<u>**LOIP – Resilient, Included and Supported**</u>

<u>**Note from first Meeting/ Workshop, Friday 3 March 2017**</u>

<u>**Workshop purpose:**</u>

To ensure that outcome group members have a clear understanding of the inter-relationships (and linkages/ overlaps) of the various outcome groups supporting the delivery of the LOIP. To consider and plan for how the business of the working group will be conducted in order to deliver the required outputs.

<u>**Workshop Agenda:**</u>

Attendees: Judith Proctor (Chair, ACSHCP), Gail Woodcock (ACHSCP), Derek McGowans (ACC), Kevin Toshney (ACHSCP), Michelle Cochlan (ACC), Val Vertigans (CJ), Jane Russell (ACVO), Sandy Kelman (ADP), James Simpson (Integrated Children's Services), Trevor Gillespie (ACC), Jillian Evans (NHSG)
Apologies: Gordon Riddel (SFRS), Paul Tytler (ACC)

1. **Getting to know each other**

2. **Why are we here? Context and journey so far**

   Michelle Cochlan provided a presentation to set the context (attached)

3. **The LOIP as a complex interconnected plan - understanding the parts and how they relate to "Resilient, Included and Supported"**

   ▪ Links to Community Justice - Val Vertigans presented an overview of Community Justice, and work ongoing locally in Aberdeen, including specific links to the Resilient, Included and Supported (RIS) LOIP drivers. (attached). Through the resultant discussion, links with developing CJ measures were highlighted. Some of the measures may be the same. There is a significant overlap with resilient included and supported group. Responsibilities for reporting to CPA need to be clear. The drivers will sit in RIS group. However, responsibilities for delivering implements are anticipated to sit in community justice. This needs to be clarified as early as possible.

   ▪ Alcohol and Drugs Partnership – Sandy Kelman tabled an overview of the City's Alcohol and Drugs Partnership and articulated relationships between the work of this group and some of the drivers within the Resilient, Included and Supported section of the LOIP. Over 8 years activities led by the ADP have resulted in moving waiting list from 800 people to zero. The challenge now is how we support people to come out of services. ADP strategies- all partners have signed up to these, there needs to be leadership across our broader partnership in order to ensure delivery.

   • Integrated Children's Services - James Simpson presented an overview of the work of the Integrated Children's Services Partnership, specifically highlighting the draft ICS Plan 2017-20. Discussion highlighted transition planning for children and young people with ASN; LAC; parental support and services and employability support.

4. **"So What" - what is all this telling us/ what are the implications for the Resilient Outcome Group?**

The group had a wide ranging discussion including:

   • The need to communicate clearly about HSCP localities and CPP localities, so potential for confusion is minimised. There are shared agendas and ambitions. We need to be smart about not duplicating but adding value.

- A recognition that we can't do everything at once – need to identify priorities and where would be best to apply model for improvement. MC highlighted that it is desired to use run charts to evidence change.
- It was noted that facts and qualitative evidence will both be essential to illustrate the changes achieved.
- If we continue to work in the same way that we have previously, we may not achieve our ambitions. The desired change may involve taking risks and trying out something completely new.
- Process and intermediate outcome measures may be helpful to understand changes that are being made. We need to consider how we turn the data (qualitative and quantitative) into intelligence. About how we use data rather than just showing data.
- It will be important to consider how people are involved across wider system and what is improvement from their perspective. We need to ensure appropriate balance between top down and bottom up.
- It will be important how we capture transformation, rather than merely undertaking continuous improvement on existing systems.
- It was agreed that having a framework is useful place to start.
- Agreed that 3 – 5 initial priority actions may be helpful – to provide focus and ensure that they are memorable by wide cohort.
- There was discussion on how we raise awareness across broader workforce of negative impacts of health limiting behaviours within organisations.
- It was considered that economic development is key to this work stream – how do we ensure that no-one is left behind. Also links with Digital City work.

5. What do we need to do as an outcome group and how do we achieve this?

The group undertook a brainstorming session to identify possible ideas. It was agreed that whatever we do will be intelligence and data driven. It was acknowledged that vulnerability depends on situation. Ideas included:

- Opportunity to address Alcohol issues through wider use of Alcohol Brief Interventions
- Joining up pathways – linking across LOIP including transition between children and adults.
- Data Sharing and using "Big Data" for prevention
- Using employment as a key driver for wellbeing and giving sense of purpose
- Identifying and targeting the "causes of causes"

6. Presentation about national work around data sharing and identification of vulnerable people

Trevor Gillespie tabled an overview on some national work around data sharing in the context of vulnerable people (attached). The group discussed how we may use such a system proactively when there isn't an issue as well as reactively in a crisis. Such a system could be a key enabler to drive forward improvement. Key discussion points included:

- Would need investment in research analysts to look and analyse what shared data is telling us. There is national resource available that could do this (JE).
- We need to be specific about how we would use this type of data.
- We need to consider whether community is happy that data is used in this way.
- Need to link to digital outcome group.
- Opportunity for small tests.
- Recognition that culture is important: systems won't solve the problem. It's about how people use these systems.

7. Next steps - meeting schedule/ work plan etc.

The following activities were agreed:

- Consider data sharing in advance of next meeting: describe what this could look like, and what its purpose would be.
- Define what is meant by "vulnerable" and categories of vulnerability – this needs to be set in the context of this outcome group being focussed on Resilient People. We know what factors are that identify and predict issues of resilience and wellbeing.
- All to consider in advance of next meeting: "what could data do for us in this group to identify resilience".
- Consider how data and intelligence could be used to create "persons at harm" data base.
  - How do we use and gather the "big data"?
  - Consider "City Wide Observatory" approach.
  - Seldom heard are heard by someone.
  - How would we use such a data base?
- Consider further roll out of Alcohol brief interventions as one of the key activities for this group
  - potentially linking in with Making Every Opportunity Count). (Consider CPA locality focus and train the trainer approach).
- Attendees to bring further ideas for tests of change to next meeting.
- Additional attendees: Lead Officers for CJ, ICS and ADP. Also invite someone from Economic Development to cover employability issues, link to Digital City, and Jo Larsen from Community Safety.
- Meetings to be monthly while group is forming and plans are being developed.