-agency expert panel.

Public Transport Unit

In March 2014, the Aberdeen City Council Public Transport Unit contacted their transport providers, encouraging their supervisors and managers to attend adult support and protection courses run by the Adult Protection Unit. Posters and leaflets were also mailed to the transport providers.

Lunch and Learn, NHS Neuro-Rehabilitation Services

The Adult Protection Unit Coordinator provided a presentation and input to this lunch and learn session in April 2014. Discussion included adult support and protection work with adults with acquired brain injuries.

NHS Psychiatry Multi-Disciplinary Team

In May 2014, the Adult Protection Unit Coordinator gave a presentation and led discussion on adult support and protection to the NHS Psychiatry Multi-Disciplinary Team.

Financial Harm Event

In June 2014 two half days were provided for around 80 participants on financial harm. This was viewed as a positive learning event and included staff from: statutory partners, the third sector and the independent sector. These organisations provided presentations, facilitators and there were also presentations from the national Financial Harm and the Office of the Public Guardian.

50+ Festival

A play was well attended during September 2014, as part of the Aberdeen City Council '50+ Festival'. This involved multi-agency partners and was led by Aberdeen Silver City Surfers. The play 'One Foot in the Door' portrayed a theatre company acting out scenarios of financial harm. Over 200 people attended this event which was a clear illustration of financial harm and the impact. The Adult Protection Unit Trainer advised on how to report harm and responded to questions from the audience.

Support Services within 'Communities, Housing and Infrastructure'.

In November 2014 the Adult Protection Unit Trainer provided an adult support and protection presentation during the new team's development day. This was to around 80 staff of Support Services within 'Communities, Housing and Infrastructure'.

The job profile for Support Officer posts in this service specifies that adult support and protection training is a mandatory requirement.

Keeping Older People Safe in Aberdeen

Multi-Agency partners provided input to a half day in November on 'Keeping People Safe in Aberdeen'. The Adult Protection Unit Coordinator gave a presentation on adult support and protection and workshops were facilitated. Notably, a significant number of General Practitioners attended, as well as staff from various partner agencies.

Practice notes

Practice notes were provided on a number of occasions during 2014 to Council Officers by the Adult Protection Unit Coordinator. This included advice on the revised Code of Practice for the Adult Support and Protection (Scotland) Act 2007.

Carer inductions

Bon Accord Care Learning and Development Team provide input on adult support and protection during their three day induction courses for new Carers.

874 Referrals
645 People
333 Inquiries
36 Investigations Initiated
16 Case Conferences
32 Review Conferences

Month of Referral	Count
Jan-13	67
Feb-13	51
Mar-13	69
Apr-13	66
May-13	87
Jun-13	81
Jul-13	84
Aug-13	57
Sep-13	63
Oct-13	86
Nov-13	108
Dec-13	55
Total	874

Harm Identified	Count
Financial	151
Neglect	106
None	114
Not Known	4
Other	16
Physical	247
Psychological	68
Self Harm	40
Self Neglect	82
Sexual	46
Total	874

Method of Referral	Count
Correspondence	62
E-Mail	800
Fax	6
Telephone	6
Total	874

1099 Referrals
868 People
378 Inquiries
40 Investigations Initiated
15 Case Conferences
34 Review Conferences

Month of Referral	Count
Jan-14	81
Feb-14	97
Mar-14	80
Apr-14	89
May-14	124
Jun-14	90
Jul-14	109
Aug-14	89
Sep-14	85
Oct-14	61
Nov-14	89
Dec-14	105
Total	1099

Harm Identified	Count
Discrimination	1
Financial	179
Neglect	155
None	90
Not Known	39
Other	87
Physical	274
Psychological	77
Self Harm	59
Self Neglect	83
Sexual	55
Total	1099

Method of Referral	Count
Correspondence	38
E-Mail	1060
Fax	1
Total	1099

Background Paper – Placemaking in East London Visit

The ACVO Big Aberdeen Event in September 2014 showcased cross-sector connectivity and collaboration and provided a catalyst for on-going Big Aberdeen Actions in response to the City's challenges. 200 Conference delegates spread across 3 sectors and 3000 family visitors attended and took part in 3 Café Discussions and community activities.

The following questions were addressed :

1. What can Aberdeen learn from other cities?
2. What single improvement would improve the quality of life of the citizens of Aberdeen?
3. How well does Aberdeen City fit the words "a great place to live, play and prosper"?

