



Community Planning Aberdeen Management Group

Meeting on **WEDNESDAY, 27 OCTOBER 2021 at 2.00 pm**

**** Virtual - Remote Meeting, Aberdeen ****

B U S I N E S S

APOLOGIES

MINUTES

- 1.1 Minute of Previous Meeting of 11 August 2021 - for approval (Pages 3 - 10)
- 1.2 Minute of Meeting of the CPA Board of 15 September 2021 - for information (Pages 11 - 18)

STRATEGIC BUSINESS

- 2.1 North East Scotland College Strategic Plan 2021-2023 (Pages 19 - 22)

CPA IMPROVEMENT PROGRAMME

- 3.1 CPA Improvement Programme Quarterly Update and Appendices (Pages 23 - 138)

GENERAL BUSINESS

- 4.1 Child Poverty Action Report (Pages 139 - 174)
- 4.2 Community Justice Annual Report (Pages 175 - 204)
- 4.3 Joint CPA Response to National Care Service Consultation (Pages 205 - 242)

- 4.4 Summary Refreshed Local Outcome Improvement Plan 2016-26 (Pages 243 - 254)
- 4.5 Community Planning Budget 2012/22 - Q2 Budget Monitoring Report (Pages 255 - 258)

FORWARD BUSINESS PLANNER AND FUNDING TRACKER

- 5.1 CPA Funding Tracker (Pages 259 - 268)
- 5.2 CPA Management Group Forward Planner (Pages 269 - 272)
- 5.3 Date of Next Meeting - 26 January 2022

Should you require any further information about this agenda, please email communityplanning@aberdeencity.gov.uk

**COMMUNITY PLANNING ABERDEEN MANAGEMENT GROUP
11 AUGUST 2021**

Present:- Gale Beatie (Aberdeen City Council) (Chair), Murray Main (Police Scotland) (Vice Chair), Mervyn Bain (University of Aberdeen), Jamie Bell (Scottish Enterprise), Dave Black (GREC), Rab Dickson (Nestrans), Jill Franks (Sport Aberdeen), Allison Carrington (Aberdeen Propers), Nicola Graham (Skills Development Scotland), Maggie Hepburn (ACVO), Derek McGowan (Anti-Poverty Group and Community Justice Group), Alison MacLeod (as a substitute for Sandra MacLeod) (Resilient, Included and Supported), Lavina Massie (Civic Forum) and Scott Symon (Scottish Fire and Rescue Service).

Also Present:- Michelle Cochlan and Allison Swanson (Aberdeen City Council); Susan Harrold and Jenna Young (NHS Grampian).

Apologies:- Neil Macdonald (Alcohol and Drugs Partnership), Jillian Evans (NHSG and Sustainable City), Sandra MacLeod (RIS and Health and Social Care Partnership), and Graeme Simpson (Integrated Children's Services).

Topic	Discussion/Decision	Action By
1. Welcome	The Chair welcomed everyone to today's meeting.	
2. Minute of Previous Meeting of 2 June 2021 for approval	<p>The Management Group had before it the minute of its meeting of 2 June 2021, for approval.</p> <p>In relation item 9 (Child Friendly City), to note that a further progress report would be submitted to the next meeting of the Management Group.</p> <p><u>The Management Group resolved:</u></p> <ul style="list-style-type: none"> (i) to agree the minute as a correct record; and (ii) to note all actions had been undertaken. 	Matt Reid, ACC
3. Minute of Meeting of the CPA Board of 7 July 2021	<p>The Management Group had before it the draft minute of the CPA Board meeting of 7 July 2021 for information.</p> <p>In relation to item 5 (Final Draft Refreshed Local Outcome Improvement Plan 2016-2026), it was noted that there was a lot of activity ongoing in the city to improve economic prosperity and it was suggested that it would be beneficial to have a cohesive picture of all partner activity in relation to improving the city's economic prosperity. Allison Carrington advised that Aberdeen Proposers would be considering</p>	Allison Carrington, Aberdeen

Topic	Discussion/Decision	Action By
	<p>how to enhance marketing of Aberdeen Prospers Group and the work ongoing to improve economic prosperity across the city.</p> <p><u>The Management Group resolved:</u> to note the draft minute.</p>	Prospers
<p>4. Review of Community Planning Aberdeen Membership, Leadership and Partner Representation</p> <p>Page 4</p>	<p>The Management Group had before it a report which presented information on current members of Community Planning Aberdeen and provided an overview of leadership and partner representation on the Outcome Improvement Groups. It also presented the revised Community Planning Aberdeen Constitution</p> <p>The report recommended:- that the Management Group</p> <ul style="list-style-type: none"> (a) note the current core and wider membership of Community Planning Aberdeen summarised at Appendix 1; (b) consider whether the statutory community planning partners listed at paragraph 2.1 should be again invited to join Community Planning Aberdeen or whether they were adequately represented through other forums; (c) note leadership and partner representation on the Outcome Improvement Groups summarised at Appendix 2 and detailed in Appendix 3; (d) consider the request for nominations for the vacant Vice Chair of the Children's Services Board and Lead Contact for the Community Empowerment Group; and (e) approve the revised CPA Constitution in Appendix 4. <p>The Management Group discussed the representation of the statutory partners listed at paragraph 2.1 of the report and agreed that they should be invited again to join Community Planning Aberdeen, but that before doing so it was important to set out in the letter the role that they could play in the Partnership. Therefore, the Chairs of the relevant Outcome Improvement Groups should consider how the organisation(s) could support achievement of their Stretch Outcomes, to ensure that the role of the organisation was expressed in the further letter to be sent.</p>	

Topic	Discussion/Decision	Action By
Page 5	<p>In terms of the Vice Chair of the Children’s Services Board and the Resilient, Included and Supported Group, it was noted that conversations were ongoing and that all partners had been asked to consider and submit nominations to Michelle Cochlan by 20 August 2021. Discussion was also had on the vacant Lead Contact for the Community Empowerment Group.</p> <p><u>The Management Group resolved:</u></p> <ul style="list-style-type: none"> (i) to approve recommendations (a), (c) and (e); (ii) in relation to the statutory community planning partners listed at paragraph 2.1, to agree that Jillian Evans, consider involvement of Historic Environment Scotland in the Sustainable City Group; Allison Carrington consider involvement of Visit Aberdeenshire in Aberdeen Prospers, and that Jill Franks consider how Scottish Sports Council could be involved in CPA and advise Michelle Cochlan directly by 20 August 2021 and thereafter that CPA write again to the three organisations inviting them to join the partnership and showing what their role could be; (iii) to note that the discussions were ongoing in relation to nominations for the vacant Vice Chair of the Children’s Services Board; Vice Chair of the Resilient, Included and Supported Group; and Lead Contact for the Community Empowerment Group and that all partners had been asked to put forward their nominations by 20 August 2021 to enable names to be determined in advance of reporting to the Board; and (iv) to approve the revised CPA constitution for submission to the Board on 15 September 2021, noting that it would be updated in advance following consideration of suggestions on simplifying language to be submitted from Dave Black and also on reflecting the role of Locality Empowerment Groups and Priority Neighbourhood Partnerships in reaching hard to reach sections of their communities and ensuring the language throughout provided longevity of the document. 	<p>Jillian Evans, Sustainable City/ Allison Carrington, Aberdeen Prospers/Jill Franks, Aberdeen Active Partnership/Michelle Cochlan, ACC</p> <p>All Partners</p> <p>Michelle Cochlan, ACC/Dave Black, GREC</p>
5. CPA Improvement Programme 2021-2023 Reporting	The Management Group had before it a report which presented the reporting processes for supporting the delivery of the Community Planning Aberdeen Improvement Programme 2021-23 to be considered at item 3.2 on today’s agenda (item 6 of this minute refers).	

Topic	Discussion/Decision	Action By
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 7</p>	<p>continuing improvement projects</p> <p><u>The Management Group resolved:</u></p> <p>(i) to approve the recommendations;</p> <p>(ii) to note that five of the improvement project aims still required a Project Manager to be identified, however the lead organisations remained committed and a Project Manager would be confirmed in advance of the submission of the Improvement Programme to the Board on 15 September;</p> <p>(iii) to note that at present seven of the nine, improvement projects under Stretch Outcome 12 were being led by the Health and Social Care Partnership and that the Alcohol and Drugs Partnership were therefore reviewing the lead organisation for their projects and would confirm in advance of the submission of the Improvement Programme to the Board on 15 September.</p>	<p>Derek McGowan (Anti-Poverty Group), Allison Carrington (Aberdeen Prospers), Sandra MacLeod (RIS) & Neil McDonald (ADP) Neil McDonald/Simon Rayner (ADP)</p>
<p>Community Planning Budget 2019/20 – Q1 Budget Monitoring Report</p>	<p>The Management Group had before it a report which provided an update on the 2021/22 Community Planning Budget's financial performance for the period 1 April 2021 to 30 June 2021.</p> <p><u>The report recommended:-</u> that Management Group note Community Planning Aberdeen Budget's performance during quarter 1 of 2021/22.</p> <p><u>The Management Group resolved:</u> to approve the recommendation.</p>	
<p>8. CPA Forward Planner</p>	<p>The Management Group had before it the CPA Forward Planner.</p> <p><u>The Management Group resolved:</u> to note the CPA Forward Planner.</p>	
<p>9. CPA Funding Tracker</p>	<p>The Management Group had before it the CPA Funding Tracker.</p> <p><u>The Management Group resolved:</u> to note the CPA Funding Tracker.</p>	

Topic	Discussion/Decision	Action By
10. Date of Next Meeting	The Management Group noted that its next meeting would be held on 19 October 2021 at 2pm.	
11. NHS Grampian Strategic Plan Update Page 8	<p>The Management Group received a presentation from Jenna Young, Planning Manager/Programme Manager for COVID-19 Vaccination Programme Planning, NHS Grampian providing an update on the development of the NHS Grampian Strategic Plan.</p> <p>In the presentation, an overview of the high level process for development of the Strategic Plan was provided, highlighting the intention for the Strategic Plan to be approved in February 2022.</p> <p>At present, NHS Grampian were at phase 1 of the engagement plan and an update on the current response rates was provided. Jenna explained that there were a range of ways people could get involved in phase 1, for example:</p> <ul style="list-style-type: none"> • Community groups/organisations could request for a member of the Strategy Development Team to attend their group/organisation meeting; • They could host a facilitated discussion within their group/organisations and share the feedback; and • individuals could request to attend an engagement/discussion session or complete the online survey. <p>It was highlighted that key to success is that the Strategic Plan was developed in Partnership, ensuring where relevant a cohesive and joined up approach to support improved public health. The Plan was being created with the public, staff and partners via multiple mechanisms, targeted approached and building on work already undertaken. NHSG were also drawing on the expertise of partners to help maximise opportunities for join-up to ensure the plan had a positive impact on the health of the Aberdeen City and Grampian populations.</p> <p>Engagement phase 1 would end on 31 August and Jenna offered to attend the next meeting to share key themes from feedback and plan for engagement phase 2.</p>	

Topic	Discussion/Decision	Action By
Page 9	<p>Partners asked if the Health and Transport Action Group had been consulted; how Community Councils were being consulted and whether there was information on the survey and how it could be accessed, that could be shared with all partners for dissemination across their organisations.</p> <p>The importance of ensuring alignment and connection with the LOIP and across all Partner strategic plans was emphasised.</p> <p><u>The Management Group resolved:</u></p> <ul style="list-style-type: none"> (i) to request Jenna Young to provide details on the current survey for the NHS Grampian's Plan for the Future and that this be shared with partners for cascading; (ii) to request Jenna to provide information to Rab Dickson about options for engaging with the Health and Transport Action Plan Steering Group on the Strategic Plan; (iii) to note that following the survey closing on 31 August the next stage would be to consider the results on a themed basis and that Jenna would report the key themes to the next meeting to ensure alignment and connection with LOIP and Partner Plans was made; and (iv) to note that Michelle Cochlan would be invited to future joint NHSG/HSCP Strategic Plan planning meetings to ensure alignment and connection with the LOIP. 	<p>Jenna Young, NHSG</p> <p>Jenna Young, NHSG</p> <p>Jenna Young, NHSG</p> <p>Jenna Young, NHSG/Alison MacLeod, HSCP</p>

This page is intentionally left blank

COMMUNITY PLANNING ABERDEEN BOARD
15 September 2021
Hybrid meeting

Present:- Councillor Laing (Chair)
 Gale Beattie (Aberdeen City Council)
 Duncan Cockburn (RGU)
 Jillian Evans (Public Health, NHS Grampian) (as a substitute for Susan Webb)
 Councillor Greig
 Luan Grugeon (Integration Joint Board Chair)
 Karl Leydeker) (University of Aberdeen)
 Gordon MacDougall (Skills Development Scotland)
 Richard McCallum (Scottish Government)
 Supt. Neil McDonald (Police Scotland) (as a substitute for George MacDonald)
 Councillor Alex Nicoll
 Paul O'Connor MBE (ACVO)
 Angela Scott (Aberdeen City Council)
 Jonathan Smith (Civic Forum)
 Scott Symon (Scottish Fire and Rescue Service) (as a substitute for Bruce Farquharson)
 Councillor Wheeler

In Attendance:- Elizabeth Aston (Scottish Government),

Also Present:- Michelle Cochlan, Martin Murchie and Matthew Reid (all Aberdeen City Council).

Apologies:- Bruce Farquharson, George MacDonald, Ken Milroy, Alistair Robertson and Susan Webb.

Page 11

Topic	Discussion/Decision	Action By
1. Declarations of Interest	There were no declarations of interest.	
2. Minute of Previous Meeting of 7 July 2021	The Board had before it the minute of its previous meeting of 7 July 2021, for approval. <u>The Board resolved:-</u> to approve the minute as a correct record.	

Agenda Item 1.2

Topic	Discussion/Decision	Action By
3. Draft Minute of the CPA Management Group meeting of 11 August 2021	<p>The Board had before it the minute of the CPA Management Group meeting of 11 August 2021, for information.</p> <p><u>The Board resolved:-</u> to note the draft minute.</p>	
4. CPA Board Forward Business Planner	<p>The Board had before it the Forward Business Planner.</p> <p><u>The Board resolved:-</u> to agree the Forward Business Planner.</p>	
<p>5 Page 12</p> <p>National Update – Scottish Government</p>	<p>The Board received an update from Richard McCallum - Director of Health Finance and Governance, Scottish Government:</p> <p>Mr McCallum advised that a new parliamentary term had started with a new form of government in a Cooperation Agreement between the Scottish Government and Scottish Greens with two new ministers from the Scottish Green Party.</p> <p>Mr McCallum reported that the Programme for Government entitled Fairer Greener Scotland was published on 7 September 2021, with key commitments:</p> <ul style="list-style-type: none"> • Publication of NHS Recovery Plan; • to double carers' allowance this winter through the Carers' Allowance Supplement Bill; • extra funding for teachers and Pupil Support Assistants; • resource and capital funding for frontline health service; • rolling out of Scottish Child Payment for children under 16; and • roll out £1.8bn to make homes easier and greener, de-carbon homes by 2030 <p>In response to a question regarding the Independent Review of Adult Social Care - Feeley Report, Mr McCallum said that consultation on the Report had launched on 9 September 2021 and would close on 2 November 2021. An easy-to-read version of the consultation was published on 30 August.</p>	

Topic	Discussion/Decision	Action By
Page 13	<p>Mr McCallum advised that there had been issues raised by CoSLA and local governments, and as a result there were ongoing discussions between Scottish Government and local governments – including the establishment of the Social Covenant Steering Group with members comprising those with significant experience of the way in which services were currently delivered. It was expected that this would become legislation at the end of the parliamentary session.</p> <p>The Chair asked about the inclusion of a number of other services within the report which went further than the original recommendations and would have an impact on the CPA partnership working. Mr McCallum undertook to take these comments back to his team.</p> <p>Members agreed to submit a Partnership response to the consultation. Partners were also urged to use their channels and networks to encourage feedback to the consultation by those most affected.</p> <p>In response to a question regarding involving those with lived experience in the consultation, Angela Scott reported that the Scottish Government had produced material designed to support public engagement with Community Groups, which could be circulated for partners to share with their groups.</p> <p><u>The Board resolved:-</u></p> <p>i) to instruct Officers to submit a response to the consultation on behalf of the Community Planning Board; and</p> <p>ii) to note the updates.</p>	<p>Richard McCallum, SG</p> <p>All Partners</p> <p>Angela Scott/Michelle Cochlan</p>
6. Review of Community Planning Aberdeen Membership, Leadership and Partner Representation	<p>The Board had before it a report providing information on membership of Community Planning Aberdeen and providing an overview of leadership and partner representation on the Outcome Improvement Groups. It also presented the revised Community Planning Aberdeen Constitution.</p> <p>Michell Cochlan advised that the next steps were - subject to the agreement of the CPA Board, the information in the report would be used to update the CPA Induction Pack and an induction would be arranged for all new members.</p> <p>The Board was advised that the advertisement to fill the vacancy of Children’s Services Board Lead Contact would be posted on 17 September 2021.</p>	Michelle Cochlan

Topic	Discussion/Decision	Action By
Page 14	<p>It was noted that Skills Development Scotland was represented on three groups and Ms Cochlan undertook to update the report.</p> <p>The report recommended: that the CPA Board:</p> <ul style="list-style-type: none"> i) agree to appoint the Director of Commissioning, ACC as the chair of the CPA Management Group; ii) note the current core and wider membership of Community Planning Aberdeen summarised at Appendix 1; iii) note that statutory community planning partners listed at paragraph 2.1 will be invited to join specific Outcome Improvement Groups, if relevant; iv) note leadership and partner representation on the Outcome Improvement Groups summarised at Appendix 2 and detailed in Appendix 3; and v) approve the revised CPA Constitution in Appendix 4. <p><u>The Board resolved:</u> to agree the recommendations.</p> <p>Please note that following the meeting, further nominations were received. A report on the up-to-date position can be found here.</p>	Michelle Cochlan
7. CPA Improvement Programme 2021-2023	<p>The Board had before it a report presenting the Community Planning Aberdeen Improvement Programme 2021-23 following approval of the refreshed LOIP on 7 July 2021. The programme set out the timescales for both initiation of the new aims within the refreshed LOIP, as well as the timescales for the continuing project charters being reviewed, over the next two years up until 2023. At the end of this the LOIP would be reviewed providing a final update on the delivery of the Socio-Economic Rescue Plan 2020/21.</p> <p>In response to questions regarding New Projects starting in 2022:</p> <ul style="list-style-type: none"> • Support 15 care experienced young people progress to employment through public sector funded employability programmes by 2023; and • The number of children and young people with an eating disorder who are identified within 3 months of onset is increased by 50% by 2023. 	Michelle Cochlan/Angela Taylor Michelle Cochlan/ Natalie O'Young

Topic	Discussion/Decision	Action By
	<p>Ms Cochlan undertook to seek further information and to report back to Members.</p> <p>The report recommended: that the Board:</p> <ul style="list-style-type: none"> i) approve the CPA Improvement Programme 2021-2023 in Appendix 1; ii) agree that project charters be submitted to the CPA Board for all new improvement projects, as per the timescales noted in Appendix 1; and iii) agree that the respective Outcome Improvement Group approve revised charters for all continuing improvement projects, as per the timescales noted in Appendix 1. <p><u>The Board resolved:</u> to approve the recommendations.</p>	
<p>Page 15 CPA Improvement Programme 2021-2023 Reporting Processes</p>	<p>The Board had before it a report presenting the reporting processes for supporting the delivery of the Community Planning Aberdeen Improvement Programme 2021-23 as considered at item 7 of the agenda.</p> <p>The report recommended: that the Board:</p> <ul style="list-style-type: none"> i) note the revised project charter template to be used for new and revised improvement project charters at Appendix 2, as well as the process map (Appendix 1) for linking LOIP improvement project aims to community ideas for improvement contained in the Locality Plans; ii) note the revised project update report (Appendix 3) which shows the connection/progress of community ideas from the Locality Plans; and iii) agree that Outcome Improvement Groups; the Management Group and Board use the new interface for reporting progress towards the Stretch Outcomes and of the individual improvement projects (Appendix 4) and that this be used from the next meeting, with Chairs of the Outcome Improvement Groups speaking to the progress of their respective Stretch Outcomes at the CPA Management Group stage. <p><u>The Board resolved:</u> to approve the recommendations.</p>	

Topic	Discussion/Decision	Action By
<p>9. Update on Alignment of Private Sector Corporate Social Responsibility with Aberdeen City LOIP</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 16</p>	<p>The Board had before it a report providing an update on progress made since last year with aligning the corporate social responsibility efforts of Aberdeen businesses with the Local Outcome Improvement Plan.</p> <p>Michelle Cochlan – Community Planning Manager - spoke to the report and noted the next steps: to run a follow up event one year on from the first Aberdeen Responsible Business Event, This would take place on 25 November 2021 and provide an opportunity to reflect on how Community Planning Aberdeen had worked closely with the business community during the pandemic. The programme would include keynote speakers from Responsible Business Partners as well as Community Planning Partners to identify the latest opportunities to get involved following the refresh of the LOIP.</p> <p>The Chair encouraged all partners to share information on the Event once it was available.</p> <p>The report recommended: that the Board</p> <ul style="list-style-type: none"> i) note progress made since October 2020 and plans to hold a follow up Responsible Business Event on 25 November 2021; ii) agree to amend the current LOIP project on community benefit clauses to “Increase the number of responsible businesses working with Community Planning Aberdeen through Community Benefits and CSR activity by 200% by 2023’; and iii) request partners to consider a representative to be involved in the project and support promotion of this initiative <p><u>The Board resolved:</u> to agree the recommendations.</p>	<p>All partners</p>
<p>10. Child Friendly City Update</p>	<p>The Board had before it a report updating members on progress regarding the UNICEF Child Friendly City programme and outlining the next steps. Matthew Reid, Operations - Integrated Children's and Family Services, introduced the paper and spoke to the report.</p> <p>Mr Reid highlighted the next steps as detailed in the report.</p>	

Topic	Discussion/Decision	Action By
	<p>The report recommended: that the Board</p> <ul style="list-style-type: none"> i) continues to endorse the Child Friendly City work, promoting children’s rights and engages with relevant training opportunities; ii) receives future progress reports and monitor actions where necessary; and iii) notes the next steps. <p><u>The Board resolved:-</u> to approve the recommendations.</p>	
11. Date of Next Meeting	The Board noted that its next meeting would be held on 30 November 2021 at 2pm.	

This page is intentionally left blank



Community Planning Aberdeen

Progress Report	North East Scotland College Strategic Plan 2021-2023
Lead Officer	Robin McGregor, Vice Principal: Curriculum and Quality
Report Author	Robert Laird, Head of Planning and Academic Partnerships
Date of Report	5 October 2021
Governance Group	CPA Management Group – 27 October 2021

Purpose of the Report
To present North East Scotland College’s Strategic Plan 2021-2023 for information and noting.

Summary of Key Information
<p>NESCol is a member of the CPA Board, the CPA Management Group, and two Outcome Improvement Groups.</p> <p>The Strategic Plan 2021-23 is shaped by the College’s vision and values and is structured on a set of key strategic themes which provide a relevance and purpose for the College and our future activities. They include being agile and responsive to the needs of our region; empowering and supporting people who come to NESCol to learn and work; advancing our partnership working to enable a more impactful approach to regional economic recovery and reform; delivering excellence and innovation, and leading on environmental and social sustainability.</p> <p>The full Strategic Plan is available here.</p> <p>For each strategic theme a set of key objectives have been established which will provide focus and priority as the College seeks to realise the ambitions within each theme. A set of key performance indicators have been identified. These, along with an integrated College-wide enhancement plan, will allow the College monitor progress throughout the lifetime of the plan.</p> <p>The new Strategic Plan is underpinned by a series of supporting strategies each representative of key areas of College activity and priority. All the supporting strategies are very closely aligned to the new Strategic Plan. The themes contained within each are woven into the ones contained within the main plan itself and will help support the realisation of the short, medium and longer term aspirations of the College. Additional contextual information, including a mapping of the Plan to regional and national priorities, is also provided within the three appendices to this report.</p>

The College's contribution to the refreshed Local Outcome Improvement Plan (LOIP) is summarised below, and is included in Appendix 2 of the Strategic Plan.

Refreshed LOIP Theme	College Contribution	Strategic Objective
Economy	<p><u>Aberdeen Prospers</u>: supports delivery of the Local Outcome Improvement Plan (LOIP) and underpinning locality plans, specifically two Economy Stretch Outcomes in the LOIP:</p> <ol style="list-style-type: none"> 1. Support 400 unemployed Aberdeen City residents into sustained, Fair Work* by 2026 2. Upskill/reskill 500 Aberdeen City residents to enable them to move into, within and between economic opportunities as they arise by 2026. 	1.1, 3.1, 3.2
People (Children and Young People) People (Adults)	<p><u>Integrated Children's Services (now Children's Services Board)</u>: ensures the effective delivery of services for children and young people at all stages of their development and growth. all key agencies that deliver services for children and young people in Aberdeen City are represented, working together to deliver the City's Children's services plan and using the Scottish Government's 'Getting It Right for Every Child' as a common approach to deliver better outcomes for children and to measure success.</p> <p>The College participates in a number of associated work streams:</p> <ul style="list-style-type: none"> • The Attainment and Progression to Adulthood Group • Child Friendly Cities Group • Target Operating Model Sub Group • ACC Care Experienced Champions Board. 	
Place	<p>The College is a partner of CPA working with partners on locality planning, community empowerment, and improving outcomes for the population of Aberdeen City, especially those who experience poorer outcomes as a result of socio-economic disadvantage. The work of the CPA sees the College contributing to initiatives for priority and at risk neighbourhoods, and priority communities of interest e.g. children and young people, people with disabilities.</p>	

As part of the review of the refreshed LOIP and the development of the strategic plan, NESCol has ensured that membership is aligned to the CPA structure, where it is relevant.

Recommendations for Action

It is recommended that members of the CPA Management Group:

- i) note the NESCol Strategic Plan for 2021-2023, and the alignment to the refreshed LOIP 2016-26, for submission to the CPA Board on 30 November 2021.

Opportunities and Risks

NESCol, in developing the Strategic Plan 2021-2023, has identified the opportunities for partnership working and has aligned its strategic priorities to the refreshed LOIP. The plan is submitted to raise awareness, and show where alignment to the LOIP is in place. NESCol seeks the opportunity to strengthen existing partnerships and develop new ones.

Consultation

The plan was approved by the NESCol Regional Board in June 2021. A wide consultation took place and all planning partners were invited to contribute.

Background Papers

Refreshed LOIP:

<https://communityplanningaberdeen.org.uk/wp-content/uploads/2021/07/Final-LOIP-2016-26-Refreshed-July-21.pdf>

Contact details:

Name	Robert Laird
Title	Head of Planning and Academic Partnerships
Email Address	r.laird@nescol.ac.uk

This page is intentionally left blank



Community Planning Aberdeen

Progress Report	CPA Improvement Programme Quarterly Update and Appendices
Lead Officer	Gale Beattie, Chair of CPA Management Group and Aberdeen City Council Director of Commissioning
Report Author	Allison Swanson, Improvement Programme Manager
Date of Report	5 October 2021
Governance Group	CPA Management Group – 27 October 2021

Purpose of the Report
This report provides an update on the progress towards the Stretch Outcomes and improvement projects within the Local Outcome Improvement Plan 2016-26 which have started, or are due to start, to deliver the Partnership's 15 Stretch Outcomes by 2026 on the basis of the Improvement Programme 21-23 approved by the Board on 15 September 2021. This report also includes new charters for approval for project initiation.

Summary of Key Information
<p>BACKGROUND</p> <p>1.1 The refreshed Aberdeen City Local Outcome Improvement Plan (LOIP) was approved by Community Planning Aberdeen Board on 7 July 2021. Within the refreshed LOIP there remains 15 stretch outcomes to be delivered by 2026 and 75 shorter term improvement projects.</p> <p>1.2 The CPA Improvement Programme 2021-23 was approved by the Board on 15 September 2021 and set out the timescales for both initiation of the new aims within the refreshed LOIP, as well as the timescales for the continuing project charters being reviewed, over the next two years up until 2023. Of the 75 improvement aims within the refreshed LOIP 2016-2026, 40¹ projects are already initiated and therefore are classed as continuing, whilst 34 are new projects. This report provides an overview of progress to date and also shows the connections with the community ideas for improvement as contained in the Locality Plans approved by the CPA Board on 7 July 2021.</p> <p>1.3 The Community Planning Aberdeen Outcome Management and Improvement Framework sets out how CPA ensures effective, systematic and collaborative scrutiny of progress towards the achievement of outcomes within the LOIP. The Board on 15 September approved new outcome reporting interfaces to ensure that the various audiences are being provided with the detail to meet their requirements; and also providing the conditions to support the achievement of the project aims within the two year timeframe of the Improvement Programme, and ensuring that the connection with the community ideas for improvement in the Locality Plan are made and progress reported on. These arrangements include quarterly reporting to the CPA Board on progress made in taking forward the LOIP improvement projects.</p>

¹ * No. of projects takes account of LOIP project aims which are being managed as one project and therefore have one charter.

CPA IMPROVEMENT PROGRAMME 2021-2023 – OVERVIEW OF PROGRESS TO DATE

- 2.1 Appendix 1 to the report, provides a high level overview of progress across all 15 Stretch Outcomes, as well as a spotlight on each Stretch Outcome, and the underpinning improvement projects.
- 2.2 The Chairs of the respective Outcome Improvement Groups will speak to their Stretch Outcome dashboards highlighting progress; key achievements and outcomes achieved by the projects for their Stretch Outcomes over the reporting period, as well as any risks and/or issues being experienced and for the CPA Management Group and Board to take appropriate action to address any barriers to progress at the earliest opportunity.
- 2.3 The overview provides a performance trend against progress towards the overall Stretch Outcome and individual aim(s) on the basis of declining, improving, steady. Where no data or only baseline data is available this has been highlighted. The key for the performance trend is:

Performance Aim Trend	
	Improving
	Steady
	Declining
	Baseline only
	No data

- 2.4 The overviews also include a ragging status to ensure that both Outcome Improvement Groups and Project Teams are reflecting on whether the project is **on track**, **off schedule**, or **off track** and highlighting any issues/risks and proposed mitigation.

Continuing Improvement Projects/ Project Updates

- 2.5 For those 40 projects which are continuing projects, it was agreed that it was important that these projects are continuing to progress at pace, but that they also require to take the time to review their charters to make sure connections are made with the community ideas for improvement in the Locality Plans, with the revised project charters being considered and approved by the respective Outcome Improvement Groups Group as per the timescales in the Improvement Programme. This process is ongoing with 50% of revised charters now approved. On the basis of the Improvement Programme, all of the continuing projects are scheduled to be reviewed by December 2021.
- 2.6 From the Stretch Outcome dashboard, the Management Group can access the project update reports for projects which have had their charter approved for initiation of testing. Projects updates are a short summary of progress towards achieving the overall project aim, including details of what changes are being tested; within which locality and how it aligns to the Locality Plans and the improvement data which demonstrates whether the changes are making a difference.
- 2.7 The report is designed to focus on the outcomes of the project, rather than a general update on activity. Project team's self evaluate their progress using the Progress Scale below. All projects that have been approved by the CPA Board will be at a minimum of stage four.

Project Progress Scale	
1	Project area identified and agreed
2	Draft Outline Project Charter and team in place
3	Understanding baseline of current system
4	Project Charter endorsed by CPA Board
5	Change ideas and project measures developed
6	Testing underway
7	Initial indications of improvement
8	Improvements achieved
9	Sustainable improvement
10	Project complete

2.8 Progress updates for live improvement projects can be accessed from both Appendix 1, but also on the [Improvement Project Dashboard](#) on the Community Planning Website. This information will also be used by Locality Empowerment Groups/Priority Neighbourhood Partnerships in respect of progress of their community ideas within the Locality Plans.

3 NEW PROJECT CHARTERS

3.1 This report includes 13 of the 16 project charters which are due to be submitted to the CPA Board, as per the CPA Improvement Programme 2021-23. See Appendix 2 for new project charters. Three of the new charters scheduled have been postponed as detailed at Appendix 1.

4 NEXT STEPS

4.1 Projects which have charters approved by the CPA Board will proceed to the designing and testing stage.

Recommendations for Action

It is recommended that the Management Group:

- i) consider the overview of progress against the CPA Improvement Programme, as well as the overview for each Stretch Outcome and respective improvement projects as contained at Appendix 1;
- ii) approve the new charters included at Appendix 2 for submission to the CPA Board on 30 November 2021;
- iii) approve the proposed rescheduling of the 3 new charters, as detailed at Appendix 1, which were due to be submitted to CPA Board in November 2021 but have been postponed; and
- iv) approve the proposed rescheduling of the 5 revised charters which were due to have been submitted to their respective Outcome Improvement Group but have been postponed, as detailed in Appendix 1.

Opportunities and Risks

Successful delivery of the revised Local Outcome Improvement Plan 2016-26 requires a robust programme management approach to the delivery of the 75 improvement projects and also requires clear process for alignment to the Locality Plans. The phased approach to the initiation of the projects in the LOIP to help ensure we are channelling our resources to those projects which are most likely to have the biggest impact. The clear governance arrangements for both continuing and new project charters also ensures that we have effective outcome management arrangements in place to deliver upon the aims in the LOIP in the timescale and supports projects to continue at pace.

Consultation

Michelle Cochlan, Community Planning Manager
CPA Outcome Improvement Groups
CPA Lead Contacts Group

Background Papers

[Refreshed Local Outcome Improvement Plan 2016- 26 and CPA Development Plan 2021-2022](#)

[Final Draft Integrated Locality Plans 2021-26 – North, South and Central](#)

Contact details:

Name	Allison Swanson
Title	Improvement Programme Manager
Email Address	aswanson@aberdeencity.gov.uk

CPA Improvement Programme 2021-2023

Overview of Progress to Date

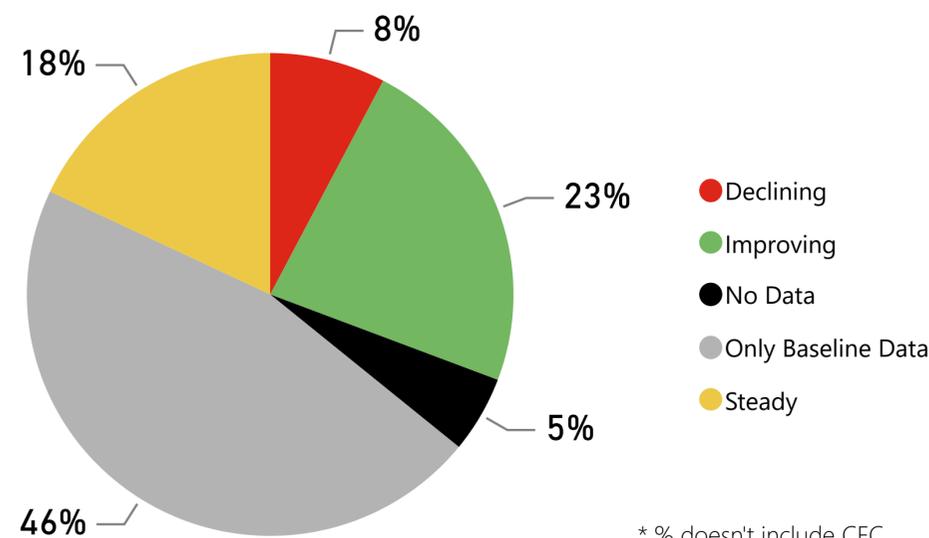
No. of LOIP Project Aims	No. of New Charters Due	No. of New Charters Received	No. of Projects now Live	% of Revised Charters Approved	No. of Revised Charters Postponed	Months Since LOIP Published
75	16	13	40	50	5	3

Overview of Progress by Outcome Improvement Group

OIG	No of. New Projects	No. of New Charters Due	No. of New Charters Submitted	No. of Continuing Projects	No. of Revised Charters Approved
Anti-Poverty	5	3	3	1	0
Aberdeen Prospers	4	1	1	5	3
Children's Services Board	16	7	5	10	6
Community Justice	3	3	2	5	4
Resilient, Included & Supported	4	2	2	4	1
Alcohol and Drugs Partnership	1	0	0	8	1
Sustainable City	1	0	0	7	5
Total	34	16	13	40	20

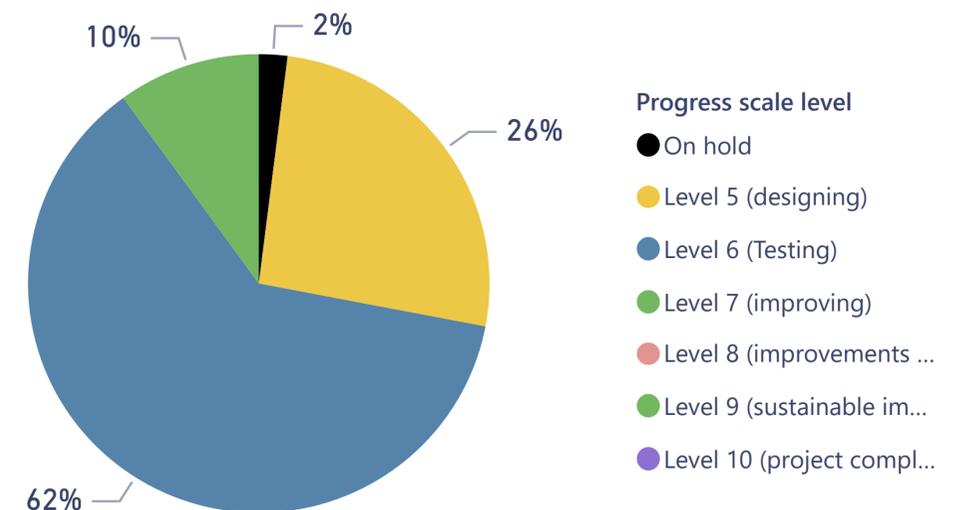
* No. of project charters due & continuing projects takes account of LOIP project aims which are being managed as one project and therefore have one charter.

Percentage of Live Projects by Aim Trend



* % doesn't include CFC project

Percentage of Live Projects by Progress Scale



* % doesn't include CFC project

Stretch Outcomes 1-9: Current Status

Overall Rag Key



On track



Off track



Off schedule

SO	Stretch Outcome	SO Trend	No of. LOIP projects	No. of Live projects	% of New Charters Due Submitted	% of Revised Charters Approved	Overall RAG	Summary and reason for Overall Status
1	No one will suffer due to poverty by 2026.	→	6	1	100	0	●	3 new charters due submitted for approval. Data showing improvement in single live project. Revised charter on schedule for Dec 21 & 2 remaining new charters on schedule for CPA Board in Feb 22.
2	400 unemployed Aberdeen City residents supported into Fair Work by 2026.	●	4	1	100	100	●	New project charter due submitted and single live project charter revised. Data showing improvement in single live project. Remaining new charters on schedule.
3	500 Aberdeen City residents upskilled/ reskilled to enable them to move into, within and between economic opportunities as they arise by 2026	●	5	4	N/A	50	●	2 of the 4 live project charters have been revised. 1 revised charter postponed to enable new PM time to review change ideas and the other on schedule for Nov 21.
4	95% of children (0-5 years) will reach their expected developmental milestones by the time of their child health reviews by 2026.	→	4	2	N/A	50	●	1 revised charter approved and the revised charter for other live project on schedule to report in Dec 21. 2 new charters on schedule for CPA Board in Feb 22.
5	90% of Children and young people will report that their experiences of mental health and wellbeing have been listened to by 2026.	●	6	0	67	N/A	●	2 of the 3 new charters scheduled have been submitted. 1 has been postponed and the 3 other new charters on schedule to report to CPA Board in Feb 22.
6	As corporate parents we will ensure 95% of care experienced children and young people will have the same levels of attainment in education, health and emotional wellbeing, and positive destinations as their peers by 2026.	→	3	2	N/A	50	●	1 of the revised charters has been approved and 1 postponed. The two kinship project aims are to be taken forward together as one project and revised charter will be submitted in Dec 21. New charter on schedule for CPA Board in Feb 22.
7	95% of children living in our priority localities will sustain a positive destination upon leaving school by 2026.	→	3	1	100	100	●	Revised charter approved, and new charter due also submitted. Final new charter on schedule for CPA Board in Apr 22.
8	Child friendly city where all decisions which impact on children and young people are informed by them as rights holders by 2026.	●	4	1	67	N/A	●	2 of the 3 new charters due submitted. 1 postponed to Feb 22.
9	30% fewer young people (under 18) charged with an offence by 2026.	→	6	4	N/A	75	●	Revised charters approved for 3 of the 4 live projects, 1 approved ahead of schedule and the other on schedule for submission in Dec 21. 2 new charters on schedule for CPA Board in Feb 22.

Page 25

Trend Key: Improving Declining Steady Baseline data only No data

Stretch Outcomes 10-15: Current Status

Overall Rag Key



On track



Off track



Off Schedule

SO	Stretch Outcome	SO Trend	No of. LOIP projects	No. of Live projects	% of New Charters Due Submitted	% of Revised Charters Approved	Overall RAG	Summary and reason for Overall Status
10	25% fewer people receiving a first ever Court conviction and 2% fewer people reconvicted within one year by 2026 and	↑	8	5	67	80	●	2 of the 3 new charters due have been submitted, with 1 postponed due to vacancies. 4 out of 5 of the revised charters have been approved, 1 postponed.
	2% fewer people reconvicted within one year by 2026	↓						
11	Healthy life expectancy (time lived in good health) is five years longer by 2026.	↓	8	4	100	25	●	Both of the new charters due submitted. 1 revised charter approved with 1 postponed & others on schedule.
12	Rate of harmful levels of alcohol consumption reduced by 4% and drug related deaths lower than Scotland by 2026 and	↑	9	8	N/A	13	●	3 of the live projects are transferring to a new PM and 1 is on hold awaiting a new PM to take up post. 1 revised charter approved, 1 postponed and others on schedule. Remaining new charter to be reported in April 22.
	Drug related deaths lower than Scotland	↓						
13	Addressing climate change by reducing Aberdeen's carbon emissions by at least 61% by 2026 and adapting to the impacts of our changing climate	↑	3	3	N/A	100	●	All revised charters approved.
14	38% of people walking and 5% of people cycling as main mode of travel by 2026.	→	2	2	N/A	50	●	1 revised charter approved & other on schedule.
15	Addressing the nature crisis by protecting/ managing 26% of Aberdeen's area for nature by 2026	●	3	2	N/A	50	●	1 of the revised charters approved and the other, along with the new charter on schedule.

Page 29

Trend Key: ↑ On track ↓ Off track → Steady ● Baseline data only ● No data

Stretch Outcome 1: No one will suffer due to poverty by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
→	6	1	3	3	0	0	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
1.1	<u>Increase the number of people using community pantries by 20% by 2023.</u>	↑	Dec 21	7	N, S & C	●	Change ideas updated to respond to Covid-19 restrictions & support people move from emergency parcels to pantry members; new test re remote pantry started. Data showing an increase in no. of pantry shops and membership of 2 out of the 3 pantries.
1.2	Reduce by 50% the number of homes with an EPC rating of F&G by 2023, leading to 100% by 2026.	●	Nov 21	3	S	●	PM & Team in place, charter submitted for approval. On agenda.
1.3	Ensure 100% of people presenting as homeless have a full financial assessment and access to all appropriate benefits by 2023.	●	Nov 21	3	None	●	PM & Team in place, charter submitted for approval. On agenda.
1.4	Increase support for those who have been most disadvantaged through the pandemic by 2023.	●	Nov 21	3	N & S	●	PM & Team in place, charter submitted for approval. On agenda.
	Decrease the number of households in extreme fuel poverty in Aberdeen by 4% by 2023; and reduce the rate of socially rented households in fuel poverty in Aberdeen by 8% by 2023.	●	Feb 22	3	N, S & C	●	PM in place, team being established & charter on schedule for Feb 22 Board.
	Increase the uptake of unclaimed benefits across Aberdeen City by 2023.	●	Feb 22	3	N, S & C	●	PM in place (bootcamp to be completed), team being established & charter on schedule for Feb 22 Board.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Pantries - Mobile pantry was launched in Sept 21 and has 25 beneficiaries signed up. There has been a 32% increase in no. of pantry shops already this year compared to 2020. CFINE pantry has 307 members, an increase of 64 since April 21. The impact of the pantries can also be seen from the Pantry members testimonials 2021
<https://communityplanningaberdeen.org.uk/wp-content/uploads/2021/09/Pantry-members-testimonials-2021.pdf>

Key Issues/Risks

No Key issues/Risks for this period

Stretch Outcome 2: 400 unemployed Aberdeen City residents supported into Fair Work by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
	4	1	1	1	100	0	

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
2.1	Increase employer sign up to the <u>Real Living Wage by 5% year on year to 2023 to achieve Real Living Wage City Status by 2026.</u>		Oct 21	6	N, S & C		Revised charter submitted approved. Aim of 5% increase year on year achieved for 2021 with data showing 8% increase so far with 52 employers paying living wage since project started
2.2	Supporting 50 people to start a business in Aberdeen who will be coming off the benefits system or significantly reducing their benefits through starting a business by 2023 and 100 by 2026.		Nov 21	3	N, S & C		PM & Team in place, charter submitted for approval. On agenda.
	Support 15 care experienced young people progress to employment through public sector funded employability programmes by 2023.		Feb 22	2	N		PM in place, team being established & charter on schedule.
	Support 50 people into sustained, good quality employment by 2023, and 100 by 2026, with a particular focus on; those from priority neighbourhoods and people over 50.		Feb 22	2	N, S & C		PM in place, team being established & charter on schedule.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Real living wage - 52 employers in the City are now Real Living Wage accredited, with an increase in numbers seen despite the pandemic and an 18% increase since the project started and an 8% increase since 2020.

Key Issues/Risks

No Key issues/Risks for this period

Stretch Outcome 3: 500 Aberdeen City residents upskilled/reskilled to enable them to move into, within and between economic opportunities as they arise by 2026

Overall Progress

SO Trend	No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
●	5	4	0	0	50	1	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
3.1	<u>Increase the number of responsible businesses working with Community Planning Aberdeen through Community Benefits and CSR activity by 200% by 2023</u>	●	Oct 21	6	N, S & C	●	Revised charter approved. Revised aim approved by Board to incorporate the wider ambition to increase the contribution of Aberdeen Responsible Businesses. Change ideas updated to reflect and mini conference scheduled for Nov 21.
3.2	<u>By December 2022, increase by 10% the number of people in Aberdeen who: • Have digital access; and • Feel comfortable using digital tools.</u>	●	Nov 21	6	N, S & C	●	Revised charter on schedule to be submitted in Nov 21.
3.3	<u>Increase the number of people within Aberdeen City qualified with ICT and Digital skills at SCQF Levels 7 and above by 10% by 2023</u>	➔	Oct 21 Postponed to Nov 21	5	None	●	Submission of revised charter deferred to Nov 21. New PM in July 21 and handover in place. PM now reviewing team & change ideas.
3.4	<u>Increase the number of Modern and Graduate Apprenticeships by 5% by 2022.</u>	●	Oct 21	5	N & C	●	Revised charter approved. Project getting ready to commence testing.
	80% of young people will successfully complete their Modern Apprenticeship programme by 2022.	●	Feb 22	2	N & S	●	PM in place (bootcamp to be completed), team being established & charter on schedule for Feb 22 Board.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Community Benefits - Contractor to the Riverbank Replacement School appointed & the community suggestions incorporated into the community benefits project plan are now being realised and delivered

Key Issues/Risks

No Key issues/Risks for this period

Stretch Outcome 4: 95% of children (0-5 years) will reach their expected developmental milestones by the time of their child health reviews by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
➔	4	2	0	0	50	0	●

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
4.1	<u>Reduce the number of births affected by drugs by 0.6% by 2022.</u>	↑	Dec 21	5	None	●	Charter revision underway and on track for December.
4.2	<u>Reduce the number of repeat emergency hospital admissions for unintentional injury to children under 5 years by 5% by 2023</u>	●	Oct 21	5	None	●	Revised charter approved by Children's Services Board.
	Increase uptake of parenting and family support by 10% by 2022.	●	Feb 22	2	S & C	●	Project Manager in place.
	Reduce the number of children starting P1 with an identified speech delay by 5% by 2023.	●	Feb 22	2	None	●	Project Manager in place.

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 5: 90% of children and young people will report that their experiences of mental health and wellbeing have been listened to by 2026. This is reflected in interactions, activities, supports and services.

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
	6	0	3	2	N/A	N/A	

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
5.1	Increase to 80%, the number of staff who feel confident about how to directly support, or refer a child for support, and signpost to appropriate services by 2022.		Nov 21	3	N, S & C		Charter developed and submitted for approval. On agenda.
5.2	Increase by 80% the use of digital wellbeing resources for children and young people's mental health and wellbeing by 2022.		Nov 21	3	N & C		Charter developed and submitted for approval. On agenda.
	Increase by 40% the use of the wellbeing scenario on the Mind of my Own app by care experienced children and young people by 2022.		Nov 21 Postponed to 2022	3	None		Project initiation delayed due to maternity leave.
	100% of schools offer sustainable and equitable access to counselling for those children aged 10 and above who require it by 2022.		Feb 22	2	None		Project Manager in place.
	The number of children and young people with an eating disorder who are identified within 3 months of onset is increased by 50% by 2023.		Feb 22	2	None		Project Manager in place
	100% of children and young people have free access to physical activity which improves mental health and wellbeing by 2022.		Feb 22	2	N, S & C		Project Manager in place

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 6: As corporate parents we will ensure 95% of care experienced children and young people will have the same levels of attainment in education, health and emotional wellbeing, and positive destinations as their peers by 2026.

Overall Progress

SO Trend	No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
➔	3	2	0	0	50	1	●

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
6.1	Increase the number of care experienced young people accessing a positive and sustained destination by 25% by 2022	↑	Oct 21	7	S	●	Revised charter approved by Children's Services Board.
6.2	Increase to 43% by 2023 the proportion of children and young people who are supported to live in kinship care or are looked after at home by 2023 and increase by 20% the number of children and young people remaining in a placement looked after at home/kinship between 16-18 years old by 2023.	↑	Oct 21 Postponed to Dec 21	6	None	●	Revised charter postponed to December to allow project team to regroup.
	Increase the number of care experienced young people by 10% receiving multiagency throughcare/aftercare support by 2023.	●	Feb 22	2	None	●	Project Manager in place

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 7: 95% of all our children, including those living in our priority neighbourhoods, will sustain a positive destination upon leaving school by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
➔	3	1	1	1	100	0	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
7.1	Increase the number of accredited courses directly associated with growth areas by 7% by 2023.	●	Oct 21	6	S	●	Revised charter approved by Children's Services Board.
7.2	Increase the number of vulnerable learners entering a positive and sustained destination by 7% by 2023.	●	Nov 21	3	N & S	●	Charter developed and submitted for approval. On agenda.
	Increase the number of young people who leave school with a minimum of SVQ 3 in literacy and numeracy and 4 other qualifications to 93% 2023.	●	Apr 22	2	None	●	Project Manager in place

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 8: Child friendly city where all decisions which impact on children and young people are informed by them by 2026

Overall Progress

SO Trend	No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
	4	1	3	2	N/A	N/A	

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
8.1	Achieve UNICEF badges in: - Leadership - Culture - Communication - Place - Child Friendly Services - Participating		N/A		S		Progress ongoing.
8.2	Increase to 100% of staff working directly and indirectly with children who have received child friendly city training by 2023.		Nov 21	3	None		Charter developed and submitted for approval. On agenda.
8.3	Increase by 50% the number of communications which are accessible to children and young people by 2023.		Nov 21	3	C		Charter developed and submitted for approval. On agenda.
	By 2023 increase to 100% the number of multiagency governance arrangements which impact on children on young people that include their participation and engagement.		Nov 21 Postponed to Feb 22	2	None		New charter postponed to next meeting

Page 37

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 9: 30% fewer young people (under 18) charged with an offence by 2026

Overall Progress

SO Trend	No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
→	6	4	0	0	75	0	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/Revised Project Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
9.1	Increase number of young people who need support in relation to trauma and bereavement having access to such support by 50% by 2023.	●	Dec 21	5	N	●	Charter revision underway and on track for December.
9.2	<u>Reduce by 10% both the number of offences of sexual or criminal exploitation and the number of 'digital' offences by Young People (Under 18) by 2022.</u>	●	Oct 21	5	None	●	Revised charter approved by Children's Services Board.
9.3	<u>Increase by 10% the number of young people (16-17 year olds) who are jointly reported to SCRA and COPFS who are offered robust alternatives to entering the statutory system by 2022.</u>	→	01/10/2021	6	None	●	Revised charter approved by Children's Services Board.
9.4	<u>Reduce instances of public space youth anti-social behaviour as a result of appropriate and effective interventions in targeted areas by 10% by 2022.</u>	↑	Dec 21	7	N, S & C	●	Revised charter approved by Children's Services Board.
	Increase by 50% the number of 10 to 16 year olds in target areas of the city who access youth community activity by 2023.	●	Feb 22	2	N, S & C	●	Project Manager in place
	Reduce by 5% the number of 16/17 year olds with higher support needs offending by 2022.	●	Feb 22	2	None	●	Project Manager in place

Key Outcomes/Activity

Highlights/Key Outcomes for this period

Key Issues/Risks

No Key Issues/Risks

Stretch Outcome 10: 25% fewer people receiving a first Court conviction and 2% fewer people reconvicted within one year by 2026

Overall Progress

No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
8	5	3	2	80	1	

Project Aim Status

Live Project Ref.	Project Aim	Aim Trend	New/Revised Project Charter Due	Progress Scale	Locality Link	Progress RAG	Summary and Reason for RAG
10.1	<u>Increase by 10% those individuals, aged 21+ and not subject to statutory throughcare arrangements, who access support services upon release from HMP Grampian by 2022.</u>		Aug 21	7	None		Revised charter approved and data for aim and change ideas showing improvement.
10.2	<u>Increase to 30 in total, the no. who are on a custodial sentence, CPO with a Supervision Requirement, on Unpaid Work Orders, on Remand or who have been Diverted from Prosecution who are being supported to make progress on the Employability Pipeline by 2022.</u>		Oct 21	6	N		Revised charter approved & 63% of aim achieved with 19 individuals supported. Positive links with North Locality made.
10.3	<u>Reduce the number of wilful fires by 10% by 2022</u>		Aug 21	5	None		Revised charter approved. New Project Manager to commence due to secondment.
10.4	100% increase in hate crimes reported to police by 2023.		Oct 21 Postponed to Dec 21	5	C		Revised charter postponed to Dec 21. PM supporting resettlement of families from Afghanistan.
10.5	<u>Decrease the number of incidents of domestic abuse reported to the Police by 15% by 2023.</u>		Oct 21	6	N		Revised charter approved. First test re Safe & Together model to commence in Oct.
10.6	Increase by 15% victims of domestic abuse receiving support by 2022.		Nov 21	3	C		PM & Team in place, charter submitted for approval. On agenda.
10.7	Increase by 10% the number of clients who access assessment/support/treatment/services in relation to mental health issues: - in Police custody - on a community disposal - in HMP Grampian by 2023.		Nov 21	3	None		PM & Team in place, charter submitted for approval. On agenda
	Reduce the number of drug related deaths occurring within 6 months of liberation from custody from 10 to zero by 2023.		Nov 21 Postponed to Feb 22	2	None		New Charter postponed to next meeting due to vacancies. Recruitment to be completed by Dec 21.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Support for People On Liberation. Change concepts are proving to be successful and results are starting to show improvements in both the overall aim and specific change ideas. Since Jan 21 the % of individuals who engage with support services on release from HMP Grampian has been great than the median except one month and we've seen 100 % of those accessing suitable accommodation on day of release. Since April 21, there has been a substantial increase in % of those accessing suitable accommodation on day of release, with 100% for July and Aug.
- Employability Pipeline - successful connection with the North Locality Plan ideas has led to new unpaid work placements with Auchmill Golf Course.

Key Issues/Risks

No Key Issues/Risks for this period

Stretch Outcome 11: Healthy life expectancy (time lived in good health) is five years longer by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
↓	8	4	2	2	25	1	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/ Revised Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
11.1	<u>Reduce the rolling 3-year average number of suicides in Aberdeen to below 26 (2019) by 2023.</u>	↓	Sep 21	6	N, S & C	●	Revised charter approved. Continuing change ideas being tested and new ideas being developed.
11.2	Increase opportunities for people to increase their contribution to communities (volunteering) by 10% by 2023.	●	Sep 21 Postponed to Oct 21	5	N & C	●	Revised charter deferred to Oct 21 to enable further discussion on change ideas to be undertaken.
11.3 Page 40	<u>Support 100 people to feel confident to promote wellbeing and good health choices by 2023.</u>	●	Oct 21	6	N, S & C	●	Revised charter on schedule to report in Oct 21. First change idea being tested from which improvement shown in knowledge and confidence of participants
11.4	<u>Reduce tobacco smoking by 5% overall by 2023</u>	↑	Oct 21	6	N & C	●	Charter being revised and existing change ideas being tested with data from the first tests showing improvement.
11.5	Reduce youth homelessness by 6% by 2023.	●	Nov 21	3	None	●	PM & Team in place, charter submitted for approval. On agenda.
11.6	Increase the number of unpaid carers feeling supported by 10% by 2023.	●	Nov 21	3	N & S	●	PM & Team in place, charter submitted for approval. On agenda.
	To support 50 low income families in priority neighbourhood to improve eating behaviours and adopt positive lifestyle choices to help towards a healthy weight by 2023.	●	Feb 22	2	N, S & C	●	PM and Project Team in place & charter being developed
	Refer 20% of people living with COPD or other respiratory conditions into specific PR physical activity and other support programmes delivered in community settings by 2023.	●	Feb 22	2	N & C	●	PM still to be identified

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Reduce Smoking - Smoking "wakelet" launched during NESCOL's student health & wellbeing week. An online module for staff/volunteers tested with Homestart and an information held with parents, both of which showed positive results with staff/volunteer confidence rating to talk about smoking to service users increasing and 37% of parents attending reporting increased knowledge about accessing smoking cessation sessions.
- Good Health Choices - 3 sessions delivered on money matters and mental health first aid in Woodside, with participants knowledge increasing.

Key Issues/Risks

Key Issues/Risks for this period

No Project Manager identified for COPD project aim.

Stretch Outcome 12: Rate of harmful levels of alcohol consumption reduced by 4% and drug related deaths lower than Scotland by 2026

Overall Progress

No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
9	8	0	0	13	1	

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/ Revised Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
12.1	<u>100% of vulnerable young people, who are at-risk of developing problem substance use, have access to evidence-based Prevention & Early Intervention (including Universal, Selective & Indicated Prevention support) by 2023.</u>		Sep 21	6	None		Revised charter postponed to ADP in Oct 21. Project actively testing & showing improvement in the delivery of a service targeting young people with increasing vulnerability, prior to need for formal statutory intervention.
12.2	To decrease the number of 13 and 15 year olds who have reported using substances in Aberdeen to below the national average by 2023, through curriculum delivery and a whole population approach.		TBC		None		Replacement PM to come into post. Start date awaited. On hold.
12.3	<u>Increase % of the population who feel informed about using alcohol responsibly and Increase by 10% the percentage of adults in Aberdeen City who are non drinkers or drink alcohol in a low risk way by 2023.</u>		Nov 21	5	N		New PM in place and transfer of project underway and revised charter on schedule ADP in November 21. Existing changes being reviewed.
12.4	<u>Increase the number of alcohol brief interventions delivered by Primary Care providers and other professionals to above levels achieved in 17/18 by 2023</u>		Nov 21	6	None		New PM in place and transfer of project underway and revised charter on schedule ADP in November 21. Existing changes being reviewed. Data will not be provided by primary care for Q4 19/20 or the entire 20/21 financial year. No ABI data has been received since Q2 20/21.
12.5	<u>Increase the uptake of alcohol treatment by improving access to alcohol services and ensuring they are local, integrated and targets areas of greatest need by 10% year on year by 2023.</u>		Dec 21	6	N & C		New PM in place and transfer of project underway and revised charter on schedule ADP in December 21. Existing changes being reviewed.
12.6	<u>Reduce the incidence of fatal drug overdose through innovative developments and by</u>		Sep 21	6	S		Revised charter approved by ADP in Sept 21.
12.6	by increasing the distribution of naloxone by 10% year on year by 2022.						
12.7	<u>Increase opportunities for individuals who have been at risk of Blood Borne Viruses, being tested and accessing treatment by 2023.</u>		Oct 21	6	C		Revised charter on schedule for ADP in Oct 21, changes being tested.
12.8	<u>Increase uptake of drug treatment and specifically within Locality Areas by 10% each year by 2023.</u>		Dec 21	6	N & C		Revised charter due to be submitted to ADP in Dec 21. Changes being tested.
	Increase the number of people undertaking recovery from drug and alcohol issues who are being supported to maintain drug / alcohol free lives in their community by 2023.		Apr 22	2	N & C		PM in place and on schedule for reporting in April 22

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Support for Vulnerable Young People at Risk of Substance Misuse – data showing improvement in the delivery of a service targeting young people with increasing vulnerability, prior to need for formal statutory intervention, where they had previously been no such provision exclusively for this level of (Selective-Indicated) prevention.

Key Issues/Risks

- Capacity within ADP to progress on projects due to ongoing vacancy. Recruitment to be completed by Dec 21 and a new PM is in place for 3 projects.
- Provision of ABI data

Stretch Outcome 13: Addressing climate change by reducing Aberdeen's carbon emissions by at least 61% by 2026 and adapting to the impacts of our changing climate

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of revised charter approved	Overall RAG
↑	3	3	0	0	100	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/ Revised Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
13.1	<u>Reduce public sector carbon emissions by at least 7% by 2023.</u>	●	Sep 21	6	None	●	Revised charter approved. Project actively testing with Green Champions and data on tests showing improvement.
13.2	<u>Reduce the generation of waste in Aberdeen by 8% by 2023.</u>	●	Sep 21	6	C	●	Revised charter approved and project actively testing. Data from April 21 showing a monthly increase in no. of reusable menstrual product libraries
13.3	<u>Community led resilience plans in place for areas most vulnerable to flooding by 2023, leading to resilience plans in place across all areas of Aberdeen by 2026.</u>	●	Sep 21	6	N & C	●	Revised charter approved. Project testing and held session as part of come and network week.