The following points were made by Keynote speaker Lord Andrew Mawson, the founder of **The Bromley by Bow Centre***, on the day (and in his book "The Social Entrepreneur: Making Communities Work".*)

1. Put effort into understanding an area and the people who live there over many years. Learn to play with ideas and experiment to gain practical experience before developing structural forms often drawn from business.
2. Don't try to define social enterprise. If it works it works.
3. Like talks to like. Ensure real innovation takes place. Work closely with social entrepreneurs to discover genuine new approaches to social problems and not simply regurgitate old solutions that civil servants can feel comfortable with. There is considerable room for innovation here. Encourage innovative partnerships between business and social entrepreneurs.
4. Support the Social Venture Capital movement. Move beyond traditional philanthropy by investing time and business skills to tackling social problems. Plug the gap of smaller-scale private entrepreneurs engaging with social enterprise.
5. Rather than inviting people to discuss what should happen, invite people to come and give them the tools to do. Don't tell people to write a proposal, tell them to get on with it. Ideas which go nowhere lead to new relationships, learning by doing and self-esteem. Forms do not.
6. Allow leaders to be leaders.
7. Focus should be getting the detail of service delivery right and having people with practical experience working in key positions.
8. Develop smarter ways of engaging with the private sector and social sector together – business relationships where social enterprise earns fees and the private sector wins tenders, markets its offerings and where facilities are not underused.
9. Build on the people and approaches that work. Produce evidence and base policy recommendations on it.
10. Give more personal responsibility and hold individuals to account for what they do. When an individual takes a decision they are visible.

A Big Aberdeen Action Plan underpinned by these points was compiled by ACVO and presented in November 2014 as a proposal to Aberdeen for Aberdeen. It identified the following issues to raise with the Community Planning Partnership management group.

1. Better Transport System: Integrated, affordable, flexible and accessible.
2. Regenerate City Centre & Improve the cultural offer of the city
3. Regeneration Boards with business leadership involvement
4. Improved understanding of what the public sector is trying to do.
5. Affordable housing and engagement with construction industry.
6. Increased support for teams in engaging with communities.
7. The gap between Rich and Poor

Arising from the September event, a visit was planned for Aberdeen City Council, NHS Grampian and ACVO to visit Lord Mawson in relation to “**Place-making in East London**”.

Visit to East London:

Lord Mawson OBE founded the Bromley-by-Bow Centre nearly three decades ago. Successive Governments have used this as national exemplars for successful community regeneration. Andrew’s championing and development of an integrated working model – involving health, education, housing, business and enterprise – has received international recognition. Andrew Mawson Partnerships believes in the unique gifts of every individual in the community and this is the secret to our success. It engages government firmly but positively; focusing on bringing consistency to their multiplicity of approaches and initiatives. They act as social brokers and place makers supporting the private and public sectors to work together. <http://amawsonpartnerships.com/>

The visit took place in early December and the party’s programme included visits to the following initiatives led by Lord Mawson.

- St Paul’s Way Trust School - the role that the Universities can play by forming close working partnerships with their local schools and communities;
- St Paul’s Way Transformation Project - creating integrated developments through joined up working, clear leadership and an aspirational narrative;
- Poplar HARCA estates - bringing existing communities and new opportunities together, creating mutual benefit through enterprise and renewal.
- Bromley by Bow Centre - the relationship of form and function, the role of design and integration in the realisation of purpose, a place where people can make connections, grow and thrive; working with key partners, stakeholders and local people to build vibrant communities through engagement and integrated local development.

Within this context the following Actions were agreed by the Aberdeen parties** following the visit:

Action notes from Bromley by Bow Visit

- Overall idea – pick two areas in the city, do a show-and-tell by all sectors. Use the idea of not spreading change too thinly but ensure effective support to enable change .
 - **Torry-**
 - use Big Noise/Sistema partnership as a catalyst for building from Torry Academy site. Include ACVO in Sistema partnership.
 - Ensure links are made into the Torry GP practice and into existing 3rd sector organisations in Torry/cultural field - ACVO to provide list of those organisations.
 - Bring together police, fire, universities, college, primary and secondary schools, cultural organisations, business world to be involved in the scheme.
 - Set up of Timebank for volunteering, business engagement, skills development – ACVO to action.
 - NHS – **Torry and Danestone** practices – could be the test of change areas. Use of the patient participation group in Danestone to provide feedback.
 - ACC – **Tillydrone** – review retail options for the area and work with all partners for an innovative approach.

- **Middlefield** – ACC issues with new road, implications for community – accessibility of GP surgery. Existing relationship with Space Solutions as business partner.
 - **Northfield** Total Place still on-going – generally all parties are involved and it could be a locality for modernisation of primary care offering. Identified as potential area of Big Aberdeen partnership action.
 - **Seaton**– Seaton Backies development already linking in partnership - ACC, Langstane Housing Association, ACVO, Aberdeen Greenspace, Aberdeen Playforum, local Seaton Backies community projects and through these with business partners and University
- **Use of public art** – connect to Gray's School of Art. Encourage all partners to change the feel of premises following the Bromley example. Identified as potential area of Big Aberdeen Action including with AB+ – connect to Gray's School of Art, Aberdeen Greenspace and Clean Aberdeen 2015.
- **Social prescribing** – what's happening generally in the city and update/information to ACC on the project led by Dr Alistair Jamieson. Overall need to simplify the offer, make it easy for GP's to use- copy the Bromley example of using EMIS? Long term communication campaign to change the expectation of patients from medical to social prescription. Work with 3rd sector and patient participation groups on this.
- **Weave actions into Big Aberdeen Action Plan** <http://acvo.org.uk/big-aberdeen-action/>

** The visit involved Angela Scott, Chief Executive, ACC; Pete Leonard, Director of Communities, Housing and Infrastructure, ACC; John Quinn, Head of Land and Property Assets, ACC; Dr Christopher Provan, NHS Grampian; Dr Raj Gupta, NHS Grampian; Dr Peter Kiehlman, NHS Grampian; Gary Newbigging, NHS Grampian; Joyce Duncan, CEO of ACVO and Alison Chandler, ACVO.