Page 42

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Reducing Public Sector Emissions - Data since Feb shows a monthly increase in the Emissions saved by Green Champions tCO2e . There are now 37 Green Champs in ACC. See the visual outcome of tests 3 & 4 at https://communityplanningaberdeen.org.uk/wp-content/uploads/2021/10/Carbon-Reduction-Summary-Test-3_4.pdf
- Reducing Waste – Since April 21, 16 product libraries are now located across the city and are open for the public to collect Reusable menstrual products.

Key Issues/Risks

No Key Issues/Risks for this period

Stretch Outcome 14: Increase sustainable travel: 38% of people walking and 5% of people cycling as main mode of travel by 2026

Overall Progress

SO Trend	No of. LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
→	2	2	0	0	50	0	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/ Revised Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
14.1	Increase % of people who walk as one mode of travel by 10% by 2023.	●	Sep 21	6	N & C	●	Revised charter approved and connections with communities made.
14.2	Increase % of people who cycle as one mode of travel by 2% by 2023.	●	Oct 21	6	N, S & C	●	Project continuing to test & revised charter on schedule.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Cycling - 'Light for Dark Nights initiative' launched to educate cyclists on road safety and being visible and giving out bike lights where appropriate.
- Walking – Connections made with community connectors in the North and Central Localities. In North, highlighting the existing health walk and encourage people to take part, with the Community Connector putting an article in the local Middlefield Mirror. In Central, locations for benches to support and encourage more people to walk to their medical appointments have been identified and provision of benches now being investigated. In the South, new health walk at with RGU for staff and students developed and launched.

Key Issues/Risks

No Key Issues/Risks for this period

Stretch Outcome 15: Addressing the nature crisis by protecting/managing 26% of Aberdeen's area for nature by 2026

Overall Progress

SO Trend	No. of LOIP projects	No. of Live projects	No. of New Charters Due	No. of New Charters Received	% of Revised Charters Approved	No. of Revised Charters Postponed	Overall RAG
▼	3	2	0	0	50	0	●

Project Aim Status

Live Project Ref.	Project Aim	Project Aim Trend	New/ Revised Charter Due	Current progress scale	Locality Link	Project Progress RAG	Summary and Reason for RAG
15.1	<u>Increase the number of community run green spaces by a minimum of 8 that are organised and self-managed for both people and nature by 2023.</u>	➔	Sep 21	6	N, S & C	●	Revised charter approved & testing ongoing.
15.2	<u>Increase community food growing in schools, communities and workplaces by 12 2023.</u>	➔	Oct 21	6	N, S & C	●	Project continuing to test & revised charter on schedule.
	At least 23 organisations across all sectors in Aberdeen pledging to manage at least 10% of their land for nature by 2023 (23BY23) and at least 26% by 2026 (26BY26).	●	Feb 22	2	S	●	Project Manager and Team in place, charter being developed.

Key Outcomes/Activity

Highlights/Key Outcomes for this period

- Community led Green Spaces - Number of new community led green space projects and initiatives has increased. Keep Scotland Beautiful has highlighted that Aberdeen continues to lead the way in terms of community groups and volunteers linked to green spaces. Their Its Your Neighbourhood campaign has seen Aberdeen register more local groups than any other Scottish local authority.

Key Issues/Risks

No Key Issues/Risks for this period

Improvement Project Key

Overall Rag Key

- On track
- Off Track
- Off Schedule

Trend Key:

- ↑ Improving
- ↓ Declining
- Steady
- Baseline data only
- No data

Project Progress Scale
▲

	Description
1	Project area identified and agreed
2	Draft Outline Project Charter and team in place
3	Understanding baseline of current system
4	Project Charter endorsed by CPA Board
5	Change ideas and project measures developed
6	Testing underway
7	Initial indications of improvement
8	Improvements achieved
9	Sustainable improvement
10	Project complete

This page is intentionally left blank

Appendix 2 - List of New Charters for Consideration

Project Ref	Project Aim	Charter Status	OIG Chair
Economy Project Charters			
1.2	Reduce by 50% the number of homes with an EPC rating of F&G by 2023, leading to 100% by 2026.	Ready	Derek McGowan (ACC)
1.3	Ensure 100% of people presenting as homeless have a full financial assessment and access to all appropriate benefits by 2023.	Ready	Derek McGowan (ACC)
1.4	Increase support for those who have been most disadvantaged through the pandemic by 2023.	Ready	Derek McGowan (ACC)
2.2	Supporting 50 people to start a business in Aberdeen who will be coming off the benefits system or significantly reducing their benefits through starting a business by 2023 and 100 by 2026.	Ready	Allison Carrington (SDS)
People (Children & Young People) Project Charters			
5.1	Increase to 80%, the number of staff who feel confident about how to directly support, or refer a child for support, and signpost to appropriate services by 2022.	Ready	Graeme Simpson (ACC)
5.2	Increase by 80% the use of digital wellbeing resources for children and young people's mental health and wellbeing by 2022.	Ready	Graeme Simpson (ACC)
7.2	Increase the number of vulnerable learners entering a positive and sustained destination by 7% by 2023.	Ready	Graeme Simpson (ACC)
8.2	Increase to 100% of staff working directly and indirectly with children who have received child friendly city training by 2023.	Ready	Graeme Simpson (ACC)
8.3	Increase by 50% the number of communications which are accessible to children and young people by 2023.	Ready	Graeme Simpson (ACC)
People (Vulnerable Adults) Project Charters			
10.6	Increase by 15% victims of domestic abuse receiving support by 2022.	Ready	Derek McGowan (ACC)
10.7	Increase by 10% the number of clients who access assessment/support/treatment/services in relation to mental health issues.	Ready	Derek McGowan (ACC)
11.5	Reduce youth homelessness by 6% by 2023.	Ready	Sandra MacLeod (HSCP)
11.6	Increase the number of unpaid carers feeling supported by 10% by 2023.	Ready	Sandra MacLeod (HSCP)

This page is intentionally left blank

1.2 Energy Performance in Housing (2021)

CPA CHARTER FEEDBACK FORM	
Project Aim:	Reduce by 50% the number of homes with an EPC rating of F&G by 2023, leading to 100% by 2026.
Project Manager	Mel Booth, ACC
	Training undertaken: Virtual MFI Bootcamp
Reviewed by:	Allison Swanson
Date:	01/10/2021
Checklist	Summary of feedback
1. Is the project aim consistent with aim in the LOIP?	Yes The aim aligns with the LOIP aim.
2. Is there a sound business case explaining why the project is important?	Yes There is evidence of why it is important, but data on the no. of people applying of grants locally would be beneficial to show what the issues with the current system are.
3. Have connections to Locality Plans been made and reflected?	Yes Connections have been made. Presentation to LEG held and focus group now being arranged.
4. Is it likely that the changes being tested will achieve the aim?	Yes It is likely that the mix of change ideas from direct contact to promotional campaigns will support achievement of the aim.
5. Will the measures demonstrate whether a change is an improvement?	Yes Measures are likely to show improvement for the awareness change ideas. Have added some suggestions for your consideration. Measures for any further change ideas will need to be added.
6. Is a location/Test Group identified?	Yes
7. Have additional resources needed to implement the change ideas been considered?	Yes All ideas can be funded by existing resources.
8. Is there a mix of partners involved in this project?	Yes There is a good mix of partners.
9. Clear outline project plan?	Yes
CPA Management Group/ Board Ready? Yes	

<p>Improvement Project Title Energy performance in housing</p>
<p>Executive Sponsor Derek McGowan – Chair of Anti-Poverty Group and Chief Officer – Early Intervention and Customer Empowerment</p>
<p>Project Lead Name: Mel Booth, Senior Housing Strategy Officer, ACC Email Address: mebooth@aberdeencity.gov.uk</p>
<p>Aim statement Reduce by 50% the number of homes with an Energy Performance Certificate (EPC) rating of F&G by 2023, leading to 100% by 2026.</p>
<p>Link to Local Outcome Improvement Plan Stretch Outcome 1 – No-one will suffer due to poverty by 2026. Links with LOIP Improvement Project - Decrease the number of households in extreme fuel poverty in Aberdeen by 4% by 2023; and reduce the rate of socially rented households in fuel poverty in Aberdeen by 8% by 2023.</p>
<p>Link to Locality Plans There are community ideas for improvement aligned to this project from the South Locality Plan - promote relevant grants to householders.</p>
<p>Why this is important and issues with the current system?</p> <ul style="list-style-type: none"> • The Scottish Government’s consultation on Scotland's energy efficiency programme demonstrated a clear consensus around setting long-term targets for energy efficiency in Scotland. In response, all residential properties in Scotland will be required to achieve an Energy Performance Certificate (EPC) rating of at least EPC C by 2040. EPCs are used to set the standard and are widely known and provide a clear way to model and understand a building's energy performance. • Making homes more efficient can help lower energy bills, but the upfront cost of energy efficiency measures often puts people off because they can’t afford it or would rather prioritise their money in other ways. Home Energy Scotland which is funded by Scottish Government and managed by SCARF in Aberdeen informs residents about the funding options which may be available. The funding options may be in the form of a grant or an interest free loan. • Poor energy performance of homes contributes to fuel poverty. • The installation of energy efficiency measures can improve the energy performance of homes. • The installation of energy efficiency measures supports good physical and mental health primarily by creating healthy indoor living environments with healthy air temperatures, humidity levels, noise levels, and improved air quality.

- According to the Scottish House Condition Survey 2017-2019, 4% of homes in Aberdeen have an EPC performance of F&G which equates to approximately 4,280 homes.
- Community engagement and promotion regularly takes place via SCARF and Home Energy Scotland, but it has never been directed by the communities themselves. This project allows us to see if co-designed community led promotion results in a better uptake of schemes.

Measures

- **Outcome measures**

The number of homes with an EPC rating of F & G. (Scottish House Condition Survey)

The percentage of homes with an EPC rating of F & G. (Scottish House Condition Survey)

- **Process measures**

1. Campaign analytics (Change Idea 1)
2. The number, type and place of community awareness sessions. (Change Idea 2)
3. The number of people attending the awareness sessions (Change Idea 2)
4. The number of enquires to SCARF from the North, South and Central localities in relation to grants following each promotions/awareness session. (Change Idea 1,2,4,5)
5. The number of energy efficiency grants applied for North, South and Central localities. (Change Idea 1,2)
6. The number of energy efficiency measures installed in private homes. (Change Idea 1,2)
7. The number of energy efficiency measures installed in council homes where the current tenant has previously refused to have the measure installed. (Change Idea 3)
8. The number of homes which had an EPC rating of F&G contacted. (Change Idea 4,5)
9. The number of homes with an EPC rating of F&G contacted who contacted SCARF following communication. (Change Idea 4,5)
10. The number of homes which had an energy efficiency measure installed. (Change Idea 4,5)
11. The number of homes where energy efficiency rating has improved. (Change Idea 4,5)
12. The number of homes which is no longer a F&G rated property. (Change Idea 4,5)

- **Balancing measures**

The number of households living in fuel poverty.

The number of households living in extreme fuel poverty.

Change ideas

1. Test whether a targeted promotional campaign of the relevant grants to private sector householders increases the number of energy efficiency measures installed and home energy performance improves. (South Locality Plan)

Residents should be informed of grants and loans that are available to them regarding energy efficiency products. This will be done via SCARF/Home Energy Scotland.

2. Test whether the community awareness sessions have been successful in increasing uptake of grants resulting in an increased number of energy efficiency measures installed.

SCARF/Home Energy Scotland will initially engage with community groups and community led initiatives to attend their groups/set up sessions to provide advice and assistance on the various types of support which are available to assist with the installation of energy efficiency measures. The sessions will be virtual and face-face where possible and will be designed to raise awareness of types of support available and provide guidance on grants/loans that are available. The session will also link in with other support packages such as the Energy Company Obligation programme which is currently being managed by SCARF.

3. Test whether revised information provided to tenants that promotes the benefits of energy efficiency measures in their homes increases the number of energy efficiency measures installed and home energy performance improves.

There is a reluctance from some tenants to allow energy efficiency measures to be installed in their homes, for example, those who have lofts full of personal belongings. The benefits to the tenants, including financial benefits, will be highlighted to the tenants to encourage more uptake.

4. Test whether working with letting agents to promote the uptake of energy efficiency measures in the private rented sector increases the number of energy efficiency measures installed and home energy performance improves.

Landlords should be advised of all the assistance that is available via SCARF/HES to promote uptake of energy efficiency measures. This can be done through ECO (Energy Company Obligation) schemes which allow households who would not qualify for government funding to get certain energy efficiency measures installed through ECO funding. SCARF is working with an installation company to install energy efficiency measures in homes. The number of referrals and the number of installations will be recorded which will contribute to the improvement in energy performance. EPCs will be carried out pre and post the installation of energy efficiency measure(s).

5. Test whether direct communication to householders of properties we believe may have an EPC rating of F & G to raise awareness of the relevant grants increases the number of energy efficiency measures installed and home energy performance improves.

Residents should be informed of grants and loans that are available to them regarding energy efficiency products. This will be done via SCARF/Home Energy Scotland and should include details on ECO funding as in 4 above.

Location/Test Group

City wide promotion, but the South Locality Group initially for promoting relevant grants to householders.

Tenants; city wide

Householders of properties we believe may have an EPC rating of F & G; citywide

Resources

All ideas will be resourced through existing resources.

Potential risks and/or barriers to success & actions to address these

1. Lack of funding for private sector housing to allow the required energy efficiency measures to be installed.
2. Not all buildings will be able to achieve EPC E or above, and in some cases the cost of the work may outweigh the energy saving benefits.
3. No detailed information held by Aberdeen City Council on the location of private sector low energy performance properties.
4. Baseline information may not be accurate – 4% as the baseline from SHCS may be lower than what is the case due to the large numbers of granite properties in Aberdeen.
5. Scottish Government targets in relation to energy efficiency permits exemptions which means it is accepted that it is not always possible to achieve 100%. We will also need to accept the exemptions so it needs to be clear that we will never be able to truly meet the target of no EPC F & G homes by 2026.
6. Shortage of local contractors to be able install measures if there were to be a large uptake.

Project Team

Mel Booth – Strategic Place Planning, ACC
 Sara Cameron – Corporate Landlord, ACC
 Mark Shaw – Corporate Landlord, ACC
 Ian Perry – Corporate Landlord, ACC
 Lawrence Johnston – SCARF
 Chris Hunt, Grampian Housing Association
 TBA – Private Rented Sector rep

Community Ideas for Improvement Evaluation/Status

Community Ideas for Improvement	Evaluation Rationale
North	Input received from North LEG on 06 October 2021. Focus group to be established to review promotional materials to ensure messages are clear.
South	Engaging with locality on how to co-produce the promotional campaign.
Promote relevant grants to householders	This is a change idea for this project.
Central	No community ideas for improvement, however, we are actively seeking input from these communities through the LEGS/PNP.

Outline Project Plan		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	1. Project area identified and agreed. 2. Draft Outline Project Charter and team in place. 3. Understanding baseline of current system.	07 October 2021 07 October 2021 07 October 2021
Designing and Testing Changes (Project Score 4-7)	4. Project Charter endorsed by CPA Board 5. Change ideas and project measures further refined and prioritised 6. Testing underway 7. Initial indications of improvement	November 2021 30 November 2021 31 January 2022 30 June 2022
Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)	8. Improvements achieved & spread plans developed	November 2022
Spreading Changes (Project Score 9-10)	9. Sustainable improvement seen across the system 10. Project aim achieved	February 2023 2023

Charter 1.3 Financial Assessment Tool (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Ensure 100% of people presenting as homeless have a full financial assessment and access to all appropriate benefits by 2023.	
Project Manager	Angela Kazmierczak, ACC	
	Training undertaken: Virtual MFI Bootcamp	
Reviewed by:	Allison Swanson	
Date:	01/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	The aim aligns with the LOIP aim.
2. Is there a sound business case explaining why the project is important?	Yes	There is evidence as to why this is important.
3. Have connections to Locality Plans been made and reflected?	N/A	There are no community ideas for improvement aligned to this project.
3. Is it likely that the changes being tested will achieve the aim?	Yes	Change ideas likely to be successful and likely referrals and support organisations key to supporting completion & understanding of the assessment.
4. Will the measures demonstrate whether a change is an improvement?	Yes	Measures likely to show impact of change ideas.
5. Is a location/Test Group identified?	Yes	Yes, people who are homeless; city wide.
6. Have resources to implement the change ideas been identified?	Yes	Funding for the digital tool approved for 1year.
7. Is there a mix of partners involved in this project?	Yes	Good mix of partners and lived experience voice to come through support agencies.
8. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

<p>Improvement Project Title Financial Assessment Tool</p>
<p>Executive Sponsor Derek McGowan, Chair of Anti-Poverty Group</p>
<p>Project Lead Name: Angela Kazmierczak, Financial Inclusion Team Leader (ACC) Email Address: akazmierczak@aberdeencity.gov.uk</p>
<p>Aim statement Ensure 100% of people presenting as homeless have a full financial assessment and access to all appropriate benefits by 2023.</p>
<p>Link to Local Outcome Improvement Plan</p> <ul style="list-style-type: none"> • Stretch outcome 1 No one will suffer due to poverty by 2026 <p>Links with improvement projects:</p> <ul style="list-style-type: none"> • Reduce youth homelessness by 6% by 2023. • Increase by 10% those individuals, aged 21+ and not subject to statutory throughcare arrangements, who access support services upon release from HMP Grampian by 2022. • Increase the uptake of unclaimed benefits across Aberdeen City by 2023.
<p>Link to Locality Plans There were no community ideas for improvement aligned to this project.</p>
<p>Why this is important and issues with the current system?</p> <p>Currently when households approach for homelessness assistance, we do not carry out a full financial assessment to ensure they are receiving full benefit entitlement and to try and identify those at risk of be unable to sustain a tenancy due to financial issues. This would only be done if the household was referred to the Financial Inclusion Team by the agency working with the person. Referrals to the team is often when households are already in problem debt and unable to claim back benefits, due to time limits in backdating of those benefits.</p> <p>By ensuring all households have a financial assessment at point of access to Housing for a homelessness assessment either through ACC or one of our support partners this should ensure all households get a full benefit check to maximise income where possible and shift those receiving advice on entitlement to benefits/problem debt at the earliest opportunity to maximise income, support tenancy sustainment and reduce rent arrears.</p> <p>Baseline Data In 2019/2020 -</p> <ul style="list-style-type: none"> • There were 1,487 homeless applications • 1,224 households were assessed as being unintentionally homeless and owed a duty to re-house • 154 or 10.3% applicants recorded financial difficulties as a contributing factor for their homelessness • 835 of homeless households were re-housed through ACC • 79 of the 835 tenancies left within a year • 390 or 52% of these remaining new tenancies recorded rent arrears of £500 or higher after 1 year. • 152 applicants were re-housed through RSL accommodation

Digital Tool

Entitledto is an internet-based system which will be accessed either through the Self-serve function on a URL link on ACC website or adviser led. Two tools have been purchased to meet the LOIP outcomes.

Benefit Calculator

- Help our customers understand their entitlements with our own branded benefits calculator
- Designed to be self-service freeing up staff resources though with the option of an adviser led assistance for those more vulnerable.
- Other agencies supporting household could access the self-serve function when supporting households.
- Hundreds of help pages available to assist individuals to understand their own entitlement
- Signpost users on where and how to claim
- Management Reports will show how many people have accessed the tool along with the additional benefits identified.

Affordability Calculator

- Maximise the income through a benefit check of prospective tenants so their tenancy succeeds
- Gathers information on income/expenditure and debts which helps to establish affordable housing options
- Helps identify vulnerable tenants requiring tenancy support to target resources and interventions where needed.

Whilst this charter focuses on those approaching the Council for a homelessness assessment, there are other opportunities these digital tools could be used to help improve outcomes for households. With working with other agencies to promote the use of these tools we hope that this early intervention work will ensure household checks they are always receiving the correct entitlement to benefits and help reduce the number of people presenting as homeless due to financial reasons.

Measures

Outcome measures

- % of people presenting as homelessness who have a full financial assessment and access to the appropriate benefits.
- % of people who have a full financial assessment
- % of people who have access to all appropriate benefits

Process measures

- % of new tenancies allocated to homeless household in rent arrears of £500 or higher during the first year
- % of households approaching the Council for a homelessness assessment who complete a benefit check
- % of people where new benefits are identified
- % of people self-serving for the financial assessment
- No. of organisations referring individuals for a financial assessment
- % of people supported to complete the financial assessment
- Amount (£) of Financial gains identified
- Amount of Financial Assessment carried out
- Check rent balance at certain periods of customers who have used the tools
- No of people supported to complete the assessment by support organisations

<ul style="list-style-type: none"> No. of people referred/offered support who did not complete the assessment 		
Balancing measures <ul style="list-style-type: none"> % of those prevented from having to present at homelessness % of those repeat homeless applicants recorded financial difficulties as a contributing factor for their homelessness 		
Change ideas <ul style="list-style-type: none"> To test use of an online digital tools to carry out a full financial assessment when household present as homeless to ensure all eligible benefits are claimed and identity any household who may struggle to sustain their tenancy due to financial problems. To test referral of individuals presenting as homeless to support organisations to support completion and understanding of the assessment 		
Location/Test Group We will be testing this with all household who approach the Council for Housing through Housing Options module.		
Resources A digital tool will be financed within existing resources for 1 year.		
Potential risks and/or barriers to success & actions to address these		
Customer refusing to complete the Affordability Tool <ul style="list-style-type: none"> Assistance will be offered to those who may struggle to complete the online tool Staff may not send out link to complete affordability calculator or record the outcomes Full training will be provided to all staff and reports generated to identify cases which have not had the financial assessment. Individual may not have digital access to self-serve or the digital skills 		
Project Team Graeme Gardner – ACC Rapid Rehousing Team Leader Martin Nicol – ACC QA & PM Officer Morag Hannah – ACC Senior Housing Options Officer Steve Hughes – Turning Point Scotland Clare Carter – ACC Support Officer David Bryce – ACC Systems Development Officer David Campbell – Langstane Leona McDermid - Foyer TBC - Shelter		
Community Ideas for Improvement Evaluation/Status There were no community ideas for improvement aligned to this project.		
Outline Project Plan		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Identifying digital tool Establishing project team Understanding system Gathering baseline data	Completed
Designing and Testing Changes (Project Score 4-7)	Charter Submitted to board for approval Training to staff Creating a process to record on Iworld the	Nov 2021 Nov 2021 Nov 2021

	<p>Implementing and promoting the self-serve benefit calculator</p> <p>Analysis of data from calculator</p> <p>Multi agency review of individuals not completing the self-serve to determine reasons why and any barriers to overcome.</p>	<p>Ongoing</p> <p>Ongoing</p> <p>Jan 2022</p>
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>An advance analysis of the outcomes of the calculator 3 months before end of the contract to evidence improvements and extend contract for 2 years with to meet the LOIP aim.</p> <p>Feedback will be sought from those with lived experience.</p>	<p>April 2022</p> <p>April 2022</p>
<p>Spreading Changes (Project Score 9-10)</p>	<p>Aim achieved.</p>	<p>April 2023</p>

This page is intentionally left blank

Charter 1.4 Tackling the unequal impact of COVID-19 (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase support for those who have been most disadvantaged through the pandemic by 2023.	
Project Manager	Dave Black, GREC	
	Training undertaken: Virtual MFI Bootcamp	
Reviewed by:	Allison Swanson	
Date:	24/09/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP and highlight alignment to the Locality plans?	Yes	The aim aligns with the LOIP aim and with the Locality Plans.
2. Is there a sound business case explaining why the project is important?	Yes	There is a sound business case and evidence to show where there are opportunities to make improvements in the current system and rationale for the focus on women and ethnic minority communities.
3. Have connections to Locality Plans been made and reflected?	Yes	North, South & Central.
4. Is it likely that the changes being tested will achieve the aim?	Yes	It is likely that the change ideas will increase the no. of women and individuals from ethnic minorities accessing and receiving existing employment/training support.
5. Will the measures demonstrate whether a change is an improvement?	Yes	Measures likely to show whether change ideas have had an impact.
6. Is a location/Test Group identified?	Yes	Women; ethnic minority communities; and
7. Have additional resources needed to implement the change ideas been considered?	Yes	Funding for change idea 4 likely and discussion ongoing re potential funding source.
8. Is there a mix of partners involved in this project?	Yes	There is a good mix of partners but some names to be identified. Lived experience voice provided by the community groups linked to the project.
9. Clear outline project plan?	yes	
CPA Management Group/ Board Ready? Yes		

<p>Improvement Project Title Tackling the unequal impact of COVID-19 (2021)</p>
<p>Executive Sponsor Derek McGowan</p>
<p>Project Lead Name: Dave Black Job Role & Organisation: General Manager, GREC Email Address: dblack@grec.co.uk</p>
<p>Aim statement Increase support for those who have been most disadvantaged through the pandemic by 2023 <i>(with a focus on women and ethnic minority communities)</i></p> <p>In terms of “support”, the improvement group will initially focus on the existing support services that are provided in relevant areas (e.g. around employability), and how that can be better targeted to groups most disadvantaged by COVID-19. As the project develops, we want to better understand if this support is working for the target communities of this project, or if there are other forms of support that might better meet needs and gaps.</p>
<p>Link to Local Outcome Improvement Plan The project sits under stretch outcome 1: No one will suffer due to poverty by 2026</p>
<p>Link to Locality Plans The project has links with the North and South locality plans.</p>
<p>Why this is important and issues with the current system? The COVID-19 pandemic and associated pandemics have shone a spotlight on, and exacerbated inequalities within Scottish society. The impact on a wide range of groups, including women, ethnic minority communities, disabled people, those facing socio-economic disadvantage, younger and older people, is evidence with a wide range of data in the Scottish Government report, The Impacts of COVID-19 on Equality in Scotland. There is limited equalities data at a local level to make exact comparisons with the national picture, but we know from the data we have, the feedback from those working in the third and public sectors, and from the lived experience of individuals in our communities, that these unequal impacts of COVID-19 are being played out within Aberdeen City.</p> <p>Gender – national data Employment rate 2020 (16-64): female 71.0%; male 76.1%; overall 73.5% (Source: Skills Development Scotland)</p> <p>Gender – local data Employment rate 2020 (16-64): female 72.4%; male 70.7%; overall 71.5% (Source: Skills Development Scotland)</p> <p>From DWP data we know that between March 2020 and June 2021 the number of females in receipt of Universal Credit in the UK rose from 4012 to 9190.</p>

Those accessing ABZ Works support:

Gender

Female	96
Male	141
Other (including not provided)	6
	<hr/>
	243

The SDS Regional Skills Assessment for City and Shire (July 2021) concludes that there is under-representation of women in the regional workforce.

Those working in the PACE programme (supporting individuals facing redundancy) said that despite women being more likely to work in employment sectors likely to face redundancy there were fewer females than males accessing the service. Between April 1st and July 31st of those whose gender was recorded, 20 individuals were male, 9 were female, which we believe is suggestive of a lack of awareness of the support available, as well as potentially other barriers.

Ethnic minority communities – national data

Unemployment rate (16+): ethnic minorities 9.7%; “White” 4.0%; Overall 4.4%

Ethnic minority communities – local data

The SDS Regional Skills Assessment for City and Shire (July 2021) concludes that there is under-representation of ethnic minority communities in the regional workforce, and the regional rate of employment for ethnic minority communities was lower than for these communities in Scotland as a whole.

Those accessing ABZ Works support:

Ethnicity

Ethnic Minority Background	13
White (inc. Scottish, Irish, English and other)	171
Not Provided / Unknown	59
	<hr/>
	243

These figures highlight that that there is a lower than proportionate number of people from ethnic minority backgrounds accessing support (given that ethnic minority make up around 17% of the population in Aberdeen).

Homestart have shared that they are seeing increased referrals from ethnic minority communities, particular from those with No Recourse to Public Funds. In addition, the Hardship Fund received a significant proportion of applications from ethnic minority community organisations based on their communities being unable or facing barriers to accessing mainstream support, with No Recourse to Public Funds again being a key issue. This suggests that support is being accessed to deal with the impacts of poverty, but perhaps not the causes (in this case unemployment).

We continue to collect data that help us better understand the system, including data that relates to other disproportionate impacts of COVID-19, including hate crime data, and health related data. In the meantime, our understanding of the data is that women and particularly ethnic minority communities are over-represented in terms of

unemployment and under-represented in terms of accessing relevant employability support.

We recognise that most of these inequalities existed before COVID-19. They are part of the structural inequalities built within our societal systems. Without understanding and addressing these inequalities, we will not be able to reach our vision of an Aberdeen where everyone can prosper, no matter their background. Without further interventions, the short term unequal impacts of COVID-19 will become medium and longer term impacts, having a cumulative effect alongside pre-existing structural inequalities.

This improvement project challenges community planning partners to understand structural disadvantage, to interrogate our existing interventions and attempts to address long-standing inequalities, and to gain a better understanding of the lived experience of Aberdeen's diverse communities.

The improvement project is very broad, with a whole range of inequality types that are highlighted in the Scottish Government research, e.g. increased experiences of hate crime, increased mental health problems and loneliness, increase in domestic abuse, and further areas. On the basis of the data available, to the project will at least initially focus on the economic/employment aspects of the unequal impact of COVID-19, with a focus on ethnic minority communities and women as target groups. However, as we identify and compare more local data around unequal impact, we will take a flexible approach to the targeted groups, updating our project charter accordingly. We plan to continue building up our understanding of the system by engaging with community groups, particularly those relevant groups who received "Hardship funding", earlier in 2021.

Measures

• Outcome measures

- The (un)employment rate of women and ethnic minorities relative to comparable groups.
- The no. of women and people from ethnic minority communities being supported by the most relevant agencies (PACE, ABZ Works, Pathways)
- The number of people with No Recourse to Public Funds accessing specialist employability/redundancy support

• Process measures

- Campaign analytics to show impact of different platforms/approaches
- No. of women and individuals from ethnic minority communities accessing support during and after targeted campaign, and how they found out about the support
- No. of women and individuals from ethnic minority communities attending event engaged with PACE and ABZWorks
- No. of women and individuals from ethnic minority communities seeking support after attending event engaged with PACE and ABZWorks
- No. of ethnic minority/women community groups/organisations undertaking employability/training capacity building;
- No. of people referred for employability support from ethnic minority/women's community groups/organisations.

- **Balancing measures**

- DWP claimant count rate for affected communities (though unclear if data available for ethnic minorities at a local authority level).

Change ideas

- Test how a co-designed, targeted promotion campaign around employability support available, increases the number of women and people from ethnic minority communities access employability support (North & South LPs)
- Test how an event promoting the support available through PACE and ABZWorks encourages women and people from ethnic minority communities to engage with employability support in the city (North & South LPs)
- Test whether training/capacity building of groups who engage with/support people from ethnic minority communities and women in the City (including some of the organisations who applied for Hardship Funding earlier in 2021) increases the number of people from ethnic minorities/women referred to and accessing available employment support.
- Test how specialist employability support aimed solely at people with No Recourse to Public Funds increases engagement and access to employment for this group, as well as building our understanding of inequalities in the City (North LP)

Location/Test Group

The south locality identified a need to run community sessions for people faced with losing their jobs. We will therefore start by running a pilot within the south locality, promoting the support available through PACE and ABZWorks. We work with people within the South Locality to design a communication plan to reach women and ethnic minority communities in particular.

The north locality identified a need to ensure that support is available for families that do not qualify for benefit assistance and test re specialist support will start in that locality.

Test 2 and 3 will be city wide and focus on women and people from ethnic minorities.

Resources

The first three tests of change will be deliverable within the resources of the project team and further partner organisations.

The third change idea would require additional funding, and may align with some underspend within Aberdeen City Council's Hardship Funding. We have had some discussions with Aberdeen City Council about this, and will follow these up as we firm up the delivery plans.

Potential risks and/or barriers to success & actions to address these

The systems around inequalities are so complex that there will be over-lapping issues that will prevent us from building a full picture of the reality of those experiencing inequalities. For example, while we look at Universal Credit claims as a measure of disproportionate impact we will miss those who have not made a claim, e.g. for reasons of stigma around benefits, or limited digital access/skills, as well as those who are unaware that they might have an entitlement to some benefits or other support. Where possible we will make links with other improvement project groups to raise these issues

and encourage that these are considered (e.g. in the project focused on increased benefit take up).

There are many impacts of COVID-19 that seem impossible to measure, e.g. the combined impact of women being disproportionately represented in sectors where there was a very high demand for stressful work during COVID-19 lockdowns (e.g. health and social care) while also tending to bear the brunt of domestic duties/responsibilities and home schooling. How much of this impact is short term, and how much will be medium and longer term? We aim to build up a clearer picture through engagement with communities and gathering insights into lived experience and impacts around mental health.

There is a risk that those in other groups disadvantaged by COVID-19 will be frustrated that the focus is on women and ethnic minority communities (though important to note that intersectional identities will mean that those belonging to these groups, will also be part of others, such as disabled people, older people, those living in socio-economic disadvantage etc.). There is not scope within the project to cover all areas of inequality experienced by all the different groups that have been identified. Our aim is that as the data we have access to improves, and as we test out ideas, we can expand our focus to a broader range of groups as the project continues.

Project Team

Dave Black (Grampian Regional Equality Council)
 Baldeep McGarry (Equalities Team, Aberdeen City Council)
 Versha Hurry (Social Security Scotland)
 Ishbel Greig (Employability, Aberdeen City Council)
 Susan Thoms (Fairer Aberdeen Fund, Aberdeen City Council)
 Claire Shaw (ACVO)
 TBC (Pathways)

Community links are in place via GREC's and ACC's connections, e.g. through Aberdeen Women's Alliance, GREC's on-going project around No Recourse to Public Funds which includes a community leaders group and potentially a lived experience group.

Community Ideas for Improvement Evaluation/Status

Community Ideas for Improvement	Evaluation Rationale
North	Presentation to Locality Empowerment Group 6/10/21
Ensure that support is available for families that do not qualify for benefit assistance.	This aligns to the change idea of a pilot initiative offering targeted employability support for people with No Recourse to Public Funds
More support for people with disabilities – including better access; tackling discrimination/hate crime and better opportunities for disabled people to participate.	Discussion with communities to explore this idea to be held but likely that a focus on disabled communities will fall outwith the scope of the early stages of the project. Hate crime/discrimination is the focus of another project and other employability projects which may include this aspect - linkages made.

Increased support for individuals' wellbeing beyond the pandemic.	Discussion with communities to explore this idea to be held and connections to be made to Stretch Outcome 12 projects as this does not align with the initial employment/employability focus of the project.
Raise awareness of poverty across the locality to break down the barriers around poverty and stigma.	Further discussion to explore how this could be part of the raising awareness change ideas being tested in the locality.
Share learning from pop-up TSB services at Danestone	Awaiting connections to better understand what this was and how the learning relates to the project.
Promote Pathways employability programme.	Aligns to the change idea looking at more targeted promotion of all employability/training support available.
South	
Ensure the efforts of community groups and partners are co-ordinated and enabled at local level to avoid duplication and target those most in need.	We will work with communities and the project reps involved in service delivery to understand existing local initiatives, to allow us to ensure we do not duplicate and that that awareness and use of these are raised
Local sessions to support people losing their jobs (help to apply for benefits, job seeking, CV writing) PACE	Further discussion required but likely that our targeted approach to ethnic minority communities and women will make links with existing employability activity in localities
Support and signposting to find the right scheme for specific needs	This aligns to change ideas and will work with community to co-design and promote signposting.
Develop and promote training kitchen in Torry community hub development to tackle food poverty and develop skills for employment.	This aligns to the change ideas re promotion of existing support for training/employment.
Support community kitchen development with Bon Accord sheltered home complexes to increase social activity, tackle food poverty and develop skills and confidence	This idea requires discussion, though this may be outwith the scope of the initial project change ideas, it may link in with other projects.
Central	No related ideas highlighted in the Central Locality Partnership

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	<ul style="list-style-type: none"> - Identifying project lead - Forming the improvement team - Gathering national and local baseline data 	July 23 rd 2021 July 26 th – Aug 18 th July 26 th – Sept 17 th (and on-going) Aug 19 th – Sept 17 th (and on-going)

	<ul style="list-style-type: none"> - Engaging with relevant partners in public and third sector - Understanding the current system (including more in depth engagement with community groups) - Review of community ideas in relation to narrowed down improvement project ideas 	<p>Aug 18th – Sept 17th (and on-going)</p> <p>Sept 17th and on-going</p>
<p>Designing and Testing Changes (Project Score 4-7)</p>	<ul style="list-style-type: none"> - Further definition and prioritisation of changes - Discussion with community contacts in North and South localities - Further discussion with those delivering relevant interventions - Review of change plans against resources available - Test of change, design workshops with community and additional partners - Initial tests of change implemented 	<p>Sept-Oct</p> <p>Sept-Oct</p> <p>Sept-Oct</p> <p>Oct</p> <p>Nov-Dec</p> <p>Nov 2021 – Feb 2022</p>
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>Depending on what is learnt from the above sections, this will further shape this section, but may include: Developing resources and guidance for support services Review of commissioning and funding processes to ensure target groups are reached</p>	<p>Mar-June 2022</p> <p>Mar-June 2022</p>
<p>Spreading Changes (Project Score 9-10)</p>	<p>Reviewing further data around those most disadvantaged and identifying how lessons learned from the above can be implemented in other contexts</p>	<p>June-September 2022</p>

Charter 2.2 Start Up Businesses (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Supporting 50 people to start a business in Aberdeen who will be coming off the benefits system or significantly reducing their benefits through starting a business by 2023 & by 100 by 2026	
Project Manager	Roz Taylor & Kirstie McLaughlin, Elevator	
	Training undertaken: Virtual MFI Bootcamp	
Reviewed by:	Allison Swanson	
Date:	01/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	The aim aligns with the LOIP aim.
2. Is there a sound business case explaining why the project is important?	Yes	There is a sound business case and evidence to show where there are opportunities to make improvements. Would be strengthened if data on the no. of parents on benefits could be added to evidence rationale for focus on that area.
3. Have connections to Locality Plans been made and reflected?	Yes	Locality Managers on the Project Team and connections with communities being made.
4. Is it likely that the changes being tested will achieve the aim?	Yes	It seems likely that the change ideas will achieve the aim.
5. Will the measures demonstrate whether a change is an improvement?	Yes	Measures likely to show improvement.
6. Is a location/Test Group identified?	Yes	Location and test group clear.
7. Have resources to implement the change ideas been identified?	Yes	
8. Is there a mix of partners involved in this project?	Yes	There is a good mix of partners but would be useful to education/NEScol/universities connected given focus on young people? Could there be representation from parents returning to work?
9. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? yes		

Improvement Project Title: Start Up 50 – Supporting individuals to come off universal credits and start a business.

Executive Sponsor: Allison Carrington, Chair of Aberdeen Prosper

Project Lead

Name: Roz Taylor & Kirstie McLaughlin

Job Role & Organisation: Operations Director & Operations Manager – Elevator & Business Gateway – Aberdeen City & Shire

Email Address: roz@elevatoruk.com & kirstie@elevatoruk.com

Aim statement: Supporting 50 people to start a business in Aberdeen who will be coming off the benefits system or significantly reducing their benefits through starting a business by 2023 & by 100 by 2026

Link to Local Outcome Improvement Plan:

This improvement project sits within the Economy Theme of the LOIP and sits under stretch outcome 2. “400 Aberdeen City Residents to be supported into Fair Work* by 2026 - (*The Fair Work Convention’s vision, which the Scottish Government shares, is that by 2025 people in Scotland will have a world-leading working life where fair work drives success, wellbeing and prosperity for individuals, businesses, organisations and society.)”

Link to Locality Plans:

There are community ideas for improvement aligned to this project from North, South and Central Locality Plans.

Why this is important and issues with the current system?

Aberdeen City and Shire has always been a reasonably prosperous region with high levels of start-up activity and new businesses. However, in the last year understandably there has been a reduction in the on the ground engagement and the number of businesses beginning to trade in the region. (Although the drop in start-up numbers is nowhere near where had been anticipated and as a region ACS showed significantly more start up activity that many other local BG regions) Focus had to move to supporting existing businesses within the region who were looking for support to survive. Elevator through the Business Gateway service were able to continue to support both existing and start-up businesses in the region throughout the COVID crisis. This was possible as the BG team were not required to support grant delivery as happened in many other regions which did not have the BG services contracted out.

City Start up Figures:

18/19 – 558

19/20 – 576

20-21 – 420

The COVID crisis has also seen a significant increase in the number of individuals who have been in receipt of universal credits within the city region. Early 2020 recorded in the region of 7000 individuals in the city receiving universal credits whereas the most recent figures see over 18,000 city residents in receipt of Universal Credits.

Looking further at these figures the age group between 20 and 40 sees the highest number of individuals receiving Universal Credits. Further more the following 4 areas, George St & The Harbour, Northfield/Mastrick North, Tillydrone/Seaton/Old Aberdeen & Torry/Ferryhill all areas which are already seen as priority areas. Central Aberdeen sees the highest no. of people receiving Universal Credits.

Taking all of this information into account, and now we are in a position to begin to get out and about into the local communities, there is a need to look a developing change ideas to support

those individuals on Universal Credit to consider and actively move forward in to starting a business as an alternative to remaining on Government Benefits.

There are no baseline figures for No. individuals starting a business within the city who are coming off or significantly reducing their universal credits as we previously didn't currently record this, we are now recording these figures moving forward.

Measures

- **Outcome measures**

No. individuals starting a business within the city who are coming off or significantly reducing their universal credits (baseline: 0)

- **Process measures**

No. of referrals coming from DWP to the BG service per locality (North, South & Central)

No. sessions delivered to claimants of universal credits

No. of Team to Team Sessions held

Level of awareness of staff of work of related organisations, e.g. Job Centre.

No. of individuals on universal credits attending the information sessions

No. of individuals who have attended the sessions seeking support/engaging to set up a business

No. of individuals who have attended the sessions who start up a business

No. of young people applying for funding through Young person Seed Fund

No. of young people who receive funding through Young person Seed Fun who start a business

No. of parents out of work or in work poverty applying for Start-up Funding

No. of parents out of work or in work poverty who have received Start-up Funding who start a business

No. of start-up business events held for students

No. of students attending engagement events

No. of students who attended the events starting a business

- **Balancing measures**

No. of start-up business deaths within year 1.

Change ideas

- Test how dedicated BG Advisers per locality – Buddied up with DWP advisers – increase the number of direct referrals being passed over to BG (North, South and Central)
- Test how regular Team to Team sessions to understand both what is happening in the Job Centre & BG increase engagement and working between teams
- Test how regular information sessions/webinars for individuals who are on universal credits either digitally or within the job centre increase the number of individuals engaging with BG / setting up a business
- Test how a Young Persons Seed Fund – collaboration between the Council and BG supports young people to start up a business with some funding support through the young persons guarantee fund
- Test how a Start up fund targeted at parents out of work or in work poverty supports parents looking to get back into working through self employment
- Test how events/engagement with students could result in them starting a business – Beauty Therapy, Hairdressing, Photography etc. – Working more closely with the colleges to get BG into those courses which have potential to be self-employed. Historical “Be Your Own Boss” could be looked at again or other ideas which are perhaps digital but delivered to the masses

Location/Test Group

- All three localities
- For the funding options we would look to work with the specific groups which are relevant, E.G. for the Young Persons Seed Fund we will target young people and for the possible other fund for mums returning to work we will focus on these target areas.
- Primarily our focus will be on anyone within the region who is not currently in gainful employment specifically but not exclusively those who are in receipt of universal credits.

Resources

Primarily the resources which are required for the project are people resources.

The seed funds which have been mentioned are delivered and administered through the Council with close collaboration and support in developing the applications, business plans and cash flow forecasts. Engagement is ongoing within the council to develop these further and funds are sourced and secured through different pockets of funding which the council are able to access.

The parts of the charter which are being developed in conjunction with the DWP again are primarily staff resources and none of these resources are seen as additional resources but more engagement and collaboration between the DWP and Business Gateway. We already have connections with DWP this is more about developing more structured process and practices to ensure that the maximum number of people looking to start a business are passed over to the Business Gateway Advisers.

Further education engagement. There are already strong relationships within the colleges and universities within the region and development within these organisations to increase the awareness of support for students who have the potential to start a business is around people resources and relationships.

Potential risks and/or barriers to success & actions to address these

The main risks/barriers within the charter is lack of engagement/commitment from the other partners who are supporting the charter. Historically, while there have been positive engagements when developing projects, it has been difficult to get some organisations to commit to their part of the projects which have taken place and while the project may have been successful the engagement from the locality areas has been less than was hoped. As well as regular project Team meetings, we will have regular engagement with the partners and feeding back on the success and challenges as each change idea is tested will be key moving forward.

Project Team

Business Gateway: Roz Taylor & Kirstie McLaughlin

Locality Managers: Paul Tytler (Central) (with support from Martin Smith (North) and Neil Carnegie (South))

DWP: Karen Robb (with support from Anis Ahmed)

Chamber of Commerce: Shane Taylor (possible change to support individual to John Shaw TBC)

Aberdeen City Council: Jamie Coventry (supporting with statistics), Ishbel Greig (Aberdeen Prospers and Employability Support)

Scottish Enterprise: Martin Barry

Federation of Small Businesses: David Groundwater

Community Ideas for Improvement Evaluation/Status

Community Ideas for Improvement	Evaluation Rationale
North	Project considered by North locality Empowerment Group on 6/10/21
Explore opportunities to grow local social enterprises which contribute to building communities; local relationships and reducing isolation.	This idea is not directly linked with the aim of this project. Social enterprises will also receive support through BG/ Elevator, and will be covered in change on BG advisor for each locality.
South	South Locality Manager on the Project Team and connections with the community awaited.
Promote, encourage and support development of community owned	This idea is not directly linked with the aim of this project. However, Social enterprises will also receive support

enterprise –building resilience and creating jobs in the local area	through BG / Elevator, and will be covered in change on BG advisor for each locality.
Raise awareness of the potential to support the development of social enterprises, work with community to identify potential social enterprises and share good practice from elsewhere	This idea is not directly linked with the aim of this project. However, social enterprises will also receive support through BG / Elevator, will be covered in change on BG advisor for each locality.
Support for green jobs and small businesses. Early awareness raising of green job career opportunities.	Supporting green jobs, and other sectors, will be covered in this project and progressed with the 3 localities.
Investigate opportunities for job creation linked to developing leisure potential (cafes, restaurants) of harbour mouth at Torry and creating links to Beach area developments	The project will support individuals looking to start up these types of businesses but there is also a link to the revised City Centre Masterplan.
Central	Central Locality Manager on the Project Team and connections with the community awaited.
Create a community owned enterprise –to support development of myriad of veg plots/spaces in neglected spaces owned by community to promote mental health, combat isolation and food poverty.	This idea is not directly linked with the aim of this project. However, Social enterprises will also receive support through BG / Elevator, will be covered in change on BG advisor for each locality.
Utilise empty premises to encourage new business	The project will explore premises requirements with all new start-ups and connection made to empty premises identified and connection made to empty premises identified.

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Developing the team Completing project charter Existing data supporting the charter Understand the current UC levels within Aberdeen City and activities already in place Connecting with the Community - Initial suggestions from the community did not fit with the Stretch outcome	Team in place Charter developed Baseline Data included Included within the charter Ongoing – request has been sent to local community awaiting response
Designing and Testing Changes (Project Score 4-7)	DWP – Meeting to be set up with Anis & Karen to confirm BG Advisers connecting to Job centre advisers, team to team arrangement, webinars and direct referrals systems Locality – Meeting with Locality Managers to discuss direct engagement with the locality	End October 2021 End October 2021

	<p>council employees to ensure consistent message and engagement within the locality</p> <p>Funding Programmes – Young Persons Seed Fund – Develop the process of referral and development of seed fund applications</p> <p>Start up fund for Parents out of work or in work poverty – Develop the process of referral and development of Start-Up Fund</p> <p>Further Education – Meet with Local Education establishments to discuss engagement to support the project charter</p>	<p>Sept 2021 (Already Developed beginning to test)</p> <p>End Nov 2021 (Concept being discussed)</p> <p>Early 2022</p>
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>DWP – Begin first Team to Team, engage dedicated adviser, arrange webinars direct & referral system</p> <p>Locality – Further details to progress from meeting with Locality Managers</p> <p>Start up fund for Parents out of work or in work poverty - Further development to come from the initial meeting</p> <p>Further Education – Develop plans for engagement with students with opportunities to start a business.</p>	<p>November 2021</p> <p>End 2021</p> <p>Early 2022</p> <p>April 2022</p>
<p>Spreading Changes (Project Score 9-10)</p>	<p>DWP – Ongoing engagement between BG and DWP, webinars delivered and regular referrals</p> <p>Locality – Further details following initial meeting</p> <p>Further Funding Applications – Young Persons Seed Fund Start-up fund for people out of work or in work poverty</p> <p>Further Education – Further details following initial meeting</p>	<p>April 2022</p> <p>August 2022</p> <p>April 2022 (Funding Dependant)</p> <p>April 2022 (Funding Dependant)</p> <p>August 2022</p>

5.1 Staff Confidence in Supporting Children's Mental Health (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase to 80%, the number of staff who feel confident about how to directly support, or refer a child for support, and signpost to appropriate services by 2022	
Project Manager	Lauren Mackie, ACC	
	Training undertaken: CPA QI Practitioners Programme and signed up for Bootcamp for a refresh.	
Reviewed by:	Michelle Cochlan	
Date:	07/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	
2. Is there a sound business case explaining why the project is important?	Yes	Focus on the importance of school staff having a role in supporting children's mental health following the covid-19 pandemic.
3. Have connections to Locality Plans been made and reflected?	Yes	North, South and Central Locality Plans
4. Is it likely that the changes being tested will achieve the aim?	Yes	Clear change ideas aimed at upskilling staff in dealing with mental health and wellbeing issues and encouraging young people to seek support
5. Will the measures demonstrate whether a change is an improvement?	Yes	Measures are aligned to the aim of the project and key change ideas.
6. Is a location/Test Group identified?	Yes	
7. Have additional resources needed to implement the change ideas been considered?	Yes	No additional resources required at this stage.
8. Is there a mix of partners involved in this project?	Yes	
9. Clear outline project plan?	Yes	Yes
CPA Management Group/ Board Ready? Yes		

<p>Improvement Project Title Staff Confidence in Supporting Children’s Mental Health</p>
<p>Executive Sponsor Graeme Simpson, Chair of Children’s Services Board Tracy Davis, Chair of Children’s Mental Health Group</p>
<p>Project Lead Name: Lauren Mackie Job Role & Organisation: Health Improvement Officer (Schools) - ACC Email Address: lamackie@aberdeencity.gov.uk</p>
<p>Aim statement Increase to 80%, the number of staff who feel confident about how to directly support, or refer a child for support, and signpost to appropriate services by 2022</p>
<p>Link to Local Outcome Improvement Plan Stretch Outcome 5. 90% of Children and young people will report that their experiences of mental health and wellbeing have been listened to by 2026.</p>
<p>Link to Locality Plans North, South and Central Locality Plans identify community ideas or improvement for this project.</p>
<p>Why this is important and issues with the current system? The volume of children accessing support from guidance staff is far greater than pre-COVID and the seriousness of concerns has increased. This includes a rise in concerns of suicide, self-harm, eating disorders and substance use. Guidance staff are concerned about young people’s mental health more now than ever. School counselling lists are very full and young people are being placed on long waiting lists. Young people say that they are not aware of support services that are running or how to access these.</p> <p>All staff based in schools have a role to play in directly supporting, referring or signposting children and young people to appropriate mental health and wellbeing supports or services. Staff must be given the appropriate training opportunities and resources to be confident in their role. Those directly supporting children and young people with more serious mental health concerns need to be supported in their roles to deliver safe, high-quality, evidence-based, relational approaches while maintaining their own resilience and wellbeing</p> <p>Staff in schools will have different levels of knowledge and awareness of how and where to signpost children and young people. To ensure consistency, staff must have easy access to information/resources to help signposting and/or referral of children and young people to relevant local and national supports and services.</p>
<p>Measures</p> <p>Outcome measures Using a scale of 1-10 -</p> <ul style="list-style-type: none"> • Average rating of staff who feel confident to signpost or refer children and young people to internal school supports • Average rating of staff who feel confident that they can support children and young people’s mental health and wellbeing consistent with their role

Process measures

- Number of guidance staff engaging with 1:1 supervision
- Percentage attendance at 1:1 supervision
- Percentage of wellbeing plans completed
- Number of practitioners using the signposting framework
- Percentage of practitioners reporting that the signposting framework is useful
- Percentage of staff who have undertaken e-learning

Balancing measures

Staff Wellbeing - using a scale of 1-10 -

- Average rating of staff who feel staff health and wellbeing is prioritised in their school setting
- Average rating of staff who feel comfortable to raise and discuss their own mental health and wellbeing with a member of the Extended Leadership Team
- Percentage of staff who report their wellbeing has improved

Change ideas

- Wellbeing Toolkits – each pupil will have a personalised plan to help them proactively manage their mental health and have strategies in place for when things are more difficult for them. Aims of the project:
 - Increased focus on and support for staff wellbeing
 - Increased awareness in pupils of their own mental health and what keeps them well (this should also lead to increased resilience)
 - Creation of a school community where there is a common language and understanding of wellbeing and its importance
 - Increased staff confidence in having conversations around wellbeing and signposting and/or referring to other supports where relevant
 - Smoother transitions for pupils to and from specialist services when they are required due to a degree of the ‘baseline’ work being already in place
- Monthly drop-in group supervision:
 - allows professionals to share, normalise and develop positive working relationships through shared experiences
 - normalises experiences and gives a shared and supportive response
 - helps understand themes that may then inform strategic development
 - provides access to the combined knowledge of the group itself and the knowledge and skills of an experienced supervisor who facilitates the session
 - provides an opportunity to compare approaches and experiences with others, helping benchmark skills and behaviours
- 1:1 Supervision for guidance staff:
 - Dedicated one to one supervision means that work can be examined closely, and sessions are relevant to the experience of the supervisee.
 - the supervisor has no management responsibility. The supervisor is responsible for developing a safe, supportive and reflective space that enables the supervisee to explore thoughts, feelings and responses to work based experiences.
- Develop a signposting framework for practitioners to support children, young people and their families. Including national and local agencies/organisations/services. Based on the Mapping of Services undertaken by Jo Aitken and Fiona Cameron.
- Whole school e-learning to ensure practitioners are confident in their role in directly supporting, signposting or referring pupils e.g. SAMH e-learning for secondary schools,

<p>NES C+YP e-learning, Education Scotland Children and Young People’s Mental Health Professional Learning Resource</p> <ul style="list-style-type: none"> • Deliver or support training/ e-learning to the wider community e.g. NES C+YP e-learning or national trauma training programme, Education Scotland Children and Young People’s Mental Health Professional Learning Resource 																	
<p>Location/Test Group Secondary Schools</p>																	
<p>Resources N/A at this time</p>																	
<p>Potential risks and/or barriers to success & actions to address these Continuity of staff in schools Capacity within schools to take on new interventions</p>																	
<p>Project Team Lauren Mackie – Health Improvement Officer (Schools) - ACC Lydia Tait – Education Support Officer - ACC Louise Penfold – Suicide Prevention Development Officer - SAMH Francesca Read – Assistant Support Manager - Penumbra Natalie O’Young – School Nurse Team Lead - ACHSCP Craig Singer – Youth Work and Wider Achievement Manager - ACC Jo Aitken – Project Lead; Fit Like Hubs - ACC Rachel Thompson – Health Improvement Officer (Children and Young People) - ACHSCP Gemma Gilchrist – Educational Psychologist - ACC Elaine Thomson – Head Teacher; Orchard Brae School – ACC Jodi Drummond – District Nurse, North Locality - NHSG</p>																	
<p>Community Ideas for Improvement Evaluation/Status</p> <table border="1"> <thead> <tr> <th>Community Ideas for Improvement</th> <th>Evaluation Rationale</th> </tr> </thead> <tbody> <tr> <td>North Locality</td> <td></td> </tr> <tr> <td>Training for staff in understanding ASD and how to support families.</td> <td>Share with the Autism Outreach Service who deliver training and support to education staff.</td> </tr> <tr> <td>Training to support anxiety in young people.</td> <td>Schools across the city are being trained in ‘Let’s Introduce Anxiety Management’ (LIAM). All school nurses have been trained in this intervention.</td> </tr> <tr> <td>Identify who would benefit from training locally and advertise widely, i.e., uniformed organisations, community centres, volunteers, youth clubs, etc.</td> <td>See change idea – ‘Deliver or support training/ e-learning to the wider community’ Project team will explore this idea further with community connector.</td> </tr> <tr> <td>Ensure information is readily available to support parents.</td> <td>See change idea - ‘Develop a signposting framework for practitioners to support children, young people and their families.’</td> </tr> <tr> <td>Provide support to ensure that people understand the process for referral and who to contact.</td> <td>See change idea – ‘Wellbeing Toolkit’</td> </tr> <tr> <td>Youth hub to support young people to develop life skills and confidence in their ability and deal</td> <td>Fit Like Hubs are delivering on this.</td> </tr> </tbody> </table>		Community Ideas for Improvement	Evaluation Rationale	North Locality		Training for staff in understanding ASD and how to support families.	Share with the Autism Outreach Service who deliver training and support to education staff.	Training to support anxiety in young people.	Schools across the city are being trained in ‘Let’s Introduce Anxiety Management’ (LIAM). All school nurses have been trained in this intervention.	Identify who would benefit from training locally and advertise widely, i.e., uniformed organisations, community centres, volunteers, youth clubs, etc.	See change idea – ‘Deliver or support training/ e-learning to the wider community’ Project team will explore this idea further with community connector.	Ensure information is readily available to support parents.	See change idea - ‘Develop a signposting framework for practitioners to support children, young people and their families.’	Provide support to ensure that people understand the process for referral and who to contact.	See change idea – ‘Wellbeing Toolkit’	Youth hub to support young people to develop life skills and confidence in their ability and deal	Fit Like Hubs are delivering on this.
Community Ideas for Improvement	Evaluation Rationale																
North Locality																	
Training for staff in understanding ASD and how to support families.	Share with the Autism Outreach Service who deliver training and support to education staff.																
Training to support anxiety in young people.	Schools across the city are being trained in ‘Let’s Introduce Anxiety Management’ (LIAM). All school nurses have been trained in this intervention.																
Identify who would benefit from training locally and advertise widely, i.e., uniformed organisations, community centres, volunteers, youth clubs, etc.	See change idea – ‘Deliver or support training/ e-learning to the wider community’ Project team will explore this idea further with community connector.																
Ensure information is readily available to support parents.	See change idea - ‘Develop a signposting framework for practitioners to support children, young people and their families.’																
Provide support to ensure that people understand the process for referral and who to contact.	See change idea – ‘Wellbeing Toolkit’																
Youth hub to support young people to develop life skills and confidence in their ability and deal	Fit Like Hubs are delivering on this.																

with any issues affecting their wellbeing.	
Share practice amongst organisations about being a Trauma-Informa workplace.	All schools are currently undertaking 'Connected and Compassionate Communities' training which is a trauma-based training resource from Education Scotland. See change idea – 'Deliver or support training/ e-learning to the wider community'
Promote MindU mental health recovery support programme aimed at ages 12-25.	More appropriate for Project Aim 'Increase by 80% the use of digital wellbeing resources for children and young people's mental health and wellbeing by 2022'
South Locality	
Promote and embed MEOC /Teachback with staff and services supporting children and families.	The 'Wellbeing Toolkit' will be the approach taken to have MEOC style conversations.
Central Locality	
Ensure staff are aware at a local level of services available to support young people's mental wellbeing.	See change idea - 'Develop a signposting framework for practitioners to support children, young people and their families.'
Explore counselling in communities.	Project team will explore this idea further with community connector.
Raise awareness of counselling support from 3rd sector.	This will form part of change idea - 'Develop a signposting framework for practitioners to support children, young people and their families.'
Increase awareness/confidence in professionals signposting people – MEOC approach.	The 'Wellbeing Toolkit' will be the approach taken to have MEOC style conversations.