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Agenda Item 6.5



Community Planning Aberdeen

Progress Report	Smarter Places Review
Lead Officer	John Quinn
Report Author	John Quinn
Date of Report	5 March 2015
Governance Group	Community Planning Aberdeen Board

1:	Purpose of the Report
	To report the workplan for the reconvened North East Property Group

2:	Summary of Key Information
1.	Context
	<p>“Our public services are now facing their most serious challenges since the inception of the welfare state with demand for services rising in an environment of constrained public spending. Reforming the delivery of public services is essential and more effective and efficient property management, delivery and operation in partnership with all public sector partners is fundamental to facilitating reform”. <i>Christie Commission 2011</i>.</p>
2.	Aim
	<p>Effective and efficient use of all public sector property and land.</p>
3.	Goals
	<p>Public sector organisations have been working collaboratively to respond to reducing budgets for years however it is clear that an integrated approach will have the biggest impact and is the logical next step.</p> <p>Integration will also create significant challenges and opportunities. Changing to an integrated service across public sector partners may be viewed as undeliverable to some but not changing will result in many missed opportunities to deliver better value to communities.</p> <p>To deliver on the agreed aim the following goals have been set:</p> <ol style="list-style-type: none">1. The property services across major stakeholder organisations should be consolidated into one focus to provide a service.2. The consolidated property service is to become a key stakeholder at the outset of all service planning to understand the property and land

implications and allow appropriate challenge and planning with other public sector partners.

4. Consultation

This strategy is being developed initially via consultation with the Heads of Property for Aberdeenshire Council, Aberdeen City Council and NHS Grampian. Meetings will be arranged with other public sector bodies going forward.

5. Next Steps

1. Consultation with senior management teams within each organisation.
2. Consultation with elected members.
3. Consultation with Community Planning Partnerships.
4. Consultation with officers effected within each organisation.

3: Recommendations for Action

- Information to be noted by the CPA
- Establishment / Extension of Group
- Development of Public Property and Land database
- Protocol agreed on Principles for Implementation
- Implementation plan to be agreed

4: Opportunities and Risks

- Fluctuations of Commercial Market
- Public Property focussed on providing for Service needs
- Response mechanisms to adapt to change
- Rationalisation of property and land
- Smarter working options for employees
- Development Options

Actions agreed 27 January 2015
Countesswells PLACE Group

Present:

Chris Provan and Gerry Donald, NHS Grampian

Allan McQuade, Scottish Enterprise

Angela Scott, Pete Leonard, John Quinn, Paul Williamson, ACC

- 1) P Williamson – to arrange a meeting with Jim Fitzsimons to give the Group an overview of the plans for the development.
- 2) J Quinn – to arrange a meeting with Jim Fitzsimons for partners to review the collective transition need of partners and whether scope to do something smarter. (P Williamson to be included as custodian of S75 Agreement). Each partner to have detailed understanding of single system need. (Strategic Group members to advise who right personnel are to join).
- 3) A Scott – formally create the PLACE Group within the CPP infrastructure of CPP.
- 4) A Scott – provide updates to the CPP Board and CPP Management Group (to ensure Police/Fire) sighted on what we're doing.
- 5) A Scott – to convene further meeting of the Strategy Group (agreed monthly to begin with).

Sub-Groups we agreed to form:

- i) Digital PLACE Strategy – Pete/Alan to lead
- ii) Health & Wellbeing – Chris to lead
- iii) Affordable Housing + for key workers – Pete to link this to other groups
- iv) Communication and Engagement Group – Takki Sulaiman to lead
- v) Broader private sector involvement in the development – Allan McQuade

ALL – everyone to identify appropriate personnel within their own organisation to join the Sub Groups (being mindful of needing right attitude to work in a different way).

ALL Group leads to convene meeting of their Sub Groups

Gerry/John – we agree it would be useful to have an entirely separate group focussed on the broader GP and local authority estate to see how existing pressures in Bridge of Don, Bucksburn, Greenfern, Torry, Loirston could be tackled together

(post meeting note – mentioned to Judith Proctor, she is keen to be involved)

Suggestions made in the meeting re group membership

Health and Wellbeing – Joanna Murray/Steve Shaw, public health input – represent wellbeing