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	• Draft Project Charter developed	October 2021
	• Project team formed • Gathering and understanding baseline data	October 2021
Designing and Testing Changes (Project Score 4-7)	• Charter to CPA Board	November 2021
	• Change ideas developed further, measurement plans established and initial PDSAs planned • Begin testing changes	November 2021 November 2021
Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)	Agree which change ideas are proven to work and seek to embed these	June 2022
Spreading Changes (Project Score 9-10)	Spread successful change ideas across secondary schools	March 2023

This page is intentionally left blank

Charter 5.2 Digital wellbeing resources (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase by 80% the use of digital wellbeing resources for children and young people's mental health and wellbeing by 2022.	
Project Manager	Tracy Davis, NHSG	
	Training undertaken: Signed up for MFI Bootcamp in November.	
Reviewed by:	Michelle Cochlan	
Date:	07/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	
2. Is there a sound business case explaining why the project is important?	Yes	Tracy to insert data.
3. Have connections to Locality Plans been made and reflected?	Yes	North and Central.
4. Is it likely that the changes being tested will achieve the aim?	Yes	It is clear what the areas for improvement and the specific change ideas which will be tested.
5. Will the measures demonstrate whether a change is an improvement?	Yes	The measures are aligned to the outcome of the project and the change ideas.
6. Is a location/Test Group identified?	Yes	Testing will begin in the North Locality.
7. Have additional resources needed to implement the change ideas been considered?	Yes	No additional resources required at this stage.
8. Is there a mix of partners involved in this project?	Yes	Some names still to be confirmed.
9. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

Improvement Project Title	
Digital wellbeing resources	
Executive Sponsor	
Graeme Simpson, Chair of Children’s Services Board Tracy Davis, Chair of Children’s Mental Health Group	
Project Lead	
Name:	Tracy Davis, Children and Young Peoples Mental Health and Wellbeing Group (Chair)
Job Role & Organisation:	Child Health Commissioner, NHS Grampian
Email Address:	tracy.davis12@nhs.scot
Aim statement	
Increase by 80% the use of digital wellbeing resources for children and young people’s mental health and wellbeing by 2022.	
Link to Local Outcome Improvement Plan	
Stretch Outcome 5. 90% of Children and young people will report that their experiences of mental health and wellbeing have been listened to by 2026. This is reflected in interactions, activities, supports and services.	
Link to Locality Plans	
Community ideas for testing identified in North and Central Locality Plan.	
Why this is important and issues with the current system?	
<p>Even before the COVID-19 pandemic, poor mental health in late childhood and adolescence was a substantial disease burden across Europe¹. The psychological impact of the pandemic and constraints of lockdown increase the risk of long-term impacts on their development and related physical and mental health, in combination with reduced resources to mitigate against these.</p> <p>Timely, effective interventions can offset the impact of adversity and restore children to a healthy developmental trajectory and improve their life chances. Primary prevention, early intervention and access to mental health and wellbeing support, in a variety of forms, across the continuum is essential.</p> <p>Lockdowns and Public Health measures to limit the spread of infection has resulted in adapted means of providing support to children, young people and families. School-based staff reported an increase in the number and complexities of mental health and wellbeing concerns being experienced by pupils in 2020. It was challenging to provide adequate support for all young people at a universal level when the team around the child were working to differing models of delivery. Professionals report feeling isolated and vulnerable in trying to manage the increasing mental health and wellbeing concerns.</p> <p>Data to be inserted.</p>	

¹ World Health Organization. Adolescent Health and Development in the WHO European Region: Can we do better? 2019; Available at: <https://www.euro.who.int/en/health-topics/Life-stages/child-and-adolescenthealth/publications/2019/adolescent-health-and-development-in-the-who-european-region-can-we-do-better2019>

Measures

Outcome measures

- No. of visits to digital wellbeing resources for children and young people's mental health and wellbeing
- Number of evaluated and trusted digital resources promoted by CPA partners across Aberdeen
- Number of children, young people and families that know where to access trusted resources
- Number of children, young people and families who report feeling confident in the digital support available to them

Process measures

- Number of children, young people and families who report a benefit to accessing specific digital resources
- Number of staff who feel confident signposting to trusted digital resources
- % of themes identified via survey with suitable digital content accessible online
- No. of opportunities for young people to access support through digital platforms
- No. of experiences of children, young people and families shared

Balancing measures

- Cyber safety incidents and eating disorder incidents to track any unintended consequences of increasing access to digital content.
- Number of children and young people accessing/utilising digital support only

Change ideas

- Promotion of digital counselling services through inclusion of articles and signposting in digital and paper communications
- Using Peer Support Network Events to raise staff awareness of digital support and tools to increase mental health and wellbeing
- Increase opportunities for young people to access support available through Educational Psychology Hub, Digital Learning Hub, development of a Pupil Support Hub, and the use of Near Me
- Increase digital content based around key themes identified in survey. Initial content to focus on eating disorders, OCD.
- Working with group of young people to develop messages for their peers around digital safety to be shared on social media platforms and promote on-line safety 'tips and tools'
- Capture and share positive experiences of children, young people and families using digital support to promote confidence of others via social media and digital platforms

Location/Test Group

North locality – we will engage with children, young people and families in the North ASG enabling them to participate and inform the detail of the change ideas

Resources

None at this time.

Potential risks and/or barriers to success & actions to address these

Ensuring that digital support is considered to be a valid source of meaningful support and not just an alternative to face-to-face support. As well as analytics measuring

quantitative access to resources, we will develop qualitative measures to understand user experience and perception.

Digital Inclusion – children and young people will have access to devices and Wi-Fi at school, but they may not have the time, space and privacy to utilise digital supports for mental health and wellbeing. When seeking to understand the experiences of children and young people we will enquire about ‘access’ take a person-centred approach to any identified barriers. Families may not have access to devices or Wi-Fi at home, they may have limited digital literacy skills, or they may not have a secure and private space to use.

Balancing the promotion of trusted digital support with digital safety. Using the same platforms and methods as to promote digital supports, we will also promote awareness of cyber-safety, ‘tips and tools’ and ‘what to do if you feel unsafe online’. We will continue to monitor cyber-crime as it relates to children and young people, in order to respond appropriately.

Project Team

Tracy Davis, Child Health Commissioner (NHSG)
 Lauren Mackie, Health Improvement Officer – Schools (ACC)
 Natalie O’Young, School Nursing Team Leader (ACHSCP)
 Amanda Farquharson, Digital Lead, CAMHS (ACHSCP)
 Jennifer MacRae, Primary Care Link Worker (SAMH)
 Police – TBC
 Community Media – TBC
 Cybersafe - TBC

Community Ideas for Improvement Evaluation/Status

Community Ideas for Improvement	Evaluation Rationale
North Locality	
Promote and increase a range of online wellbeing sessions for children and young people.	This community idea will be tested as part of this project.
Use community media platforms as a way for young people to share their views on mental health and wellbeing.	This community idea will be tested as part of this project.
Central Locality	
Increase in awareness of digital resources to support mental wellbeing	This community idea will be tested as part of this project.

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Gathering and mapping existing resources Develop qualitative surveys to ascertain baseline intelligence – CYP&F and professionals	By September 2021 By October 2021 By October 2021

	Determine quantitative data set based on analytics	
Designing and Testing Changes (Project Score 4-7)	Charter to CPA Board	October 2021
	Survey of 100 primary and 100 secondary pupils in North ASG re: awareness of available resources and current confidence levels	January 2022
	Survey of 50 staff (school-based education and health) in North ASG re: awareness of available resources and current confidence levels.	January 2022
	Identify platforms for promotion/ awareness raising and develop communication strategy.	February 2022
	Review of process measures to ensure on track to achieve aim Begin testing change ideas	February 2022 February 2022
Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)	Assessing impact and upscaling where impact is evidenced	August 2022
	Seek to embed change ideas that are improving outcomes	October 2022
	Continue to monitor and scope evolving digital opportunities	Ongoing
Spreading Changes (Project Score 9-10)	Expand successful change ideas across Aberdeen City	October 2022

This page is intentionally left blank

Charter 7.2 Increase sustained positive destinations for vulnerable learners (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase the number of vulnerable learners entering a positive and sustained destination by 7% by 2023	
Project Manager	Leona McDermid, Aberdeen Foyer	
	Training undertaken: CPA QI Practitioners Programme	
Reviewed by:	Michelle Cochlan	
Date:	07/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	
2. Is there a sound business case explaining why the project is important?	Yes	Provides clarity that project will target young people living in priority neighbourhoods and young people with identified additional support needs and complex additional support needs.
3. Have connections to Locality Plans been made and reflected?	Yes	North and South.
4. Is it likely that the changes being tested will achieve the aim?	Yes	An examination of the current system has led the project team to identifying these change ideas to address known issues. Whilst there are many factors which will impact on the achievement of this aim, the change ideas presented in this charter seem likely to lead to improvement to the current system.
5. Will the measures demonstrate whether a change is an improvement?	Yes	
6. Is a location/Test Group identified?	Yes	
7. Have additional resources needed to implement the change ideas been considered?	Yes	DYW Coordinator has access to a small fund for delivery of wider DYW events/activities in the school
8. Is there a mix of partners involved in this project?	Yes	
9. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

Improvement Project Title

Increase sustained positive destinations for vulnerable learners

Executive Sponsor

Graeme Simpson, Chair of Children's Services Board

Eleanor Sheppard, Chair of Attainment and Transitions Group

Project Lead**Name:** Leona McDermid**Job Role & Organisation:** CEO Aberdeen Foyer**Email Address:** leonam@aberdeenfoyer.com**Aim statement**

Increase the number of vulnerable learners entering a positive and sustained destination by 7% by 2023

Link to Local Outcome Improvement Plan

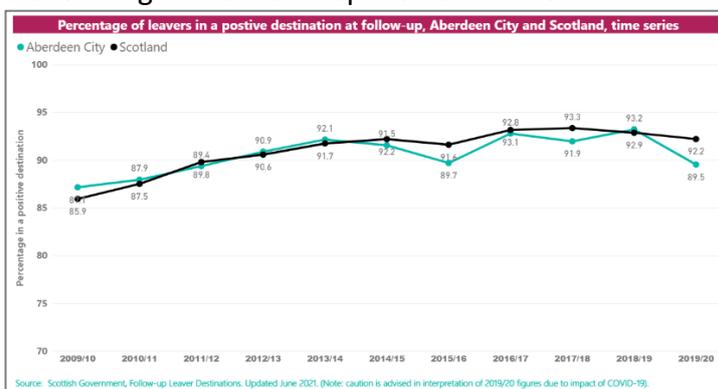
Stretch Outcome 7. 95% of all our children, including those living in our priority neighbourhoods, will sustain a positive destination upon leaving school by 2026.

Link to Locality Plans

Community ideas for improvement from the North and South Locality Plans have been aligned to this aim

Why this is important and issues with the current system?

The percentage of young people in positive destinations 9 months post school leaving date in Aberdeen City has been persistently at or below the national average for the last 6 years and during 2019/20 fell to one of the lowest in Scotland (which could be strongly attributed to lack of jobs at the time due to the pandemic). This drops even further for those living in the most deprived SIMD areas.



The data for the percentage of school leavers in positive destinations at follow up by SIMD areas would indicate that there has been an ongoing challenge over the past 6 years with those young people from the 20% SIMD areas having significantly lower positive destination rates. (SDS data below).

Percentage of School Leavers in Positive Destinations (follow up), Aberdeen City			
Year	0-20% (most deprived)	80 -100% (least deprived)	Variance
19/20	82.3	93.8	11.5
18/19	88.1	97.5	9.4
17/18	80.0	97.0	17
16/17	84.5	97.6	13.1
15/16	83.4	96.1	12.7
14/15	86.8	96.7	9.9

Work is ongoing to support term time leavers not in destinations through Skills Development Scotland and partners. This project seeks to increase the percentage of

young people entering a positive and sustained destination by focussing on our most vulnerable learners. For the purpose of this project, vulnerable learners has been defined to include young people:

1. at risk of not achieving positive destinations and/or term time leavers living in priority neighbourhoods
2. with identified additional support needs and complex additional support needs

1. Young people with living in priority neighbourhoods

We know that there is a strong correlation between poverty, health inequalities and attainment and is cited as a key priority to close the attainment gap in the National Improvement Framework (NIF). During the pandemic there has been variation in the learning experience of young people, and there is a risk that this will exacerbate the poverty-related attainment gap. Finding ways of improving how we identify and meet support needs for young people and their families and carers earlier and improving their capacity to access positive learner pathways and other resources particularly for those in priority neighbourhoods will be critical to increasing the sustained positive destination rates for all young people in Aberdeen City. A list of these priority neighbourhoods is available at <https://communityplanningaberdeen.org.uk/localities/>

2. Additional support needs and complex additional support needs

Education authorities in Scotland have a legal obligation to ‘identify, review and provide the additional support needs of their pupils’¹. Additional support needs are partly defined and refer to support without which a young person would be unable to benefit from school education provided². This legislation places significant responsibility on schools to identify which pupils need support. Furthermore, pupils must be identified at an early stage for the support to meet its aim of allowing the young person to benefit from school education.

It is difficult to accurately assess how many young people are not being identified as having additional support needs, however poor outcomes such as homelessness, exclusion and early school leaving suggest missed opportunities to offer support in a timely manner to avert crisis at a later stage:

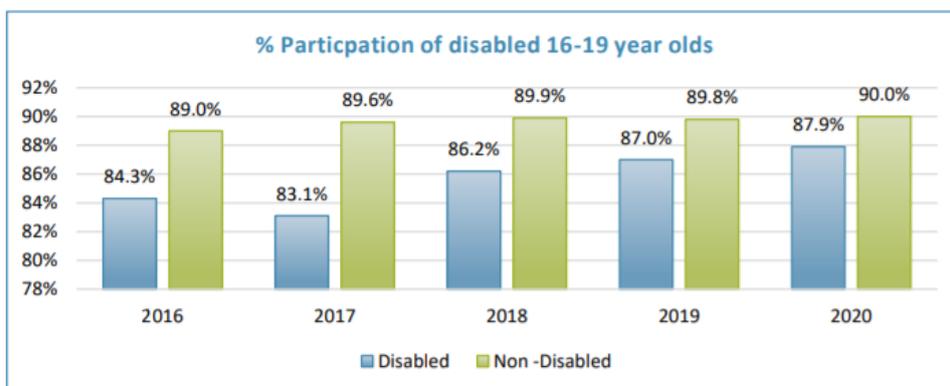
- In 2020/2021 69 young people aged 16-17 presented as homeless in Aberdeen.
- In 2018/2019 1221 young people were excluded from school.
- In 2019/2020 35.2% of Winter Leavers did not move into a positive destination

The above indicates that a significant number of young people in Aberdeen have support needs that may not be being identified early enough for support to be effective or are not identified at all that could have an impact on their ability to move towards and into a positive destination. Feedback from young people whilst developing the Project Charter also suggests the identification of those needing support could be strengthened.

Research carried out with Orchard Brae School suggests that there a number of improvements which could be made to ensure there is a reliable support system in place for those with Complex and Additional Support Needs leaving school. For example, more effective planning meetings, support for young people who face barriers (support workers and transport), more accurate recording of data, process for identifying choices,

resource allocation, information to parents and clarity of process for those young people who want to leave school earlier, and role of the Transition team.

Another area of focus may be young people with disabilities. National participation measures show a lower percentage of young people with disabilities in positive destinations compared with young people without disabilities.



Source: Skills Development Scotland: Annual Participation Measure [76]

Locally, data is collected through Orchard Brae on leaving school and is harder to track after 9 months. Further work is required to identify data sources from other areas and from adult services and to map the definitions used, e.g. SDS have more recently introduced Personal/Social/Health destination. A test of change to improve data collection (consistency and definitions) would also allow the impact of any other interventions to be more robustly assessed.

Measures

Outcome measures

- % of young people from priority localities entering and sustaining a positive destination
- % of young people with complex and additional support needs in sustained positive destinations (9 months post school leaving date)
- % of students who were under 18 upon starting at NESCOL completing their course

Process measures

- Number of young people participating in Upstream screening
 - Student Attendance rates of young people identified as needing support through Upstream screening.
 - Numbers accessing student support
 - Number of working days between young person being identified through survey and accessing support
- Key Stakeholders report increase in understanding of each other's roles (measure at beginning and end of development sessions)

Change ideas

- Use of the [Upstream](#) survey tool to identify youth led ideas for change. The survey will be tested with an initial cohort of 300 young people under 18 years attending North East Scotland College's Altens campus to identify risk (Homelessness, wellbeing, engagement, resilience) which will help ensure the right support provision at the right time, enhancing these young people's ability to sustain their positive destination in college.

- Mapping of existing support services is up to date and use of the data generated will direct support as appropriate.
- A new improved system for data capture to support improved monitoring of the initial and sustained positive destination rate of young people with disabilities
- Clear process for supporting young people leaving school, with defined roles and responsibilities agreed and communicated to staff

Location/Test Group

Vulnerable learners city wide, with initial testing taking place with:

- NESCOL Altens campus, young people on Further Education courses aged under 18
- Orchard Brae pupils in their penultimate year

Resources

NESCOL Student Support service

Data expertise

Facilitation of key stakeholder sessions

DYW Coordinator has access to a small fund for delivery of wider DYW events/activities in the school

Potential risks and/or barriers to success & actions to address these

Across the City, there have been significant action around improving young people’s outcomes following the pandemic. The introduction of Fit Like hubs has promoted collaborative working through grouping services together to support children and young people’s mental wellbeing. The Young Person’s Guarantee has committed to creating thousands of training, job, and apprenticeship opportunities. Developing Young Workforce school coordinators are all in place to prepare young people for the world of work and connect them with employers. A Skills framework is in development around meta-skills and to support parents with skills development at home. Finally, there have been improvements to learner pathways including Lift Off events to launch pupils’ career aspirations and further development work around learner pathways. With additional funding and resources in place there is a potentially crowded space in terms of provision and time required for the new approaches to be applied in practice. Schools in priority areas fed back that they have no capacity to use Upstream at this point in time and therefore the project will work only with NESCOL initially.

North East Scotland College (NESCOL) noted existing challenges in identifying and connecting with students in need of support. NESCOL have found that whilst their Altens campus has the lowest number of students accessing support, this campus also has the lowest attainment level, indicating a disparity in effectively connecting student to the support resources. It could indicate that students who would benefit from support are not doing so and Upstream would provide a means of identifying those students and being able to offer support that could lead to improved attainment levels. Further education was the most common destination upon leaving school for young people from the most deprived SIMD quintile in 2019/20¹ which is also reflected in those attending the Altens campus.

¹

[Summary Statistics for Attainment and Initial Leaver Destinations, No.3 2021 Edition – Supplementary Tables](#)

Project Team

Project Manager: Leona McDermid (Aberdeen Foyer)

Data Manager: Nicola Graham (SDS)

Experts/Practitioners:

Allison Horne (ACC),

Mary Holland (DYW),

Angela Taylor (ACC), Lori Manson (ACC – Employability Team)

Elaine Thomson (HT Orchard Brae), Derek Thomson (DHT Bucksburn), Claire Russell (Head of Secondary, Orchard Brae)

Kay Johnson (ACHSCP – Transitions Team)

Margo Milne - DYW Employer School Coordinator Orchard Brae

young people, parents, carers

Ruth Bell (SDS)

Robin McGregor (NESCOL), Alesia Du Plessis (NESCOL)

Community Ideas for Improvement Evaluation/Status

Community Ideas for Improvement	Evaluation Rationale
North Locality	
Map what is already going on to support vulnerable young people	Being undertaken as part of this project.
Build on models such as men's shed and AMPED Build on test with Hazlehead Academy and Mastrick Community Centre	Project team is seeking a community connector to explore these ideas further.
South Locality	
Pilot programme with vulnerable young people at Camphill	Project team is seeking a community connector to explore this idea further.
Identify and develop actions to address the mental wellbeing (and practical) needs of those young people whose transition from school has been adversely affected by the pandemic	Across the City, there have been significant action around improving young people's outcomes following the pandemic. The introduction of Fit Like hubs has promoted collaborative working through grouping services together to support children and young people's mental wellbeing.

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project score 1-3)	• Project Team to meet and schedule planning and design time, invite in others	Complete
	• Check data sources and confirm data sharing arrangements (changes to SDS Data Hub sources)	Complete
	• Agree and set up shared space for comms, development work as appropriate	Complete
	• Review existing intervention/systems in place to avoid duplication.	Complete
	• Any change ideas must be informed by lived experience as well as data.	Complete
	• Undertake a driver diagram to identify change ideas.	Complete
	• Agree who will lead on each change idea	Complete

	<ul style="list-style-type: none"> • Charter submitted to CS Board for approval 	Oct 21
Designing and testing change (Project Score 4-7)	<ul style="list-style-type: none"> • Facilitate purchase of Upstream survey tool with Cardiff University and NESCOL • Pilot implementation of survey tool and analysis of data • Track access and use of support • Facilitate Development Sessions with Key Stakeholders • Prototype change ideas with working group including young people and their parents/carers. • Need to take into account changes as a result of No one Left Behind policy changes to employability, DYW review, FA's, senior phase, YPG • Engagements in and with local communities to support and add value to the change ideas 	By Dec 21
Implementing and sustaining changes that demonstrate improvement (Project Score 4-7)	<p>The successful elements of the change ideas would be tested and PDSA cycle engaged to continue improvements. Would need engagement, support and understanding of schools, young people and their families/carers. Changes to data recording and use of data to aid coordination and development of solutions with young people enabling a city wide approach through improved data sharing.</p> <p>Engagements in and with local communities to support and add value to the change ideas</p>	By June 22
Spreading changes (Project Score 9-10)	<p>Shift resource to earlier interventions Aim achieved.</p>	By June 23

This page is intentionally left blank

8.2 Child Friendly Cities Training Programme (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase to 100% of staff working directly and indirectly with children who have received child friendly city training by 2023	
Project Manager	Jade Leyden, ACC	
	Training undertaken: CPA QI Practitioners Programme	
Reviewed by:	Michelle Cochlan	
Date:	07/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	
2. Is there a sound business case explaining why the project is important?	Yes	Highlights issues with current uptake of the training and the importance of increasing staff awareness of what they can do to be a child friendly city
3. Have connections to Locality Plans been made and reflected?	Yes	N/A
4. Is it likely that the changes being tested will achieve the aim?	Yes	Clear understanding of the current issues which prevent uptake of training and some simple ideas of how to effect change.
5. Will the measures demonstrate whether a change is an improvement?	Yes	
6. Is a location/Test Group identified?	Yes	Defines priority staff groups for initial testing.
7. Have additional resources needed to implement the change ideas been considered?	Yes	Staff time only at this stage.
8. Is there a mix of partners involved in this project?	Yes	
9. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

<p>Improvement Project Title Child Friendly Cities Training Programme</p>
<p>Executive Sponsor Graeme Simpson, Chair of Children’s Services Board Tracy Davis, Vice Chair of Children’s Services Board</p>
<p>Project Lead Name: Jade Leyden Job Role & Organisation: Community Development Officer, Aberdeen City Council Email Address: jleyden@aberdeencity.gov.uk</p>
<p>Aim statement Increase to 100% of staff working directly and indirectly with children who have received child friendly city training by 2023</p>
<p>Link to Local Outcome Improvement Plan Stretch Outcome 8 - Child friendly city where all decisions which impact on children and young people are informed by them by 2026</p>
<p>Link to Locality Plans There are no community ideas associated with this project.</p>
<p>Why this is important and issues with the current system? As Aberdeen strives to become an accredited Child Friendly City, it is important for staff to have a sound understanding of the what the project is and how it relates to the work they do.</p> <p>This project will look at developing the effective delivery of:</p> <ul style="list-style-type: none"> • Information Sessions to raise awareness of the Child Friendly Cities project • Training in using a Child Rights Based Approach • Training to support completion of Integrated Impact assessments where relevant • Understanding Incorporation of Children’s Rights into Scots Law and the impact it will have on work. <p>Whilst all staff should be aware of the Child Friendly Cities (CFC) accreditation, it is of particular importance for us to train and inform all staff working both directly and indirectly with children and young (C&YP) people in the above.</p> <p><i>Existing Training Provision</i> At present, UNICEF deliver Children’s Rights Based Approach training over 2 separate sessions. All staff working directly/indirectly with C&YP must participate in this training to enable them to 1. unlock additional training available from UNICEF and 2. To use a child's rights-based approach in their practice.</p> <p>Because the training is delivered over 2 sessions, delegates often do not fully complete the training. We seek to develop the delivery of the training to enable maximum attendance and completion. In addition, the time between available training sessions is inconsistent, therefore further hindering the number and pace of staff being trained.</p>



At present, there has not been a great deal of uptake with the additional training currently on offer. You will see in the table above that a number of sessions have been cancelled due to low uptake. This project will address this by creating a suite of training that is well advertised and accessible to all staff.

The incorporation training looks at children's rights and the incorporation of these into Scots Law. The training examines and discusses both how this impacts on leaders and how it will impact more widely across the council and other public bodies.

Aims of the session are to:

To raise awareness of the United Nations Convention on the Rights of the Child (UNCRC)

- To help leaders understand how the incorporation of the UNCRC will impact the work of their teams
- To ensure we are well placed for the incorporation of the UNCRC

At present, this has been delivered to ECMT, the Leadership Forum and ACHSCP and a copy of the training has been recorded and is available to view on Microsoft Stream. At present, this video only has 10 views.

Looking Forward

In addition to the above provision, we would like to include a Child Firendly Cities Information Session alongside a session and materials to provide support and guidance to staff in completing Integrated Impact Assessments.

Participation in the full suite of training will enable staff to:

- Be aware of the CFC project and share opportunities with relevant stakeholders
- Ensure they are working to best practice guidance and taking a children's rights-based approach
- Ensure their work is compatible with UNCRC requirements.

In addition to the above benefits to staff and stakeholders, children and young people will also benefit from this work, as it will see increased and consistent opportunities to get involved in work affecting them, from consultation and engagement in conception through to delivery.

There is not currently an offer for information sessions to raise awareness of the CFC project or for completion of Integrated Impact Assessments so these do not have a baseline however we will measure whether there has been an increase in activity through awareness raising and of completed Integrated Impact assessments.

Defining the Target Group

The term 'staff' in this charter is defined as staff from key stakeholders within the Child Friendly Cities project:

- Aberdeen City Council - Chief officers for all relevant clusters within the council to cascade information to staff teams and encourage participation
- NHS Grampian/Health and Social Care Partnership - Only staff with a remit in decision making that has a direct or indirect impact on children and young people
- Police Scotland - numbers defined by Police Scotland's CFC Workforce Plan.

The suite of training will be available to other partner organisations too and will be counted as a balancing measure. In addition, we will look to provide training sessions with the same content but tailored specifically to internal/external media staff and for elected members.

Organisation	Approximate no. of Staff
Aberdeen City Council	8,000 staff members (these may not all be counted as they may not all have direct/indirect involvement with C&YP)
Police Scotland (Grampian)	30 staff members
NHS Grampian/HSCP	2,500 staff members

Measures

Outcome measures

- % of relevant staff participating in available training

Process measures

- No. of training sessions available
- Time between training sessions
- No of training sessions delivered
- No. of clusters promoting training opportunities to staff teams
- (Increased) youth activity because of awareness raising

Balancing measures

- No. of additional stakeholders participating in the training/CFC project and subsequently sharing information
- Completion rate of Integrated Impact Assessment

Change ideas

1. To develop a suite of training to cover:
 - CFC Awareness Raising
 - Incorporation/Integrated Impact Assessment completion
 - Taking a Childs Rights Based Approach

<p>2. Increase the frequency & advertisement of training:</p> <ul style="list-style-type: none"> • Create a timetable/calendar of training events • Better advertise training opps via ACC & relevant stakeholders • develop section of CPA website with further information/access to training opportunities • Ask Management to promote training opportunities to staff teams. 		
<p>Location/Test Group</p> <ul style="list-style-type: none"> • ACC Staff, AHSCP & Police Scotland • CPA Stakeholders • Third Sector organisations 		
<p>Resources</p> <ul style="list-style-type: none"> • NESCOL staff and students time to support the design and development of virtually assessable training • Use of UNICEF staffing resources for some of the training delivery • Staff time to complete training 		
<p>Potential risks and/or barriers to success & actions to address these</p> <ul style="list-style-type: none"> • UNICEF have a robust training programme in place- there may be hesitation to be flexible with the delivery method, • NESCOLs ability to work to a reasonably specific brief – may need to seek support from ACC media and comms if NESCOL cannot meet demands 		
<p>Project Team Jade Leyden, Community Development Officer - Project Lead Sarah Handley, UNICEF Officer – CFC Subject Matter Expert NESCOL Staff & Students – design and development support CFC Partnership Group – support with awareness raising/uptake of training</p>		
<p>Community Ideas for Improvement Evaluation/Status No community ideas are associated with this project.</p>		
<p>Outline Project Plan</p>		
Project Stage	Actions	Timescale
<p>Getting Started (Project Score 1-3)</p>	draft project charter	Project Charter draft to CS Board October 2021
	identify project team	October 2021
	Look at current system & existing data	October 2021
<p>Designing and Testing Changes (Project Score 4-7)</p>	Working with NESCOL & Young people on the design and detail for training	Nov/Dec 2021
	Testing delivery of training in new format	Testing to begin early 2022.
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	Continue deliver implemented project to all relevant staff	Mid 2022
<p>Spreading Changes (Project Score 9-10)</p>	Project End	Mid 2023

This page is intentionally left blank

Charter 8.3 Child friendly communications

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase by 50% the number of communications which are accessible to children and young people by 2023	
Project Manager	Tracy Davis, NHSG	
	Training undertaken: Signed up for MFI Bootcamp in November.	
Reviewed by:	Michelle Cochlan	
Date:	07/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	
2. Is there a sound business case explaining why the project is important?	Yes	Sets out why appropriate communications with children and young people are essential in engaging them in decision making and becoming a child friendly city.
3. Have connections to Locality Plans been made and reflected?	Yes	Central Locality Plan
4. Is it likely that the changes being tested will achieve the aim?	Yes	Execution of these change ideas seem likely to lead to improvements in the accessibility of communications by young people.
5. Will the measures demonstrate whether a change is an improvement?	Yes	Yes. Although not clear how you measure what is 'accessible'. The wording of the measure in the charter is that it will be age appropriate in format and contents. How do you decide this? Is there criteria you use or is it feedback from children and young people? Or both?
6. Is a location/Test Group identified?	Yes	Children and young people city wide
7. Have additional resources needed to implement the change ideas been considered?	Yes	None at this time.
8. Is there a mix of partners involved in this project?	Yes	
9. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Partly		

Improvement Project Title	
Child friendly communications	
Executive Sponsor	
Graham Simpson, Chair of Children’s Services Board Tracy Davis, Vice Chair of Children’s Services Board	
Project Lead	
Name:	Tracy Davis
Job Role & Organisation:	Child Health Commissioner, NHS Grampian
Email Address:	tracy.davis12@nhs.scot
Aim statement	
Increase by 50% the number of communications which are accessible to children and young people by 2023.	
Link to Local Outcome Improvement Plan	
Stretch Outcome 8. Child Friendly City where all decisions that impact on them are informed by children and young people by 2026.	
Link to Locality Plans	
Community ideas for testing identified in Central Locality Plan.	
Why this is important and issues with the current system?	
<p>Aberdeen City is endeavouring to become a UNICEF Child Friendly City. We are working hard to make sure that all children and young people in Aberdeen city can enjoy their rights through our work to achieve six UNICEF ‘badges’: Co-operation and Leadership; Communication; Child Friendly Services; Culture; Participation; and Place.</p> <p>To enable children and young people to make informed decisions and to ensure that they can enjoy their rights, we must provide information that is accessible and appropriate for their age and stage of development. We should consult with them to determine what methods and media they are most likely to engage with, and we should encourage their participation in the development of communications wherever possible.</p> <p>The United Nations Convention on the Rights of the Child (UNCRC) is the 'gold standard' across the world for children's rights. It covers all aspects of a child's life and sets out the civil, political, economic, social and cultural rights that all children everywhere are entitled to. Children and young people have the same rights as adults but they also have specific children's rights under the UNCRC that recognise their special needs so that they can develop to reach their full potential.</p> <p>The Incorporation (Scotland) Bill (2021) will make the UNCRC law in Scotland. As public authorities we must do all that we can do to make sure that children’s rights are promoted and protected. The Scottish Government held a public consultation in 2019 and over 180 children and young people contributed to helping shape what would make incorporation meaningful for them¹.</p> <p>This is what one young person said: <i>"Incorporation will mean protections that need to be guaranteed and safety for children and young people. It is easier to look at a written document that says that these are the things I should have, rather than kind of guessing what you think you should have. This is empowering for me as a young person."</i></p>	

¹ <https://www.gov.scot/publications/uncrc-consultation-analysis-report/pages/5/>

Measures

Outcome measures

- Number of communications that are age appropriate in format and contents.
- % of communications which have received positive feedback from children and young people

Process measures

- Number of methods/tools used to capture the voice of the child (including very young children and those who have verbal communication difficulties)
- Number of communications that children and young people have directly developed and designed.
- Number of communications that children and young people have been consulted on.
- Number of opportunities for children and young people to work with media teams to develop content and design.
- Number of platforms/locations where children and young people can access information that is relevant to them.
- Number of opportunities children and young people have to provide feedback on the information provided for them.

Change ideas

- Develop a communication strategy as a framework for supporting communication using the GIRFEC ladder of participation to ensure that more messaging relevant to children and young people is led and developed by them. We will work with established groups to progress this.
- Ensure active participation through continuous consultation and engagement with children and young people, including those who may find it harder to engage with mainstream communications, elected member, citizens of Aberdeen and multi-agency staff. We will use a variety of methods, such as newsletter/blog/vlogs, social media platforms, surveys, virtual events.
- Enable children and young people to engage with local media to negotiate training opportunities, and to seek support in the sharing of key messages including positive stories about children and young people. We will build relationships and 'set the scene' with partnership media teams and local public media in order to provide a scope of opportunity/ possibility for children and young people.
- Enable children and young people to communicate on issues that are important to them using public authority media platforms, such as a 'youth socials takeover'.
- Support and enable children and young people to participate in wider peer-to-peer engagement opportunities, such as 'topic of the week', blogs/vlogs, contributions to websites and social media platforms.
- Support and enable children and young people to directly influence organisational processes, such as recruitment, policy and strategy development.
- Co-produce with children and young people, a twice yearly communication by way of sharing updates on progress to become a Child Friendly City.

Location/Test Group

Children and young people

Resources		
None at this time.		
Potential risks and/or barriers to success & actions to address these		
<p>Embedding a right's based approach to communication across the partnership will require a culture shift that is likely to take some time to implement. We will continue to build on opportunities to co-produce information and materials with and for children and young people. We will celebrate examples of good practice, and we will work with children and young people to explore opportunities to promote a right's based approach that is broader than children's services.</p> <p>Our duty to uphold and further effect children's rights may be perceived as 'additional work', particularly to those service areas/ teams that don't perceive the relevance to their role. In partnership with children and young people we will co-produce a scheme that supports teams/ services to understand their responsibilities and fulfil their duties within the context of their business as usual.</p>		
Project Team		
Tracy Davis, Child Health Commissioner (NHSG) Eleanor Sheppard, ACC Matthew Reid, ACC Jade Leyden, ACC David Gault, Sport Aberdeen Neil McDonald, Police Scotland Robin McGregor, NESCOL Roma Bruce, SCRA Maggie Hepburn, ACVO Gale Beattie, ACC Claire McArthur, ACC David Dunne, ACC Rachel Thompson, Health Improvement Officer, ACC Nicola Anderson, Lead for School Nursing and Health Visiting, ACHSCP Pamela Cornwallis, Lead Speech and Language Therapist. NHSG Community Media – Dale McKinnon		
Community Ideas for Improvement Evaluation/Status		
Community Ideas for Improvement	Evaluation Rationale	
Engage with young people via their platforms and encourage participation e.g. through LEGs, PNPs	This community idea will be tested as part of this project.	
Outline Project Plan		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Communication strategy developed Overview of existing groups already enabling	By September 2021 By October 2021

	<p>participation of children and young people</p> <p>Scoping of current communication material, tools and platforms currently reflecting children and young people's participation.</p>	By October 2021
<p>Designing and Testing Changes (Project Score 4-7)</p>	<p>Charter to CPA Board</p> <p>Engage with 25 children and young people of various ages and abilities to determine their preferred communication methods, platforms and tools.</p> <p>Identify platforms for promotion/ awareness raising of the communication strategy across the partnership.</p> <p>Establish relationships with media teams to lay foundations for co-producing with children and young people.</p> <p>Review of process measures to ensure on track to achieve aim</p> <p>Begin testing change ideas</p>	<p>October 2021</p> <p>January 2022</p> <p>January 2022</p> <p>February 2022</p> <p>February 2022</p> <p>February 2022</p>
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>Assessing impact and upscaling where impact is evidenced</p> <p>Seek to embed change ideas that are improving outcomes</p> <p>Celebrate children and young people, their experiences and their stories</p>	<p>August 2022</p> <p>October 2022</p> <p>Ongoing</p>
<p>Spreading Changes (Project Score 9-10)</p>	<p>Expand successful change ideas across Aberdeen City</p>	October 2022

This page is intentionally left blank

Charter 10.6 Support for Domestic Abuse Victims (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase by 15% victims of domestic abuse receiving support by 2022.	
Project Manager	Lucy Simpson, ACC	
	Training undertaken: Virtual MFI Bootcamp	
Reviewed by:	Allison Swanson	
Date:	20/09/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP and highlight alignment to the Locality plans?	Yes	The aim aligns with the LOIP aim and with the Locality Plan.
2. Is there a sound business case explaining why the project is important?	Yes	There is a sound business case and evidence to show where there are opportunities to make improvements in the current system.
3. Have connections to Locality Plans been made and reflected?	Yes	Central.
4. Is it likely that the changes being tested will achieve the aim?	Yes	The change ideas are split into 3 areas aimed specifically at the areas in the current system where improvements could be made, awareness raising of available supports; adults (referrals from substance use services and non specialist services) and children & young people.
5. Will the measures demonstrate whether a change is an improvement?	Yes	Measures will show whether the majority of the changes are an improvement.
6. Is a location/Test Group identified?	Yes	
8. Have additional resources needed to implement the change ideas been considered?	Yes	Whole Lives Aberdeen funding available for creation of video/animation and other aspects will be delivered within existing funding streams
9. Is there a mix of partners involved in this project?	Yes	There is a good mix of partners but some names to be confirmed. Voice of lived experience being provided via Pathways. Helpful to have a rep from non specialist services.
10. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

Improvement Project Title Ensuring victims receive access to the right support.																		
Executive Sponsor Derek McGowan, Chair, Community Justice Group																		
Project Lead Lucy Simpson, Development Officer, Aberdeen City Council, lumcnicol@aberdeencity.gov.uk																		
Aim statement (as defined in LOIP) Increase by 15% victims of domestic abuse receiving support by 2022.																		
Link to Local Outcome Improvement Plan Stretch Outcome 10: 25% fewer people receiving a first ever Court conviction and 2% fewer people reconvicted within one year by 2026.																		
Link to Locality Plans This project has community ideas for improvement in the central Locality Plan.																		
Why this is important and issues with the current system <u>Wider Context</u> Domestic abuse significantly impacts people’s lives and across all sections of our communities. Domestic abuse can exist in all types of relationships between partners and ex partners, irrespective of gender, race, religion, or type of background although, as a form of gender-based violence, domestic abuse is mainly perpetrated by men against women. (Around four out of every five incidents of domestic abuse in 2017-18 had a female victim and a male accused. This proportion has remained very stable since 2011-12.) The Police and Crown Office Procurator Fiscal Service agreed definition of Domestic Abuse is - “any form of physical, verbal, sexual, psychological or financial abuse, which might amount to criminal conduct and which takes place within the context of a relationship. The relationship will be between partners (married, cohabiting, civil partnership or otherwise) or ex-partners. The abuse can be committed in the home or elsewhere including online.” All too often when people think of domestic abuse, they think of physical violence, but it is usually much more than that. It spans the entire spectrum of behaviour by perpetrators – including isolated incidents, as well as a course /pattern of conduct with both violent and non-violent abusive behaviour. Sometimes this will involve elements and tactics of coercive control, which can involve a range of behaviours designed to control and harm a victim. The below table shows the number of Incidents of Domestic Abuse recorded by Police nationally and in Aberdeen:																		
<table border="1"> <thead> <tr> <th></th> <th>Scotland</th> <th>Aberdeen</th> </tr> </thead> <tbody> <tr> <td>2013-14</td> <td>58439</td> <td>2487</td> </tr> <tr> <td>2014-15</td> <td>59882</td> <td>3088</td> </tr> <tr> <td>2015-16</td> <td>58104</td> <td>2570</td> </tr> <tr> <td>2016-17</td> <td>58810</td> <td>2522</td> </tr> <tr> <td>2017-18</td> <td>59209</td> <td>2763</td> </tr> </tbody> </table>		Scotland	Aberdeen	2013-14	58439	2487	2014-15	59882	3088	2015-16	58104	2570	2016-17	58810	2522	2017-18	59209	2763
	Scotland	Aberdeen																
2013-14	58439	2487																
2014-15	59882	3088																
2015-16	58104	2570																
2016-17	58810	2522																
2017-18	59209	2763																

2018-19	60110	2483
2019-20	62907	2566

In 2020, 2168 people reached out to or were referred to specialist support services because of domestic abuse, this accounts for 84% of recorded incidents of domestic abuse by Police. However, these statistics do not reveal the incidence of all domestic abuse committed since not all incidents are reported to the police.

In conjunction with the Scottish Crime and Justice Survey (SCJS), the statistics help to assess the extent and impact of domestic abuse in Scotland. There are various reasons for such under reporting i.e., victims experience fear and shame as common effects of domestic abuse or it may also be caused by an accused physically preventing a victim reporting the domestic abuse. This will represent as a continued challenge, as victims come to an acceptance of this behaviour as 'normal' and part of the relationship.

Increasing awareness of domestic abuse

Domestic abuse is a challenging issue to tackle because of stigma, public perception and particularly as so much of it goes unreported. Wider community awareness-raising is a fundamental component of primary prevention strategies aiming at:

- changing attitudes, behaviours and beliefs that normalise and tolerate domestic abuse among the public.
- preventing men and women from becoming victims or perpetrators of abusive relationships; and
- informing wider public and especially victims and perpetrators about the resources available to tackle the problem.

Supporting Adults who experience Domestic Abuse

Families may live with domestic abuse for a significant period before getting effective help. There are many reasons why families live with domestic abuse for a significant period or return to their abuser after attempting to leave. It may not be apparent to the victim that a relationship is abusive. They may be afraid of the abuser and fear the consequences for others if they disclose the abuse. The victim may not know where to turn for help. Research by Safe Lives found that victims are experiencing abuse for long periods before getting specialist support, despite seeking help from other agencies and attempting to leave the perpetrator. In Scotland, the average length of abuse before seeking support was 4 years compared with 3 years in England and Wales. Furthermore, a quarter of clients experienced abuse for more than 10 years before receiving support, and 10% experienced abuse for more than 18 years.

We know that domestic abuse is widespread across the city but that there is a higher preponderance of abuse in areas of deprivation and a correlation between domestic abuse and severe and multiple disadvantages. Those with substance misuse problems often experience relationships with domestic abuse. In Aberdeen, the drug related death assertive outreach taskforce has received over 240 referrals with around 80% of these referrals noting domestic abuse as prevalent in relationships. Within the substance misuse team at the Fulton clinic, out of 875 service users, only 25 female and 6 male highlighted domestic abuse as a risk factor.

Supporting Young People who experience Domestic Abuse

Young people impacted directly by domestic abuse by a partner or ex-partner continue to be the 'hidden' victims of domestic abuse, with only 1% of those aged under 18-year-old accessing support services. This is despite young people (16-19-year-olds) experiencing the highest rate of domestic abuse of any age group (Safe Young Lives, 2017).

A recent study conducted in Aberdeen with young people found that the majority young people surveyed were aware of what domestic abuse was and were confident in identifying abusive behaviours. However, most respondents were unsure of how to access domestic abuse support. Local statistics further highlights this with 244 young people (aged 16-25) seeking support from local services. This number accounts for only **11%** of those seeking domestic abuse support and only **34%** of young people who have reported domestic abuse incidents to the Police in Aberdeen. In addition, the young people that participated in the Whole Lives Aberdeen study stated that their main reason for not seeking support was 'shame'. Awareness raising around reducing the stigma of seeking support for domestic abuse will be key to ensuring that young people get the support that they need.

Links to further reading –

[Violence Against Women - Primary Prevention Guidance for Community Planning Partnerships](#)

[Whole Lives- Improving the response to Domestic Abuse in Scotland](#)

[Safe Young Lives: Young People and domestic abuse](#)

[From Boys to Men Project: Phase One Key Findings](#)

Measures

Outcome measures

- Number of victims of domestic abuse receiving support
- Number of victims aged 16-25 receiving support (currently 11% of total receiving support and 34% of total young people reporting DA)
- Number of victims who are in substance misuse services receiving domestic abuse support (rate not currently measured or recorded)

Process measures

- Number of leaflets distributed to community outlets displaying domestic abuse awareness-raising material
- Number of events raising awareness of domestic abuse in Aberdeen
- Number of community members/professionals attending events in Aberdeen
- No. of views/shares of Whole Lives animation/video
- Number of substance misuse staff attending domestic abuse training
- Number of domestic abuse champions in non-specialist services
- Number of referrals to support agencies from non-specialist services
- Number of referrals to support agencies from substance misuse services
- Number of staff working with children who attend CPC domestic abuse training

Balancing measures

- Number of referrals to support services– increase could mean organisations being overwhelmed and unable to provide support
- Number of incidents of domestic abuse reported to the Police – increase due to awareness raising

Change ideas

Awareness Raising:

- Communications Campaign aimed at raising general awareness of domestic abuse, understanding of what domestic abuse is, and reducing the stigma around seeking support.
- Develop with domestic abuse agencies, community, and professional events to be held in Aberdeen (possibly virtually) around raising awareness of domestic abuse and information sessions on what support services can offer to encourage victims to seek support earlier. Specific session to be developed for students at NESCOL.
- Awareness raising of CPC multi-agency domestic abuse training for services working with children and young people.

Access to domestic abuse services - Adults: (Central LP)

- Domestic abuse training to be delivered to substance misuse staff to increase confidence and ability to spot signs of domestic abuse and refer service users onto specialist domestic abuse services.
- Domestic Abuse Champions to be identified in non-specialist services (eg Housing, Social Work, Education, Police, SFRS) to increase awareness of domestic abuse and ability to refer service users to support.

Access to domestic abuse services – Young People:

- Awareness raising campaign to highlight where young people can access domestic abuse support – Whole Lives Aberdeen project has recommended a short animation/video be created by young people with lived experience. Use of Station House Media Unit (SHMU).
- Domestic Abuse Champions to be identified in non-specialist services (eg Youth Work Services, Social Work, Education) to increase awareness of domestic abuse and ability to refer service users to support.

Location/Test Group

Central locality

City wide for awareness raising

Young people 16-25

Adults with substance misuse problems

Non-specialist services

Resources

The Whole Lives Aberdeen project has money available to develop and create the awareness raising video for young people.

Awareness raising/training will be delivered within existing funding streams.

Project Team

Lucy McNicol (ACC Development Officer) (Lead)

Jen Douglas (Safe Lives)

Tricia MacLean (Police Scotland – DRD Assertive Outreach)

Laura Rothney – Substance misuse nurse

Kirsty Pettitt - NESCOL

Rep from Pathways

Youth Work representative – tbc

SHMU representative - tbc

Community Ideas for Improvement Evaluation/Status		
Community Ideas for Improvement	Evaluation Rationale	
Central		
Pilot scheme in Tillydrone to refer people experiencing domestic abuse for support to be replicated in Seaton.	Increasing referral routes and raising awareness of these is an existing change idea, we will discuss with the community the pilot referred to and the outcomes of this and whether it can be replicated elsewhere.	
Outline Project Plan		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	(All 3 elements) Draft charter developed Project teams identified Project teams meet Gather and analyse baseline data	Completed August 2021 October 2021 Completed
Designing and Testing Changes (Project Score 4-7)	- plan and implement initial testing: <ul style="list-style-type: none"> • Comms campaign/events will be ongoing throughout project. • Develop video animation with young people – money from Safe Lives will be available in September. • Recruit domestic abuse champions throughout October and November. • Arrange training sessions for substance misuse staff in December/January. 	October 2021 October/November 2021 November 2021 January 2022
Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)	- Mainstreaming and embedding of processes. - Data gathering & processing to be continued	February 2022 April 2022
Spreading Changes (Project Score 9-10)	Extend learning and processes to other geographical areas within Aberdeen. Work could be replicated in prison population (links to other charter re perpetrators)	June/July 2022

Charter 10.7 Access to Mental Health Support (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase by 10% the number of clients who access assessment/support/ treatment/services in relation to mental health issues: - in Police custody - on a community disposal - in HMP Grampian by 2023.	
Project Manager	John Donaghey, ACHSCP	
	Training undertaken: unknown	
Reviewed by:	Allison Swanson	
Date:	05/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	The aim aligns with the LOIP aim, subject to accepting the tracked changes below.
2. Is there a sound business case explaining why the project is important?	Yes	There is a sound business case and evidence to show where there are opportunities to make improvements.
3. Have connections to Locality Plans been made and reflected?	Yes	There are no community ideas for improvement aligned to this project.
3. Is it likely that the changes being tested will achieve the aim?	Yes	It seems likely that the change ideas within the three areas will support achievement of the aim.
4. Will the measures demonstrate whether a change is an improvement?	Yes	Measures will show improvement for each of the change ideas.
5. Is a location/Test Group identified?	Yes	Location and test group clear.
6. Have resources to implement the change ideas been identified?	Yes	
7. Is there a mix of partners involved in this project?	Yes	There is a good mix of partner, and case studies reflected to ensure voice of lived experience included.
8. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

Improvement Project Title Access to Mental Health Support
Executive Sponsor Derek McGowan, Chair, Community Justice Group
Project Lead Name: John Donaghey Job Role & Organisation: Lead for service design and governance, City MH & LD Services, AHSCP Email Address: john.donaghey@nhs.scot
Aim statement Increase by 10% the number of clients who access assessment/support/treatment/services in relation to mental health issues: - in Police custody - on a community disposal* - in HMP Grampian by 2023.* Please note that for the purposes of this charter “on a community disposal” means “clients of justice social work”.
Link to Local Outcome Improvement Plan Stretch Outcome 10: 25% fewer people receiving a first ever Court conviction and 2% fewer people reconvicted within one year by 2026 Key Driver10.4 Ensuring people in the Justice System diagnosed with mental illness or experiencing mental ill health receive access to the right support at the right time from the right service.
Link to Locality Plans There were no community ideas for improvement from the Locality Plans aligned to this project.
Why is this important and issues with current system 39% of those in Kittybrewster custody suite, 80% of those for whom Justice Social Work court reports were prepared and 60-80% of prisoners stated they had mental health issues. We know from currently available information that many individuals in the Justice System have mental health issues. For the majority, these issues are not causal in terms of offending but, without the right support, may be enduring and act as a barrier to moving on from offending. The question is who needs what and when? Ideally intervention should be as early as possible and aimed at providing support to develop personal resilience, learn adaptive coping skills, improve mental wellbeing and form meaningful connections within their communities. Those with more complex problems can also be picked up and supported to access appropriate medical services if needed. It is also the time to deal with practical issues which can act as barriers to positive change. There remains some confusion around the current use of the term “mental health” which encompasses mental wellbeing, distress, illness, trauma, personality disorder, self-harm, suicide and so much more. One of the aims of this charter is to de-medicalise the support pathways for individuals by initiating an early intervention model which will start with supportive, non-judgemental conversation about their mental wellbeing. If we can anticipate and reduce risk factors for individuals who experience low/ moderate level distress we can deliver a “right person, right time, right place” approach to support which will lead to improvement in their mental wellbeing.

The Hard Edges Scotland Report (Lankelly Chase 2019) study aimed to establish a statistical profile of the extent and nature of Severe and Multiple Disadvantage (SMD) in Scotland. They used a five-dimensional definition of SMD, adults facing issues of homelessness, offending, substance dependency, mental ill-health and domestic violence and abuse. This particular group face an exceptionally high level of stigma and dislocation from societal norms. In doing so, the report identified the majority of the individuals with whom our Justice Services come into contact.

The study found that, at local authority level, the highest rates of Severe and Multiple Disadvantage are generally found in urban and poorer authorities with Aberdeen City being one of the 6 authorities in Scotland showing high prevalence.

This high prevalence of SMD suggests that, while early intervention is vital, support for those experiencing mental health problems is multi-faceted. A compassionate conversation or prescribing antidepressants will have limited effect on someone who is homeless or hungry or does not feel safe. This Charter is the starting point in this process and contributes to the city-wide ambitions of the LOIP.

Local Data:

Each service area will provide baseline data to enable us to:

- describe the cohort of individuals with whom services engage
- quantify need and demand on services
- demonstrate the identified need versus current service provision
- set clear and consistent criteria for appropriate services
- specify the knowledge, training and skill set required to fill the gap

Service specific baseline data will be collected to contribute to the whole with some examples below.

Police Custody Service

Between 1 April 2020 and 31 March 2021, Kittybrewster Custody Centre in Aberdeen City had a throughput of 6864 custodies (custody episodes not individuals).

Of these:

- 1619 (23.6%) stated they had previously attempted self-harm or suicide
- 357 (5.2%) stated they had thoughts at present of self-harm or suicide
- 2662 (38.8%) stated they had mental health problems or had received treatment for mental health problems

Whilst mental health assessments are required as part of the Criminal Justice process, such as confirming an individual is fit to be detained in custody, there is also a real need to provide persons in custody with assistance to positively engage with support services to change their lives and ultimately reduce re-offending. To directly provide this assistance, Criminal Justice Services Division's Harm Reduction Strategy has four strands: Reducing Drugs Related Deaths and supporting individuals in police custody with problems with Substance Use, Mental Health and Health & Social Inequalities. As such, mental health support has been identified as a real priority for a significant number of persons in police custody.

Kittybrewster has some NHS Custody Healthcare Professionals who are mental health trained. Custody officers and staff have recently volunteered and will receive additional development, to become Custody Support and Intervention Champions as part of their normal daily duties, to talk to persons in custody and hopefully gain their consent to be referred to support agencies for help. This is a change idea being taken forward. Through both the health and police referral routes, and with the right services in place, it is hoped that the right help can be offered and provided at the right time to those most at need.

Further to this, a three-month test of change is planned within Kittybrewster Custody Centre where custody officers and staff will commence submitting iVPD reports to their local concern hub for persons with vulnerabilities identified in custody. This will either be added to the iVPD report already submitted for that person by local policing colleagues on that occasion or by submitting a iVPD report for vulnerabilities specifically identified during their time in police custody, of which local policing officers would be unaware. This will enable Police Scotland and their partners to quantify the number of reports being submitted, identify any trends in terms of vulnerability and streamline the process prior to any further roll out.

Justice Social Work

Some data is already available, as below, but more Charter specific information will be produced in collaboration with partners.

A snapshot of 25 pre-sentence Justice Social Work Reports on individuals appearing in Sheriff Summary Courts in 2021 revealed the following:

- 5 (20%) reported no mental health issues

Of the 20 who had mental health issues

- 3 (15%) had a diagnosed mental illness
- 8 (40%) were currently being prescribed for depression/ anxiety/ low mood
- 9 (45%) had wellbeing support needs

It should be noted that not all of these individuals will be given a Justice Social Work disposal (Community Payback Order, Structured Deferred Sentence etc.) and a survey of Justice Social Workers caseloads is being undertaken to provide baseline data. From Supervision Exit Questionnaires (i.e. those subject to statutory supervision in the community) we know that 47% of respondents identified that they had a mental health issue before they were on Supervision, of whom 77% indicated there had been an improvement by the end of Supervision. This suggests that a combination of their relationship with workers and the support offered were sufficient to improve mental wellbeing. Whilst this is seen as a very positive result, we clearly need to find out why there was no improvement reported by the other 23%. Is their mental health compromising their ability to comply with and benefit from supervision? Are they more likely to breach orders, to reoffend, to have drug and/or alcohol problems? Are they unable or unwilling to access appropriate services?

We are committed to identifying Mental Health issues as early as possible in the Justice System, ideally picked up by JSW staff at Court or via assessment for Diversion from Prosecution and Bail Supervision and to support this we will test whether staff providing

wellbeing support conversations in-house increases access to support, as well as the number of clients who report improvement in their mental wellbeing.

HMP Grampian

HMP & YOI Grampian population fluctuates daily however, following a health needs assessment undertaken in January 2020 (a snapshot of the prison population), around 60-80 % of all prisoners had mental health issues. Some of these prisoners will have multi-morbidities. With the COVID 19 pandemic requiring services to be scaled back to reduce contact with prisoners, the psychology service was reduced to an attend anywhere service and occupational therapist service was reduced markedly with the team working at home for the majority of 2020 with only urgent referrals being accepted.

The initial psychology service within the prison was developed to provide high intensity/specialist intervention for mental health difficulties and so to date this service has been delivered on a mainly individual basis. There has been no provision within the psychology service to provide assessment and intervention for individuals with mild to moderate mental health problems.

The initial occupational therapy provision for the prison was 0.5WTE to support health wellbeing and desistance, no provision was allocated to mental health support. Due to the limited-service provision, the service referrals have not been specifically highlighted as being for mental health. Annual referrals to the occupational therapist would be around 40-55 per year of which approximately 41% would be seen by the occupational therapist.

Mental Health support has been reviewed and a number of new interventions and supports will be provided as part of this project and undertaken by posts funded through Action 15 monies. The tests are listed in the change ideas section below.

Specify the Knowledge/ Skills Gap

Across all three areas, it is recognised that staff awareness, training and understanding of the routes available for people to be referred is vital to increasing access to these available supports. In addition to knowledge of existing referral routes, the charter will test providing additional access to support through providing staff development on ways to intervene earlier via distress interventions, compassionate conversations and self-management leads to improved access and outcomes. From this development, this will mitigate any existing skills gaps in terms of what they (staff) need to do to refer/signpost/or deliver that help themselves.

Measures

Outcome measures

- Number of people in police custody, on a community disposal, in HMP Grampian accessing assessment/support/treatment/services in relation to mental health issues.
- Percentage of each service area total population accessing support.

Process Measure

- Number of people referred for support (in each setting)
- Number of workers trained on trauma informed practice, distress interventions, compassionate conversations, self-management personality disorder and other MH training as appropriate (in each setting)

- Number of distress brief interventions delivered (in each setting)
- Number of compassionate conversations held (in each setting)
- Number of care plans/self-management plans developed (in each setting)
- % of individuals with mental health issues being offered support
- Number of individuals who reported increased mental wellbeing at end point of contact
- Level of distress for individual (self-assessed completed on referral)
- Number of individuals signposted to other services (in each setting)
- Number of individuals refusing support (in each setting)
- Case studies – 6 months after implementation (in each setting)
- Staff satisfaction (survey / interviews)
- Staff exit interviews / attrition rates (in each setting)

HMP Grampian

- Number of people referred to Assistant Psychologist and OT in 21/22/23
- Number of people seen 1:1 by Assistant Psychologist and OT
- Number of group sessions/ interventions held
- Number of information sessions held
- Number of self referrals
- Number of patients referred on to Community MH Team/ other services
- No. of assessments completed and adjustments proposed
- % of adjustments implemented
- % of prisoners not engaging with support
- No. of follow-up assessments completed.

Police Custody

- Number of Custody Support and Intervention Champions
- Number of iVPD reports submitted and referrals made

Justice Social Work

- Covered above

Balancing measures

- The % of people accessing services reporting improved outcomes.
- Percentage of Supervision Exit Questionnaires reporting improved MH outcomes
-

Change ideas

All

- Test whether training staff on ways to intervene earlier via undertaking distress interventions, compassionate conversations and self-management leads to increased access to support and improved outcomes

HMP Grampian

To help patients develop an understanding of mental health difficulties, factors that can impact upon mental health and develop coping strategies to reduce distress, the following tests will be undertaken

- Providing self-help materials and support to use them

- Delivering 1:1 CBT based interventions for mild to moderate mental health problems
- Delivering group CBT based interventions for mild to moderate mental health problems based on a structured protocol
- Delivery of information sessions on mental health related topics for patient self-referred to sessions.

To assess and address social care needs to prevent impact on mental health the following OT aspects will be tested:

- Undertaking assessments to identify reasonable adjustments in prison and community activities to facilitate engagement and reporting
- Providing education to prisoners on condition management in the context of daily activities
- Follow up review with prisoners who have had a previous assessment but not engaged
- Monthly report recommendations of support needs and adjustments needed in the prison/community
- Providing education to prisoners on supporting health and wellbeing and self-management through an occupational approach

Custody

- Test if Custody Support and Intervention Champions to talk to persons in custody increases the number of people giving consent to be referred to support agencies for help
- Test whether submitting iVPD reports to their local concern hub for persons with vulnerabilities identified in custody increases the number of referrals for support.

Justice Social Work

- Test whether compassionate support conversations delivered in-house increase the number of clients who access support and report improvement in their mental wellbeing.

Location/Test Group

City Wide; People in Policy Custody; HMP Grampian and CJSW.

Resources

Tests in HMPG will be undertaken by the two posts funded by Action15 monies. Tests with custody and JSW will be undertaken within existing resources.

Potential risks and/or barriers to success & actions to address these

- Duplication of effort and service delivery between the different staff groups and settings. This is being mitigated through co-production of the pathway and the services these roles provide.
- Barriers to information sharing. This will be mitigated by use of agreed protocols, information sharing arrangements and guidelines.
- Supervision and governance.
- Staffing a flexible model based primarily out of hours.
- Ensuring long term commission and robust ongoing monitoring
- If we need to create capacity within other services to take our new demand generated as a result of referrals, then we could talk about the training the other organisations may need to expand services further.

Project Team

John Donaghey, Aberdeen City Mental Health, Learning Disability and Substance Misuse Service.

Lynn Cameron, HMP Grampian

Laura Burns, Police Scotland

Lesley Simpson, ACC, JSW

Darren Bruce, Police Scotland

SAMH RE – Custody Centre

Linda Buchan – NHS - Custody Centre

Assistant Psychologist – HMP Grampian

Joanna Noble – HMP Grampian

Well Service rep – Penumbra

CJSW rep

Community Ideas for Improvement Evaluation/Status

No community ideas from the Locality Plans were aligned to the Project.

Outline Project Plan

Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Hold workshop to review service specific data to contribute to overarching data set; agree change ideas.	October 2021
Designing and Testing Changes (Project Score 4-7)	<ul style="list-style-type: none"> • Establish regular team meetings to develop, refine and implement change ideas. • Charter to CPA Board • Start testing change ideas • Continue to collect and analyse relevant data and identify data gaps • Evaluate outcomes 	November 2021 December 2021 Dec - April 2022 May 2022
Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)	Implement successful tests of change and continue to monitor and measure performance.	Dec 2022
Spreading Changes (Project Score 9-10)	Share experience, outcomes and practice issues with partners Aim achieved	April 2023

11.5 Youth Homelessness

CPA CHARTER FEEDBACK FORM		
Project Aim:	Reduce youth homelessness by 6% by 2023.	
Project Manager	Graeme Gardner, ACC	
	Training undertaken: Virtual MFI Bootcamp	
Reviewed by:	Allison Swanson	
Date:	01/10/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP?	Yes	The aim aligns with the LOIP aim.
2. Is there a sound business case explaining why the project is important?	Yes	There is a clear business case as to why this is important and where improvements to the current system can be tested.
3. Have connections to Locality Plans been made and reflected?	N/A	
3. Is it likely that the changes being tested will achieve the aim?	Yes	It is likely that the change ideas will achieve the aim. The early intervention change idea needs to be clarified as to what will be tested, but given the business case early intervention is important to achieving the aim.
4. Will the measures demonstrate whether a change is an improvement?	Yes	Measures likely to show whether the change ideas have resulted in improvement.
5. Is a location/Test Group identified?	Yes	Yes location/group identified.
6. Have additional resources needed to implement the change ideas been considered?	Yes	
7. Is there a mix of partners involved in this project?	Yes	There is a good mix of partners, lived experience involved in user journey and feeding in through Aberdeen Foyer.
8. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

Improvement Project Title Reducing Youth Homelessness				
Executive Sponsor Sandra MacLeod, Chair of Resilient, Included and Supported Group				
Project Lead Name: Graeme Gardner, Rapid Rehousing Team Leader, Aberdeen City Council Email Address: grgardner@aberdeencity.gov.uk				
Aim statement Reduce youth homelessness by 6% by 2023				
Link to Local Outcome Improvement Plan Stretch Outcome 11. Healthy life expectancy (time lived in good health) is five years longer by 2026 Stretch Outcome 7. 95% of all our children, including those living in our priority neighbourhoods, will sustain a positive destination upon leaving school by 2026.				
Link to Locality Plans There are no community ideas for improvement aligned to this project.				
Why this is important and issues with the current system? There are over 400 young people who present as homeless each year in Aberdeen. Youth Homelessness is caused by family breakdown, physical and mental health, previous exclusions from school, other education, training and employment.				
Age at Homeless Presentation	2017/2018	2018/2019	2019/20	2020/21
16 - 17	95	92	86	76
18 - 24	428	365	345	387
Total:	523	457	432	463
Youth Homelessness (16 to 24 year olds) as a percentage of people assessed as homeless is higher in Aberdeen than any other city in Scotland. (Aberdeen 29.3%, Scotland: 25.7%, North Lanarkshire: 28.3%, Dundee City: 28.3%, South Lanarkshire:25.8%, Edinburgh: 21.7% and Glasgow City: 18.8%).				
Experiencing Homelessness is known to have a damaging impact on people's health. Research published in 2018 found that:				
<ul style="list-style-type: none"> • Those with experience of homelessness had a 1.9 times higher rate of A&E attendance than their peers in the most deprived areas, and 3.5 higher rate than their peers in the least deprived areas • Those with experience of homelessness had a 1.7 times higher rate of acute hospital admission than their peers in the most deprived areas, and 3.1 higher rate than their peers in the least deprived areas • Those with experience of homelessness had a 4.9 times higher rate of admission to mental health specialties than their peers in the most deprived areas, and 20.5 higher rate than their peers in the least deprived areas • Interactions with healthcare services increased in the years prior to the point of homelessness assessment and peaked around that time, especially (though not exclusively) for healthcare activity relating to mental health, drugs, and alcohol 				

- People assessed as homeless by local authorities had a mortality rate 2.1 times higher than people of the same age and sex in the most deprived 20% of areas of Scotland, and 5.3 times higher than those in the least deprived 20% of areas¹

In the last 5 years there has been an average of 82 homeless presentations a year from 16 & 17 year olds. 95% of 16 & 17 year olds who present as homeless come from their parental home or from friends and partners while 92% of them are asked to leave or have a relationship breakdown in their current home.

55% of 16 & 17 year olds go into Temporary Accommodation as a result of their homelessness application. Temporary Accommodation provided by ACC includes a 20 person Accommodation Unit which provides en-suite bed sit accommodation and Temporary Furnished Flats, which are located in the communities of Aberdeen. If the young person has no-where else to go they will stay in temporary accommodation while an assessment of their situation is undertaken. This type of accommodation is unsuitable for young people with one young person saying “One of the biggest issue was the amount of drugs that were circling around in the building. I had never touched drugs before but ended up getting heavily involved with drugs because everybody in there seemed to be doing them.”²

Following an assessment of their situation, if they are found unintentionally homeless the Council then has a duty to provide the young person with support and permanent accommodation. 39.5% of 16 & 17 year olds were not helped to a sustainable housing option or supported accommodation during 2018/19.

8% of Homeless presentations made during 2020/21 had also presented as homeless when they were 16 or 17 years old. This was a total of 106 people making 118 Homeless Applications. On average this group have made 3.5 Homeless Applications. 43 of the 118 repeat homeless applications were under 21 years old (36%).

81% of those who re-presented in 2020/21 were not previously helped to a sustainable housing outcome by the Council.

This does not include the people who do not present to the Council. Young people who are staying with friends often do not see themselves as homeless as they are not rough sleeping.

This can lead to a longer journey of homelessness as their situation goes unnoticed and therefore unsupported for longer. [Centrepoin \(2019\)](#) found that 55% of young people felt they could not tell anyone they were homeless.

¹ [Health and homelessness in Scotland: Scottish Government](#)

² [Preventing Youth Homelessness: Aberdeen Foyer](#)

Measures

Outcome measures

- Number of young people who present as homeless 16/17 year old, and 18 to 24.
- Number of young people who re-present as homeless 16/17 year old, and 18 to 24.
- No of Young People who sustain tenancies

Process measures

Community Hosting

- No. of different types of temporary accommodation placements available
- No. of individuals signed up as community hosts
- No. of C&YP staying with community hosts
- Length of stay with a community host
- % of C&YP moving from community host to a sustained tenancy
- No. of C&YP placed in temporary accommodation
- Length of time in temporary accommodation
- Length of Homeless Journey
- Type of support activities

Housing Options

- Length of time that a young person is supported after their homeless application has ended.
- % of young people supported who sustain their tenancies
- % of young people who engage with the support
- % of young people supported who gain a tenancy/accommodation
- % of young people referred to other agencies for other support.
- No. of interviews with Housing Options Officers on their professional development in supporting young people
- No. of support activities carried out by Housing Options Officers that prevent repeat homelessness

Early Intervention

- Number of young people participating in Upstream screening
- Student Attendance rates of young people identified as needing support through Upstream screening.
- Numbers accessing student support
- Number of students accessing housing support
- Number of working days between young person being identified through survey and accessing support
- Key Stakeholders report increase in understanding of each other's roles (measure at beginning and end of development sessions)

- **Balancing measures**

No. and % of 16/17 year old going into tenancies/supported accommodation and other options.

Change ideas

Community Hosting

Test whether a Community Hosting Model in Aberdeen will prevent young people from presenting as homeless.

Aberdeen Foyer have previously been commissioned by Aberdeen City Council and Aberdeenshire Council to undertake a feasibility study into the area. The full report can be read [here](#).

A Community Hosting model such as [Nightstop](#) provide young people with emergency accommodation in volunteers' private homes. The duration is from one night to several weeks. There are currently Nightstop services running in Edinburgh, West Lothian and Glasgow. An additional 28 services run elsewhere in the UK. The young person is provided a private room, evening meal, breakfast, a packed lunch, shower and use of the washing machine. There is no charge for the young person, temporary accommodation provided by the Council costs between £124.19 and £560 per week. A young person may not be eligible for help with the accommodation costs if they are in College or employment. Nightstop report a 70-80% move on rate. It provides the space for mediation work with families to take place which can enable young people to move home, if appropriate, or for appropriate longer-term accommodation to be identified.

Housing Options

Test whether provision of continued support to 16 and 17 year olds who leave the homeless process without a tenancy or completing their time in supported accommodation reduce the repeated youth homeless presentations that we see from people who initially present when they are 16 or 17 year olds, and therefore reducing youth homelessness.

This will involve appointing 2 Housing Options Officer who will work with the young people to ensure that they are safe and well when they leave the homeless process. Overtime they will build up a relationship with the young person to help support them in preparation for their next housing move. This could include work on their mental health, employment, training or tenancy skills.

Early Intervention

If we are to truly prevent and end homelessness, assistance must be moved upstream, identifying those at risk of homelessness and ensuring that appropriate support is made available to young people and their families.

Use of the [Upstream](#) survey tool to identify youth led ideas for change and responds to the challenge of intervening far earlier in the lives of young people and their families. The survey will be tested with an initial cohort of 300 young people under 18 years attending North East Scotland College's Altens campus to identify risk (Homelessness, wellbeing, engagement, resilience) which will help ensure the right support provision at the right time, enhancing these young people's ability to sustain their housing and positive destination in college.

Location/Test Group**Community Hosting**

This project for C&YP under 26 city wide and will and hosts will be across Aberdeen and Aberdeenshire.

Housing Options

The test group for the Housing Options project will be 16 to 17 year olds who leave the homeless system without a tenancy or place in supported accommodation.

Early Intervention

Vulnerable learners city wide, with initial testing taking place at NESCOL Altens campus, young people on Further Education courses aged under 18

Resources

The Community Hosting and Housing Options posts will be funded out of the Council general fund from monies allocated by the Scottish Government for Rapid Rehousing.

Early Intervention:

NESCOL Student Support service; Data expertise; Facilitation of key stakeholder sessions
DYW Coordinator has access to a small fund for delivery of wider DYW events/activities in the school

Potential risks and/or barriers to success & actions to address these**Community Hosting**

The first year will be an implementation year where the service provider has to set up and recruit volunteers therefore the full impact may not be seen by the target date of 2023.

Housing Options

There is a risk that funding of the posts will not continue beyond the target year as the Scottish Government funding may not continue.

Early Intervention

North East Scotland College (NESCOL) noted existing challenges in identifying and connecting with students in need of support. NESCOL have found that whilst their Altens campus has the lowest number of students accessing support, this campus also has the lowest attainment level, indicating a disparity in effectively connecting student to the support resources. It could indicate that students who would benefit from support are not doing so and Upstream would provide a means of identifying those students and being able to offer support that could lead to improved attainment levels. Further education was the most common destination upon leaving school for young people from the most deprived SIMD quintile in 2019/20³ which is also reflected in those attending the Altens campus.

Project Team

Graeme Gardner (ACC), Leona McDermid (Aberdeen Foyer), Angela Taylor, Ath Croft, Jim Currie, Martin Nicoll, Nicola Graham (SDS), Moya Grassick, Susan Morrison (ACVO), Brian Dunn (Aberdeen College), Michael Murray, (RSL), Catriona Bell (Reboot)

Community Ideas for Improvement Evaluation/Status		
There were no community ideas for improvement aligned to this project.		
Outline Project Plan		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Youth Homelessness Workshop to start new project group	19/10/2021
Designing and Testing Changes (Project Score 4-7)	<p>Community Hosting research was commissioned by ACC and already been carried out. Permission to tender given 6/10/21 by ACC. Service specification currently being written. New service will provider will start testing changes when in place in first year.</p> <p>Housing Options Research and evaluation framework completed during first 6 months of 2021 with What Works Community and Centre for Homelessness Impact. Business Case to be approved for post to carry out work</p> <p>Upstream Facilitate purchase of Upstream survey tool with Cardiff University and NESCOL Pilot implementation of survey tool and analysis of data</p> <p>Track access and use of support</p> <p>Facilitate Development Sessions with Key Stakeholders</p> <p>Prototype change ideas with working group</p>	<p>01/04/2022</p> <p>01/01/2022</p> <p>By Dec 21</p>

	<p>including young people and their parents/carers.</p> <p>Need to take into account changes as a result of No one Left Behind policy changes to employability, DYW review, FA's, senior phase, YPG</p> <p>Engagements in and with local communities to support and add value to the change ideas</p>	
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>Community Hosting Year 2 of the project will be the first full year of operation and demonstrating that the project is a viable and preventative tool in reducing youth homelessness</p> <p>Housing Options Monthly meetings will be held with staff team to capture what is working / not working. This team will be very flexible and responsive to needs of young people</p> <p>Upstream The successful elements of the change ideas would be tested and PDSA cycle engaged to continue improvements. Would need engagement, support and understanding of schools, young people and their families/carers. Changes to data recording and use of data to aid coordination and development of solutions</p>	<p>April 2023 – 2024</p> <p>2022 - 2023</p> <p>By June 22</p>

	<p>with young people enabling a city wide approach through improved data sharing. Engagements in and with local communities to support and add value to the change ideas</p>	
<p>Spreading Changes (Project Score 9-10)</p>	<p>Community Hosting Evaluation of project and decision made about whether to progress in future year</p> <p>Housing Options Aim to spread changes to the wider team, and consider whether to have a specific team for young people or spread the knowledge and skills across the team/services. Upstream Shift resource to earlier interventions Aim achieved.</p>	<p>2024 onwards</p> <p>2023 onwards</p> <p>By June 23</p>

This page is intentionally left blank

Charter 11.6 Unpaid Carers (2021)

CPA CHARTER FEEDBACK FORM		
Project Aim:	Increase the number of unpaid carers feeling supported by 10% by 2023.	
Project Manager	Alison Macleod	
	Training undertaken: Model for Improvement	
Reviewed by:	Allison Swanson	
Date:	09/07/2021	
Checklist	Summary of feedback	
1. Is the project aim consistent with aim in the LOIP and highlight alignment to the Locality plans?	Yes	The aim aligns with the LOIP aim.
2. Is there a sound business case explaining why the project is important?	Yes	The charter provides a comprehensive explanation of the current position in the city in respect of unpaid carers, providing a clear rationale for the project and challenges to address. Data on current uptake of support would strengthen the rationale.
3. Have connections to Locality Plans been made and reflected?	Yes	North and South Locality Plans.
3. Is it likely that the changes being tested will achieve the aim?	Yes	Change ideas at present are outcomes that the project would hope to achieve rather than change ideas to be tested to achieve the aim. Change ideas to be tested are likely to achieve the ai, focused on raising awareness/uptake of support, but also increasing opportunities and support provided by employers.
4. Will the measures demonstrate whether a change is an improvement?	Yes	Measures are clear, and likely to show impact of the tests.
5. Is a location/Test Group identified?	Yes	
6. Have resources to implement the change ideas been identified?	Yes	
7. Is there a mix of partners involved in this project?	Yes	There is a good mix of partners from the existing group.
8. Clear outline project plan?	Yes	
CPA Management Group/ Board Ready? Yes		

<p>Improvement Project Title: Increase the number of unpaid carers feeling supported by 10% by 2023</p>
<p>Executive Sponsor (Chair of Outcome Improvement Group): Sandra MacLeod, Chief Officer, Aberdeen City Health and Social Care Partnership</p>
<p>Project Lead: Alison MacLeod</p>
<p>Aim statement Increase the number of unpaid carers feeling supported by 10% by 2023</p>
<p>Link to Local Outcome Improvement Plan: This is a project within the LOIP under Stretch Outcome 11 “Healthy life expectancy (time lived in good health) is five years longer by 2026” and Key Driver 11.1 “Supporting vulnerable and disadvantaged people, families and groups”.</p>
<p>Link to Locality Plans: This project has community ideas for improvement aligned to it within the North and South Locality Plans.</p>
<p>Why is this important The aim of this project is to support unpaid carers in their caring role allowing them to enjoy a life alongside caring and to enable the caring role to be sustained.</p> <p>Unpaid carers are a critical part of the health and social care system. Collectively, they are the largest provider of care in the UK. It is estimated that the care they provide saves health and social care services in the UK over £10 billion each year. That could potentially equate to £3.5 million in Aberdeen City.</p> <p>The caring role is not always an easy one and it can take its toll on the Unpaid Carer. This is especially the case if the cared for person’s needs are complex and the care provided is intense and/or routine. Unpaid Carers are not only impacted by the mental and physical aspects of their caring role. Their emotional state can also suffer if the person they care for is a close relative or loved one who is either deteriorating physically before their eyes (perhaps with a terminal illness) or whose behaviour is changing and affecting the carer/cared for person’s normal relationship (for example when the cared for person has Dementia). The unpaid caring role is therefore at regular risk of breaking down, even if only for short periods at a time. Anytime the unpaid caring arrangement does not work, for whatever reason, the caring responsibility will more than likely be transferred to statutory, public sector partners which comes at a direct cost.</p> <p>The value of the role along with the risk was recognised by the Scottish Government and in April 2018 the Carers (Scotland) Act 2016 was implemented. The Act gives unpaid carers rights to access support including a break from their caring role should this be required. In April 2018 the Carers Strategy for Aberdeen City was published in response to the legislation. The strategy seeks to take into account those areas of a carers life that may be impacted by their caring role and identify the provision of a variety of support in order that they can continue in this role should they wish to do so.</p> <p>The Independent Review of Adult Social Care, published in February 2021 highlighted that “Carers need better, more consistent support to carry out their caring role well and to take a break from caring with regular access to quality respite provision. Carers should be</p>

given a right to respite with an amendment to the Carers Act as required, and a range of options for respite and short breaks should be developed.”

The Carer’s Strategy was due to be refreshed in 2020 in preparation for its expiry in March 2021, but we were unable to undertake the work required. Staff were diverted to the Covid response and carers advised that they were not in a position to respond to any consultation. The Covid Pandemic had a significant negative impact on those with a caring role. Traditional support services for cared for people were initially paused and subsequently delivered in alternative ways. In addition, some carers had additional worries to deal with on top of their caring role - the disruption of their normal work/school/social routines which in themselves brought some respite; concern over finances and future security through loss of employment or reduction in income; having to also home school; and concerns over their own health and wellbeing and what would happen to their cared-for person should they become unwell; to name a few. A full refresh of the Carers Strategy, incorporating the views of unpaid carers and their needs post pandemic will commence in July 2021 with a view to a new strategy being in place by April 2022.

When the original strategy was developed it was estimated that, in Aberdeen City, there could be up to 38,000 carers, 1,300 of which could be Young Carers. At that time only around 1,200 unpaid carers were known to services. Quarriers are currently analysing the current position.

In 2017, in preparation for developing the strategy, we undertook a survey of adult carers in Aberdeen. 343 adult carers responded. The results told us that: -

- 60% were female
- 57% were over 50
- 51% provided more than 35 hours of care per week
- 25% were retired

The two things that adult carers said would have the most impact upon their caring role were: -

1. The provision of regular and appropriate respite,
2. The cared-for person themselves receiving adequate services in their own right.

There is evidence from the Resource Allocation Panel (Adults) and the Resource Allocation Forum (Children’s) that carers have expectations of the support their cared-for person should receive which do not match the Eligibility Criteria within which assessments of care needs are undertaken.

The survey also revealed that: -

- 72% of carers felt that their mental health and wellbeing had suffered as a result of their caring role;
- 65% said they felt more lonely or isolated because of their caring role;
- 55% advised they have experienced difficulties in their relationship with the person they care for.

In 2019, the same survey was repeated, with only 103 responses this time, and those percentages had increased to 86%, 75% and 57% respectively. The smaller sample may have impacted the results; however, they indicate a worrying trend which demonstrates the increasing fragility of the service provided by unpaid carers.

Specifically, in the survey, carers were asked whether they agreed or disagreed with the statement "I feel supported to manage my caring responsibilities whilst continuing to have a life alongside caring". In 2017, 25.09% of respondents agreed, or strongly agreed with this statement. In 2019, this had reduced to 22.00% although it should be noted that 28.46% in 2017 and 23.00% in 2019 neither agreed nor disagreed with the statement.

We plan to repeat the survey later this year which will not only provide an insight into the impact of Covid on carers in Aberdeen but also a baseline for measuring any improvement this project achieves.

In 2019, ACC Children's Services commissioned Barnardo's to provide a Young Carers Support Service. In December 2020 ACHSCP recommissioned our Adult Carers Support Service. This is now provided by Quarriers. At the time the Carers Strategy was implemented, staff training and carer awareness raising sessions were delivered. There have, however, been many new initiatives introduced in Adult Social Work in the intervening period e.g. Franks Law and the Appropriate Adult Scheme, and coupled with the introduction of a new provider and the impact of Covid, it is felt that the time is right to repeat these sessions. Both Barnardo's and Quarriers are represented on the Carers Strategy Implementation Group who will support us in reaching carers and delivering on this project charter.

Measures:

Outcome Measures:

- No. of carers feeling supported

Process measures:

- No. and % of Adult Social Work Care Managers attending carers rights training/information sessions
- No. of staff aware of carers rights
- No. of staff reporting increased awareness of carers rights
- Campaign analytics
- No. of carers aware of carers rights
- % of carers offered support/respite
- No. of carers accessing support
- No. of carers aware of eligibility criteria
- No. of people viewing the carers section on the new agile website
- No. of sessions with community groups/organisation on carers rights
- No. of informal/free supports available in the community available for promoting to carers
- No. of businesses participating in the respite scheme
- No. of respite/short break provided via the respite scheme

- No. of businesses in Aberdeen awarded one of Carer Positive awards of ‘engaged’, ‘established’ and ‘exemplary’
- No. of carers employed by a Carer Positive employer
- No. of respite/short breaks met from existing service provision

Balancing Measures:

- Impact on Unmet Need
- Impact on income (from waiving of charges for the provision of support to Carers)

Change ideas

1. Test whether information sessions/training co-produced by carers for Adult Social Work Care Managers increases staff awareness/knowledge of carers rights and sharing of available support offered to carers at the earliest opportunity.
2. Test whether an awareness raising campaign providing information on rights, eligibility criteria, and opportunities increases awareness of and uptake of support (South LP)
3. Test whether a unique section on the new agile website, to coincide with information on how to access care and support, increases awareness of carers rights and eligibility for support and supports available. No more than 3 clicks away from the information a carer needs.
4. Test whether sessions/capacity building with community groups/organisations on carers rights/needs etc increases the no. of informal and free support available for carers to access. (North Locality Plan)
5. To test whether a respitality scheme with businesses increases the range of co-designed respite/short break provisions available. (North Locality Plan)
6. Test whether promotional activities targeted to businesses on the benefits of the Carer Positive Award Scheme in Aberdeen through different channels (social media, case studies, website page) increases the number of businesses who are members of the scheme and having ‘carer friendly’ policies and working practices to support carers who might need to work in a more flexible manner.

Location/Test Group

City wide; unpaid carers; local businesses; and Adult Social work

Resources

ACHSCP receive dedicated funding from the Scottish Government for Carers Support. Some of this funding is already used to commission both the Young and Adult Carers Support Services and to provide existing support for carers. The funding was substantially increased in 2021/22 and some of this additional funding will be utilised to deliver the change ideas in this project charter.

The external funding team have provided a GRANTfinder report which lists 10 potential additional funding sources although all of these are only available to third sector organisations. One of these, the Princess Royal Respite Fund for Carers, is already accessed by carers in Aberdeen City via the Carers Trust. The details of the others will be passed on to both Quarriers and Barnardos, who will explore whether they may be able to access funding to further support delivery of the project

Potential risks and/or barriers to success & actions to address these

The following are risks and/or barriers to success that we have identified along with mitigating actions: -

Risk/Barrier	Mitigating Action
Lack of resource to undertake awareness raising and engagement	Utilise resource available via Carers Strategy Implementation Group and partner organisations.
Lack of funding to provide support required	Ring fencing of Carer Strategy Implementation Funding for support for carers
Lack of availability of support either formal or informal	Work with providers and community groups to increase provision in line with need
Lack of understanding of specific needs of various groups of carers	Comprehensive Engagement Strategy using existing Carers Groups. Check back technique to confirm understanding
Lack of engagement from either carers or providers	Promotion of benefits and incorporation into carer induction with Adult Carers Support Service. Engagement with Provider Forum.

Project Team:

There is already in place a Carers Strategy Implementation Group (CSIG) which includes the Project Manager and various Subject Matter Experts from ACHSCP, ACC, partners and providers as well as the two IJB Carers Representatives. The full list of representation as per the Terms of Reference is: -

- Lead Strategy and Performance Manager (Chair)
- Stay Well Stay Connected
- Link Workers
- Nursing (Community Nurses, School Nurses, Health Visitors)
- Allied Health Professionals
- Adult Social Work
- Development Officer Carer and Service User Involvement
- Commissioning
- NHSG
- ACC Children's Services (Young Carers)
- ACVO
- Scottish Care
- Bon Accord Care
- IJB Carer Reps
- Adult Carer Support Service (Quarriers)

<ul style="list-style-type: none"> ▪ Young Carer Support Service (Barnardo's) ▪ Third Sector – Alzheimer's Scotland, CLAN, Sue Ryder, Charlie House <p>The group meets regularly to oversee implementation of the current Carers Strategy and refresh of the new one. This established Group will also be the Project Team for this project rather than creating another bespoke team which would, in all likelihood, replicate the membership.</p>	
Community Ideas for Improvement Evaluation/Status	
Community Ideas for Improvement	Evaluation Rationale
North	
Increase the number of informal opportunities for unpaid carers across the locality.	This idea aligns to change idea 4
Co-design local unpaid carers resources and support.	Discussion ongoing with carers and this aligns to existing change ideas.
Explore opportunities to support unpaid carers with their wellbeing post lockdown	Discussion ongoing with carers to identify supports and this aligns to existing change ideas.
Increase support for dementia sufferers and their carers.	Change idea to raise awareness of available supports both through promotional campaign and new website and also aligns with change idea 4.
South	
Identify early intervention and prevention support for unpaid carers in the community with a view to addressing gaps and support.	Change idea to provide information on available supports to raise awareness/uptake at the earliest opportunity and to raise awareness with community groups/businesses to support increase opportunities.
Central - There are no community ideas from the Central Locality Plan aligned to this project	

Outline Project Plan - Set out your initial plan about the timeline for your project. (This should be reviewed regularly)		
Project Stage	Actions	Timescale
Getting Started (Project Score 1-3)	Engagement with initial Stakeholders (CSIG, Commissioned Service Care Management)	September 2021
	Develop Project Charter	October 2021
	Submission of Project Charter to CPA Board and approval of Project Charter	November 2021
Designing and Testing Changes	Undertake survey/focus groups to test current	January 2022

<p>(Project Score 4-7)</p>	<p>awareness amongst both carers and staff of carers rights and eligibility criteria.</p> <p>Undertake training and awareness raising on carers rights and eligibility criteria.</p> <p>Review of short break opportunities requested by carers and percentage met by existing provision</p> <p>Repeat survey/focus groups to test impact. List compiled of short breaks opportunities not met by existing provision</p>	<p>January 2022</p> <p>February 2022</p> <p>March 2022</p> <p>March 2022</p>
<p>Implementing and sustaining changes that demonstrate improvement (Project Score 7-10)</p>	<p>Training on Carers rights embedded in induction training for staff</p> <p>Review of advice and information for new carers</p> <p>Maintenance arrangements for the ongoing updating of the list of support available and where/how to access this</p> <p>Work with communities and market to shape provision of range of respite/short breaks not already covered by current provision.</p>	<p>July 2022</p> <p>July 2022</p> <p>July 2022</p> <p>December 2022</p>
<p>Spreading Changes (Project Score 9-10)</p>	<p>Continue targeted review of knowledge and understanding amongst carers and staff</p> <p>Continue to monitor demand versus supply of respite/short break opportunities plugging gaps where these are identified</p>	<p>October 2023</p> <p>October 2023</p>



Community Planning Aberdeen

Progress Report	Child Poverty Action Report
Lead Officer	Derek McGowan
Report Author	Derek McGowan Chief Officer – Early Intervention and Community Empowerment Aberdeen City Council Tracy Davis Child Health Commissioner NHS Grampian
Date of Report	4 th October 2021
Governance Group	CPA Board – 27 th October 2021

Purpose of the Report

The purpose of this report is to:

- Provide a 6 monthly update report to the Community Planning Management group.
- This follows instruction from the Operational Delivery Committee on 13th January 2021 for Community Planning Aberdeen to provide a half yearly report on the actions being taken by Community Planning Aberdeen to reduce and eradicate child poverty around the priorities for 2020/21, as noted in Appendix 1 to the Child Poverty Action report discussed at Committee that day.
- Please note that national child poverty statistics are not yet available, but are expected in mid-late October. This report therefore cannot draw any inference on whether actions being taken have affected child poverty rates in the City.

Summary of Key Information

1 BACKGROUND

1.1 The Child Poverty (Scotland) Act 2017 (the Act) fully entered into force on the 1st July 2019. The Act sets out steps required by the Scottish Government, Local Authorities and Health Boards to tackle child poverty. The Act identifies four definitions for poverty; identifies targets to be achieved by 2030, and a requirement for Local Authorities and Local Health Boards to agree a Child Poverty Action Plan, to be report to Scottish Ministers on this annually.

2.2 Poverty is defined in the Act under four different headings:

- Relative poverty
- Absolute poverty
- Combined low income and material deprivation
- Persistent poverty

2.3 At Operational Delivery Committee on the 17th September 2019, the Committee agreed to adopt the Local Outcome Improvement Plan as Aberdeen City Council's CPAR for the years 2019-22. This follows the Scottish Government guidance on developing the CPAR, which advocates adopting a Community Planning approach to tackling this issue. NHS Grampian have adopted the same approach in recognising the wider input of agencies across the City and this is reflected in the joint report.

3 **Child poverty targets**

3.1 Section 1 of the Act sets out targets that the Scottish Ministers must meet by 2030. These are that, of children living in households in Scotland:

- (a) less than 10% fall within relative poverty
- (b) less than 5% fall within absolute poverty
- (c) less than 5% fall within section 5 combined low income and material deprivation
- (d) less than 5% fall within section 6 persistent poverty

3.2 Section 2 of the Act sets out Interim targets, that must be met by the Scottish Ministers in the financial year beginning with 1 April 2023. These are, that, of children living in households in Scotland—

- (a) less than 18% fall within relative poverty
- (b) less than 14% fall within absolute poverty
- (c) less than 8% fall within combined low income and material deprivation
- (d) less than 8% fall within persistent poverty

3.3 These measures cannot yet be defined at a Local Authority level. However, the most recent data [available](#) suggests that in Aberdeen 21.5% of children are living in poverty, defined as 'below 60% median income after housing costs'. This is reducing, having reached 22.8% in 2016/17. This demonstrates that the positive steps being taken by the Council and partners in tackling child poverty are having an impact.

4 **Local Child Poverty Action Reports**

4.1 The Child Poverty (Scotland) Act 2017 (the Act) requires each Local Authority and NHS Board to publish a CPAR and undertake annual monitoring and reporting to demonstrate progress against agreed targets.

4.2 A local CPAR must describe any measures taken in the area of the local authority during the reporting year by the local authority and each relevant Health Board for the purpose of contributing to the meeting of the child poverty targets, and measures that are proposed to be taken to meet these targets.

- 4.3 Additionally, a local CPAR must describe any income maximisation measures taken in the area of the local authority during the reporting year to provide pregnant women and families with children with—
- a) information, advice, and assistance about eligibility for financial support,
 - b) and assistance to apply for financial support; and any measures taken during the reporting year, or which are proposed to be taken, in the area of the local authority in relation to children living in households whose income is adversely affected, or whose expenditure is increased, because a member of the household has one or more protected characteristics.

5 Scrutiny of the targets.

- 5.1 The Act states that progress against these targets will be scrutinised nationally by the Poverty and Inequality Commission. However, at a local level it is the responsibility of the Local Authority and Health Board to publish, as soon as practical after the end of each financial year, a report on progress locally. The submission of this report is later than anticipated this year, this is due to the focus on responding to Covid-19 and the late availability of some data sets required to provide a more comprehensive view of work that has been undertaken.
- 5.2 At Operational Delivery Committee on the 13th January 2021, the Committee agreed a recommendation that the Committee receives a half yearly report on the actions being taken by Community Planning Aberdeen to reduce and eradicate child poverty around the priorities for 2020/21.

6 Child poverty in Aberdeen.

- 6.1 It has been estimated pre-pandemic that around 5500 children in Aberdeen were living in poverty, a rate of 21.5%. It is expected that the effects of the pandemic will mean that this figure has increased, despite the ongoing work that Community Planning partners have been taking since March 2021 to mitigate any impact. Child poverty is defined in this regard as being as below 60% of median income after housing costs.
- 6.2 This report is designed to provide Community Planning Aberdeen partners, and subsequently Aberdeen City Council's Operational Delivery Committee, with an update on the steps being taken to eradicate child poverty in the City, with regards to the steps identified in the Local Child Poverty Action report for

7 Structures to tackle poverty across Aberdeen

- 7.1 Through the refresh of the Local Outcome Improvement Plan (LOIP) in the first half of 2021, how poverty in all its forms has been reviewed, with the LOIP refreshed to ensure that it reflects current priorities. This has included the creation of a new Ant-Poverty Outcome Improvement Group, aimed at ensuring no one in Aberdeen will suffer due to poverty by 2026. In addition this renewed partnership focus on the immediate and acute causes of poverty, across the City there are many single service measures that continue to be taken every day to tackle child poverty.

NEXT STEPS

8.1 The availability of national data on Child Poverty is crucial as it lets partners know how the rate of child poverty in the City, relative to the previous years data. The publication of data this Autumn will give the first structured and robust evidence of the impact of the pandemic on child poverty in the City, and therefore a basis for understanding the impact our collective efforts have made. This report presents a picture of steps taken, and local outcomes, but cannot provide the full picture the national data will. It is proposed therefore that this report is considered in that context, and is updated once national data becomes available.

Recommendations for Action

It is recommended that the Management Group:

- i) Notes the content of the report, and agrees it be submitted to the Community Planning Aberdeen Board for discussion on the 30th November;
- ii) Notes the request by Operational Delivery Committee that this is considered at their next Committee, currently scheduled for the 18th November and instruct the Chief Officer – Early Intervention and Community Empowerment to submit this report;
- iii) Notes that if national child poverty data becomes available in this cycle, this report will be updated and circulated to the Management Group and Board as report deadlines permit.
- iv) Notes that the full Child Poverty Action report for 2020/21 will be submitted to Community Planning Aberdeen once all relevant data is available.

Opportunities and Risks

Opportunities:

- To ensure partnerships and structures are effectively tackling child poverty;
- To ensure sufficient scrutiny of progress on tackling child poverty,
- To continue to reduce the rate of child poverty being experienced in the City.

Risks:

- National data being unavailable means that this report cannot provide a full picture of child poverty in Aberdeen.

Consultation

The following people were consulted in the preparation of this report:

Tracy Davis
Child Health Commissioner
NHS Grampian
tracy.davis12@nhs.scot

Angela Kazmierczak
Financial Inclusion Team Leader
Aberdeen City Council

Background Papers

- Appendix A – 6 monthly update report

Contact details:

Derek McGowan
Chief Officer – Early Intervention and Community Empowerment
Aberdeen City Council
demcgowan@aberdeencity.gov.uk

Appendix A

The three main drivers of Child Poverty:¹

Employment: Income from parent's work and earnings is not sufficient to lift them from poverty

Household costs: The costs of living that household have to cover are too high

Social Security: Income from social security has been cut back significantly by the UK Government, particularly for families with children, and is now inadequate to lift families from poverty

	On target and within timescales.
	Some risk to targets or timescales. Mitigation required.
	Significant risk to targets, timescales or objective. Requires escalation.

Page 144

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
<p>Reinforce and promote the importance of attending for antenatal care, with the aim to increase the number of vulnerable mothers eligible and in receipt of the Best Start Grant</p> <p>Income maximisation teams to continue supporting people to claim for their eligible benefits.</p>	Increased uptake of social security	<p>NHS Grampian</p> <p>ACC Department of Work and Pensions</p> <p>Social Security Scotland</p>	March 2022	March 2020	
Progress					
The Scottish Government (SG) published a report up to the end of February 2021 giving an overview of high level statistics for the Best Start Grant (10 th December 2018 to 28 th February 2021) and Best Start Foods (12 th August 2019 to 28 th February 2021) ² . In Aberdeen City, 7880 applications were received					

¹ <https://www.gov.scot/publications/child-chance-tackling-child-poverty-delivery-plan-2018-22/>

² <https://www.gov.scot/publications/best-start-grant-and-best-start-foods-high-level-statistics-to-31-march-2020/>

in that period, - 3% of the total number of applications received. 70% of these were authorised. Quarterly figures are made available, however there is currently no function to compare each quarter.

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Promote the Neonatal Expenses Fund with the aim of identifying vulnerable parents who are eligible, so that they may can be supported so spend as much time as possible with their babies while they are receiving care in the neonatal unit.	Reducing the cost of living	NHS Grampian Friends of the Neonatal Unit	March 2022	March 2020	
Progress					
All parents who have a baby admitted to the neonatal unit are provided with the information that they require with regard to the Neonatal Expenses Fund. Through liaison within the clinical management structure, an application form has been included within the universal information pack provided to all families on admission. The aspiration for the future is to develop a mechanism for data collection, enabling an oversight of uptake of the fund and to use this information to further target promotion so that all vulnerable, eligible families can benefit. This work continues and is embedded.					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Provide more support to children and families in the earliest years through delivery of the Universal Health Visiting Pathway (UHVP) and Family Nurse Partnership Programme.	Increased uptake of social security Reducing the cost of living	NHS Grampian	March 2022	March 2020	
Progress					
<p>All Health Visitors and Family Nurses are talking to families about financial inclusion and income maximisation through routine enquiry within the UHVP. Generic email addresses have been set up with Financial Support Services in each of the three Local Authorities, and data requirements have been determined. There is still an Information Governance obstacle to overcome, in that NHSG IG have requested further information on the referral process and how information will be shared (with an agency external to NHSG).</p> <p>Health Visitors and Family Nurses feel that they would benefit from group workshops/ shared learning as to their experiences of implementation of the Financial Inclusion Pathway. This will present an opportunity to promote MEOC. Online training, events, updates will be added to the partnership websites. Online updates, training and shared learning opportunities will be applied to the NHSG website.</p> <p>Referrals are still being made on a daily basis and recorded in clinical systems. It is not yet possible to determine the amount of money that has been made available.</p>					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Continue to grow and sustain 'Making every Opportunity Count' (MeOC) at a Community Planning Partnership level	Reducing the cost of living Increased uptake of social security	All services within the Community Planning Partnership	March 2022	March 2020	
Progress					
<p>The aspiration is that MeOC be the framework by which conversations could be had about all aspects of Financial Inclusion. It was agreed that the ethos and principles of MeOC would provide the structure for the development of the Child Poverty Action Report, incorporating all that is being delivered.</p> <p>Opportunities to introduce the MeOC model have been identified, however there is still work to be done to roll it out more widely and embed it as a sustainable framework.</p> <p>There has been a refresh of the virtual training package.</p>					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Via Healthier, Wealthier Children: (Developing financial inclusion referral pathways in Scotland's funding plan) develop and implement a Midwifery and Early Years Practitioners pathway, policy and procedure to financial support services across Grampian.	Reducing the cost of living. Increased uptake of social security.	NHS Grampian Local Authority Poverty Action Groups Social Security Scotland	November 2021	March 2020	
Progress					
<p>Around £8k was allocated to NHSG through the Healthier, Wealthier Children's fund for 2018/19. This was used to fund Health Improvement staff to establish and implement the process, guidance, resources and governance for the Financial Inclusion Pathway. This was translated into a virtual model during Covid and has been underway since November 2020.</p> <p>An allocation of £22k has been issued for 2019/20. See planned actions for 2021/22 against the funding below.</p>					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Investment in Scottish Housing Quality Standard , including replacement window and insulation work to address fuel poverty in homes	Reducing the cost of living	Aberdeen City Council	March 2021	March 2020	
Progress					
<p>The percentage of Aberdeen City households considered to be in fuel poverty is 21.1%.</p> <p>In 2020/21 – 88.26% of homes met the Scottish Housing Quality Standards</p> <p>In 2020/21 - 61 new window installations were undertaken</p> <p>In 2020/21 - 25 new heating systems were installed</p>					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Attainment and Transitions to Adulthood Improvement Group established to increase the number of young people living in priority areas who progress to a positive and sustained destinations Increase in the number of apprenticeships offered in priority areas	Income from Employment	Aberdeen City Council Skills Development Scotland	March 2021	March 2020	
Progress					
In 2018/19 ???% of school-leavers went on to a sustained positive destination.					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
10,000 free meals will be provided to children through the award winning Food and Fun initiative Provision of meals was changed to vouchers to ensure that during lockdown periods families were still able to access food.	Reducing the cost of living	Aberdeen City Council CFINE ACVO Community Groups	March 2021	March 2020	
Progress					
In 2020/21 the number of meals provided was ??????					

Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Continue to expand the provision of free sanitary products	Reducing the cost of living	Aberdeen City Council NHS Grampian CFINE	March 2021	March 2020	
Progress					
The number of sites where free sanitary products can be accessed is now 54.					

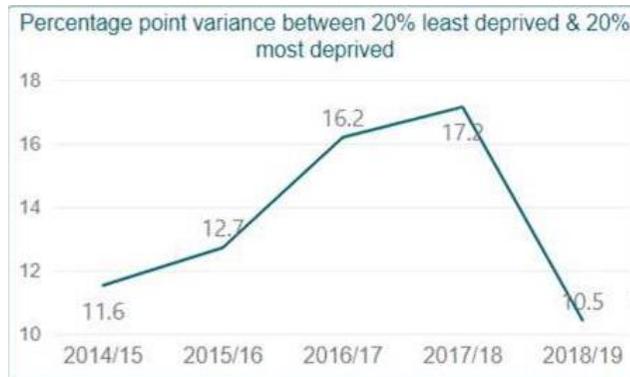
Action Description	Poverty Driver Impacted	Responsible Services	Due Date	Review Date	RAG Status
Development of UNICEF Child Friendly Cities accreditation programme	Reducing the cost of living	Aberdeen City Council NHS Grampian Police Scotland UNICEF	March 2021	March 2020	
Progress					
Progress is ongoing in delivering this.					

Activity undertaken	Partners involved in activity	Assessment criteria
Economy		
Support to those on, or transferring to, Universal Credit, and those on benefits.	<p>Aberdeen City Council</p> <p>NHS Grampian</p> <p>Department of work and Pensions</p> <p>Community Food Initiatives North East (CFINE)</p> <p>Social Security Scotland</p>	<p>All Housing Officers trained in advising and supporting on Universal Credit issues.</p> <p>At the end of 2020/21 there were 13583 Council tenants on Universal Credit. Of these, 3350 were single with children, and 1470 were a couple with children.</p> <p>Financial Inclusion Team assisted those claimants with children to access £504,493.82 cumulative gain.</p>
Investment in Scottish Housing Quality Standard, including replacement window and insulation work to address fuel	Aberdeen City Council	<p>23% of households are believed to be in fuel poverty in Aberdeen.</p> <p>In 2020/21 – 88.26% of homes met the Scottish Housing Quality Standards In 2020/21 - 61 new window installations were undertaken In 2020/21 - 25 new heating systems were installed</p> <p>Energy Efficient Standard for Scottish Housing (EESH) – 92.5% of properties within scope of EESH (20,285 are within scope)</p>

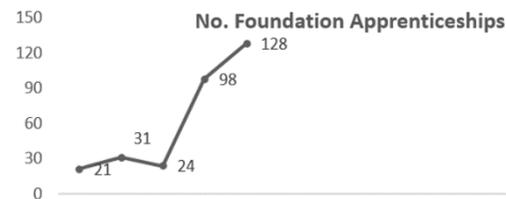
poverty in homes		
Provision of Heat with Rent for Council Housing	Aberdeen City Council Aberdeen Heat and Power Ltd	Number of 2 bedroom or larger family homes benefitting from Heat with Rent – ????
Use of Scottish Attainment Challenge (PEF) Funding totalling £ 2,845,080 to benefit those pupils in receipt of free school meals	Aberdeen City Council Third Sector partners School Communities	<p>All schools analysing the poverty related attainment gap in their own context, and the impact of poverty on pupil attainment, to plan appropriate targeted interventions to address this. All SAC plans quality assured by the central education quality team and by the Education Scotland Attainment Advisor.</p> <p>Around 2,400 children and young people across the city accessing targeted interventions in primary and secondary schools.</p> <p>The majority of city schools have implemented a range of interventions using PEF funding, some of these are targeted at specific pupils, others support a wider group. Many pupils, particularly in schools with high allocations of PEF funding, are accessing more than one intervention and it is therefore difficult to accurately identify which specific intervention has led to assessed improvements. In some cases, it is likely there has been a cumulative beneficial effect of several targeted interventions. Although this makes accurate evaluation and reporting more difficult, ultimately, of course, the result is positive for children and young people.</p> <p>Almost all schools report encouraging early evidence of improvements around mental health and wellbeing, resilience, emotional wellbeing and pupil engagement. As well as reference to specific data such as pupil attendance, schools report positive changes in areas such as improved pupil confidence in their own abilities and increased engagement in learning.</p>

		<p>The majority of schools are beginning to note improvements in attainment in literacy and numeracy for pupils targeted for specific interventions. In some schools this has led to a reduction in the poverty related attainment gap, as the rate of improvement for targeted pupils has outstripped others. This is particularly noticeable in the primary schools which also benefit from Scottish Attainment Challenge funding.</p> <p>Across the city there is evidence of the wider impacts associated with the additional funding. There has been an increase in collaborative working, both within and across schools and teachers planning and working together has contributed to the development of a more positive and collegiate ethos underpinned by the sharing of practice across individual schools and across Associated School Groups. In some cases, for example, this has included pooling of resources and collaborative working to source professional learning opportunities for staff on specific priorities e.g. The Visible Learning Approach.</p> <p>The majority of city schools have considered sustainability as part of their planning work, and this has led to a focus on building staff skills and capacity, sharing and embedding of practice, and improving use of data in planning and evaluation. However, it is recognised that the availability of additional resource has been key to achieving positive impacts, particularly for the most disadvantaged pupils.</p>
<p>Use of Scottish Attainment Challenge (SAC) Funding totalling £ 635,732.56 to benefit those pupils in each of the 7 identified</p>	<p>Aberdeen City Council Third Sector partners</p>	<p>7 SAC schools – 4 primary and 3 secondary utilising funding to minimise the impact of poverty on children and families and mitigate against its most adverse effects in respect of pupil attendance, engagement, attainment, opportunities and achievement.</p> <p>City schools have well-established relationships with a wide range of Third Sector partners, and we plan to continue to support and develop these partnerships to promote child and family learning. These include programmes such as breakfast clubs, designed to promote attendance and reduce lateness, activities to promote engagement and positive attitudes to learning, pupil counselling and family learning packages. Physical and mental health and wellbeing are fundamental to children and young people being able to engage fully with learning, as a result a number of partners are engaged in working with our schools to deliver programmes aimed at increasing confidence</p>

Challenge Schools		<p>& self-esteem, improving communication (talking & listening), improving literacy (reading & writing) and increasing motivation. A number of these focus on pupils participating in sporting activities, while others focus on developing social skills, supporting the wider family, establishing routines, offering practical advice and signposting other sources of support.</p> <p>There is evidence that some young children have delayed language acquisition and a subsequent need to ensure that we have a means of upskilling our workforce to address this. Our work with the PEEP (Parents as Early Educators) programme and recognises the importance of supporting parents in their vital role as early educators of their children. Post COVID-19 we will continue to work with our NHS colleagues to develop a shared, evidence-based approach to supporting the development of young children's speech, language and communication skills.</p>
Developing the Young Workforce	<p>Aberdeen City Council</p> <p>Skills Development Scotland</p>	<p>Data for 2020/21 is not yet available. The tables below show the most recent data available.</p> <p> Variance Tables - Sustained Leaver De</p> <p> Variance Tables - Initial Leaver Destin:</p> <p> Positive Initial and Sustained Destinati</p> <p>Attainment and Transitions to Adulthood Improvement Group established to increase the number of young people living in priority areas who progress to a positive and sustained destinations.</p>



Increase in the number of apprenticeships offered in priority areas



Children and Young People		
Provision of £1.6million Fairer Aberdeen Fund through Participatory Budgetting approach to support local organisations to deliver support to communities	Aberdeen City Council Aberdeen Council for Voluntary Organisations (ACVO) Community groups	Annual returns on activities as required under grant agreements from the following projects: Cummings Park Community Flat Printfield Community Project STAR Community Flat Tillydrone Community Flat CFINE Tackling Food Poverty Middlefield Community Project Under 11s Middlefield Youth Flat Fersands Youth Work Fersands Family Centre Twos Group and Family Support Worker St Machar Parent Support Project Home Start CAB Money Advice Outreach CFINE SAFE Pathways St Machar Credit Union
Free meals provided to children through the award winning Food and Fun initiative	Aberdeen City Council CFINE ACVO Community Groups	2020/21: 10,732 meals provided
Continuing support for	Aberdeen City Council	Recommissioning of Big Noise Torry for the period 2020-26. At mid-March 2020, Big Noise Torry was engaging regularly with around 530 children and young people from the Torry

Big Noise Torry / SISTEMA programme	SISTEMA Scotland	community. That included: around 15 babies/toddlers signed up to Little Noise; 125 Nursery children; 260 P1-3s receiving Big Noise sessions during the school day (including around 50 also participating in after-school); and 180 participating in the after-school club. An outline of the programme delivered is contained in the table below.		
		Little Noise	Weekly	Babies and Carers
		Nursery Sessions	Weekly	All children attending Walker Road and Tullos nursery classes
		Primary 1-3 In-school sessions	Twice Weekly	All P1-3 children at Walker Road and Tullos primary schools
		Additional Support Classes	Weekly	Targeted at young people across the stages in primary school. Focus on developing literacy skills
		Big Noise After-School Club	Delivered Monday to Thursday weekly	For young people from P3 – P7 from Walker Road and Tullos Primary Schools
		Big Noise Holiday Clubs	Delivered Monday to Thursday weekly	Open to all after-school participants for eight weeks during the spring, summer and October school holidays
		Priority Families Additional Support	Ongoing support as and when required	Targeted engagement with approximately 30 families to provide individual input / relationship building towards engagement.
		Adult Orchestra	Weekly	For parents and community members in Torry
		Volunteering Programme	Ongoing	Opportunities for adults from Torry community and across Aberdeen
Aberdeen – Wide Holiday Programme	Defined weeks within holiday programmes	Extending the music education offer to children from across Aberdeen (working alongside the Big Noise Torry children)		
Provision of free sanitary products	Aberdeen City Council	Free sanitary products are available in all primary, secondary schools as well as Westburn and Craigelea Children’s Centre.		
	NHS Grampian	54 sites in total are providing access to free sanitary products.		
	CFINE			

Expansion of Early Years provision	Aberdeen City Council	<p>Number of Pupil Support Assistants</p> <p>Early Years – 7.1 FTE</p> <p>Development of Integrated Children and Family Services family learning offer to ensure full utilisation from August 2020</p> <p>Development of Ready, Steady, Two to support delivery of high quality services to eligible 2s</p> <p>The Educational Psychology team have developed and offered Emotional Literacy for Support Assistants (ELSA). ELSA provides knowledge, practice and coaching on an incremental learning model for PSAs and mid-year evaluations are positive. In preparation for the expansion to 1140 hours of Early Learning and Childcare, the team have developed an invaluable Ready, Steady, Two resource to support staff to work with eligible 2s and those who have not met developmental milestones.</p> <p>Considerable work has been undertaken in preparation for the expansion of Early Learning and Childcare including the development of a new ELC admissions process. This will see the universal availability of PEEP in all ELC settings. The programme is currently being re-set in light of delays resulting from social distancing measures and will now be delivered virtually over 5 half day sessions. The course will cover the Why, What and How of the Peep Learning Together Programme (LTP), to enable staff to deliver it effectively to support the families that they work with. The LTP is an evidence-based programme that helps parents and carers to support their young children's development by valuing and building on the play and learning opportunities in everyday life https://www.peeple.org.uk/ltp</p> <p>20 practitioners have recently undertaken the training with a further 3 suites of training fully booked which will result in 18 further trained practitioners. By August 2021 every ELC setting, both Local Authority and Funded Provider, will have a fully trained PEEP practitioner to work with and support families.</p> <p>Work has been undertaken to improve knowledge of the impact of poverty on families. The introduction of ELC Excellence and Equity practitioners has had a positive impact on supporting children and their families in our priority areas. In partnership with</p>
------------------------------------	-----------------------	--

		community groups The Excellence and Equity Practitioners have been involved in initiatives such as 'HealthyFamily Fun Day' which showcases a variety of services across the community that are available to support and advise families. Through the delivery of PEEP groups, outdoor learning sessions and Book Bug sessions they have supported the positive engagement of families in their children's learning. Early engagement with families through links with toddler groups has supported the building of relationships and smooth transitions into the ELC setting.
GIRFEC	Aberdeen City Council	Partnership Improvement Group in place to continually improve agreed partnership approaches A terms of reference has been agreed and the composition of the group is currently being refreshed.
Aberdeen City Council National Improvement Framework Plan 2020/21 agreed.	Aberdeen City Council	Scrutiny through Integrated Children's Services Board; Education Operations Committee and annual reporting to Council NIF self evaluation LINK TO FOLLOW
Reducing the cost of the school day. Minimise the costs of the school day and maximise the uptake of free	Aberdeen City Council	4 pledges were agreed by the Education Service <ul style="list-style-type: none"> • <i>No child or young person will start school without a breakfast</i> • <i>All children and young people will have access to affordable school uniform and appropriate clothing for the North East</i> • <i>Costs will not prohibit the participation of children and young people in the life of the school</i> • <i>Parents, carers and children and young people will have easy access to financial advice</i>

<p>school meals and school clothing grants by eligible families.</p> <p>All schools to consider poverty proofing within their own unique context</p>		<p>Almost all schools have in place arrangements to ensure children and young people can access food at the beginning of the school day if they require it. Recognising that food poverty and the availability of affordable, healthy food at anytime of the day continue to be of major concern for families, schools continue to work with other agencies and the third sector to improve access for all. Schools work with a range of suppliers to offer choice and reduce the costs of school uniform, also promoting cheaper, non-badged versions of uniform items which are widely available at much lower cost than badged items. Most schools offer one of a range uniform “recycling” provisions where donated school uniform can be accessed for free or in exchange for outgrown items.</p> <p>A few schools use PEF funding to provide school uniform to all pupils and the clothing grant application process is signposted to all parents, with support to complete this if required. There are a few informal arrangements between schools where unwanted clothing is donated and available free to those who need it. A guidance leaflet and posters for primary and secondary schools have been developed to inform thinking on how to reduce the cost of the school day and all schools have reviewed their practice to ensure all learners can access the curriculum and extra-curricular activities. A few schools use PEF or other funding to support this.</p> <p>Schools continue to work with third sector and other agencies to signpost families to sources of financial support and advice.</p>
--	--	--

Library provision and access	Aberdeen City Council	<p>Number of young people (Under 16) joining the Library service 2019/20 -</p> <p>Number of Bookbug gifting bags, Baby, toddler and Primary 1 - 13,833</p> <p>Number of Early Years Bookbug outreach sessions - 29 involving 211 children</p> <p>Number of library visits by educational establishments 986 with 13,933 children</p> <p>Aberdeen Reading Challenge participation:</p> <ul style="list-style-type: none"> • 637 children and young people • 137 families <p>Number of children attending library service events 2018/19 – 20,512 (some were cancelled latterly due to the Covid pandemic)</p>
Transport	Aberdeen City Council	<p>Lochside Academy in Aberdeen opened in August 2018 merging 2 established secondary schools (Torry and Kincorth). The area of Torry is one of the poorest areas in Aberdeen and the move to the new school requires children from Torry to travel between 2 to 3 miles. Free transport is provided for all children attending Lochside Academy from Torry (approx. 450). The provision of supported bus services was in recognition of the distance and safety concerns of the walk to the school, although the provision is not statutory and in normal circumstances a fare would be required to be paid, taking into account the deprivation in the area Aberdeen City Council has provided free travel for the children from Torry and this includes free travel on commercial bus services also between 07:00 - 18:00, so children can participate in extra-curricular activities and fully engage in the school community.</p>
Adults		
Provision of £1.6million Fairer Aberdeen	Aberdeen City Council	<p>Annual returns on activities as required under grant agreements from the following projects:</p> <p>Cummings Park Community Flat</p> <p>Printfield Community Project</p>

Fund through Participatory Budgeting approach to support local organisations deliver support to communities	Aberdeen Council for Voluntary Organisations (ACVO) Community groups	STAR Community Flat Tillydrone Community Flat CFINE Tackling Food Poverty Middlefield Community Project Under 11s Middlefield Youth Flat Fersands Youth Work Fersands Family Centre Twos Group and Family Support Worker St Machar Parent Support Project Home Start CAB Money Advice Outreach CFINE SAFE Pathways St Machar Credit Union
Provision of free sanitary products	Aberdeen City Council NHS Grampian CFINE	Free sanitary products are available in all primary, secondary schools as well as Westburn and Craigielea Children's Centre. In 2019/20, approximately 159,264 products were delivered to these sites. 54 sites in total are providing access to free sanitary products.
Expansion of Early Years provision	Aberdeen City Council	Number of Pupil Support Assistants Early Years – 7.1 FTE
Improved knowledge of Adverse Childhood Experiences	Community Planning Partners Care Experienced Young People	The phased roll out of the MCR Pathways programme to offer support to Care Experienced young people across the city continues with evidence that almost all pupils engaged with the programme to date have been increasingly able to talk positively about their school experiences. The wider achievement programme with Sport Aberdeen has offered greater engagement with the creative arts. Both programmes have helped increase timely attendance, increased confidence and reduced exclusions.

		The Champions Board met regularly throughout 2019/20, allowing Care Experienced Young People the opportunity to raise issues directly with Community Planning partners, and shape how services are delivered.
Reducing the cost of the school day	Aberdeen City Council	Provision of free school meals – 2202 enrolled for these in addition to those in P1-P3 who are automatically entitled: P1 – 2015; P2 1967, P3 1964 Provision of school clothing grants - 1946 Number of families auto-enrolled for privileges – 90 enrolled for free school meals through this process.
Place		
Investment in affordable housing through Strategic Housing Infrastructure Plan (SHIP)	Aberdeen City Council Registered Social Landlords Developers Scottish Government	The Aberdeen City Affordable Housing Programme, developed by the council details a range of affordable housing projects including RSL and Council Social Rent. It also includes RSL mid-market rent and LAR Housing Trust mid-market rent as well as Low-Cost Home Ownership (LCHO) which are properties that housing developers will deliver directly. In 2019/20 there were 401 affordable housing completions which is the highest number of affordable homes delivered in Aberdeen through the affordable housing supply programme. In total during 2019/20 Aberdeen City Council's total allocation for affordable housing was £32.537m.
Community Learning and Development Strategy 2018-22 agreed.	Aberdeen City Council	568 activities run by CLD team: 239 Youth Work 113 Healthy Minds 113 Family Learning 103 Adult Learning

		<p>1087 unique participants:</p> <p>554 Youth Work 227 Adult Learning 203 Family Learning 111 Healthy Minds</p> <p>New enrolments:</p> <p>819 Youth Work 442 Adult Learning 357 Healthy Minds 295 Family Learning</p> <p>Total learner hours: 24533</p>
<p>Agreement of Local Housing Strategy 2018-23. Aim of ensuring people in Aberdeen live in good quality sustainable homes, which they can afford and that meet their needs.</p>	<p>Aberdeen City Council</p> <p>Community Planning Partners</p> <p>Private Rented Sector</p> <p>Local Housing Associations</p>	<ol style="list-style-type: none"> 1. There is an adequate supply of housing across all tenures and homes are the right size, type and location that people want to live in with access to suitable services and facilities. 2. Homelessness is prevented and alleviated. 3. People are supported to live, as far as is reasonably practicable, independently at home or in a homely setting in their community. 4. Consumer knowledge, management standards and property condition is improved in the private rented sector. 5. Fuel poverty is reduced which contributes to meeting climate change targets. 6. The quality of housing of all tenures is improved across the city.

<p>Development of UNICEF Child Friendly Cities accreditation programme</p>	<p>Aberdeen City Council Police Scotland UNICEF</p>	<p>Significant work has been undertaken to evaluate our current practices and approaches and to inform the creation of a joint action plan which will be supported and delivered by a range of our Community Planning Partners. Through discussion with a range of professionals and young people, we will be prioritising a number of key areas in accordance with the award framework. These are:</p> <ul style="list-style-type: none"> • Culture • Communication • Co-operation and Leadership • Place • Participating and, • Child-Friendly Services. <p>These focus areas require all services to child and young person friendly and to routinely apply a child rights-based approach (CRBA) to design, develop and commission services. They also ask that children and young people are genuinely considered throughout the decision-making processes.</p> <p>Work towards achieving CFC status has seen a steady increase in the number of committee reports which consider children's rights and council officers are now more consistently seeking direct engagement with children and young people on issues that directly affect them.</p> <p>Examples of this include the engagement of 3343 children and young people during consultation around the review of holiday patterns. As we work to become a Child Friendly City, we have worked closely with our digital partner, Microsoft, to develop an Equalities and Child Rights Impact Assessment. This will embed a greater understanding and broader understanding of the importance of children's rights and ensure that all Council decisions are informed by the extent to which they help uphold these.</p>
--	---	--

Community Benefit Clauses	Aberdeen City Council	<p>Clauses within contracts and frameworks requiring tenderers to commit to undertaking some form of social benefit in addition to the core purpose of the contract.</p> <p>Training & recruitment; providing sub-contracting opportunities or otherwise improving the social, economic or environmental wellbeing of the local authority's area.</p> <p>For example, the provision of apprenticeship and placement schemes, Real Living Wage provision, employability engagement activities, promotion of adopting and fostering.</p>																
Scottish Welfare Fund	Aberdeen City Council	<p>During the year 2019/20 the following numbers of grants were distributed:</p> <p><u>Crisis Grants</u></p> <table data-bbox="683 694 1142 837"> <tr> <td>Single parents</td> <td>1870</td> </tr> <tr> <td>Couples with children</td> <td>461</td> </tr> <tr> <td>Other with children</td> <td><u>128</u></td> </tr> <tr> <td>Total</td> <td>2459</td> </tr> </table> <p><u>Community Care Grants</u></p> <table data-bbox="683 917 1142 1061"> <tr> <td>Single parents</td> <td>809</td> </tr> <tr> <td>Couples with children</td> <td>158</td> </tr> <tr> <td>Other with children</td> <td><u>48</u></td> </tr> <tr> <td>Total</td> <td>1015</td> </tr> </table> <p>Total amount awarded - £892,215</p>	Single parents	1870	Couples with children	461	Other with children	<u>128</u>	Total	2459	Single parents	809	Couples with children	158	Other with children	<u>48</u>	Total	1015
Single parents	1870																	
Couples with children	461																	
Other with children	<u>128</u>																	
Total	2459																	
Single parents	809																	
Couples with children	158																	
Other with children	<u>48</u>																	
Total	1015																	
Priority Families	<p>Aberdeen City Council</p> <p>Action for Children</p> <p>Police Scotland</p>	<p>The Priority Families Service supports families who are affected by multiple problems and at risk of poor life outcomes. A whole family approach is delivered through a dedicated Support Worker and a Police Officer with families receiving up to 12 months of intensive and persistent support in their own home, school and community to address the issues affecting them. The team also comprises an Employment Coach and an Activity Support Co-ordinator and is registered with the Care Commission.</p>																

		<p>Outcomes for families supported in 2019/20 (comparing 6 months pre-intervention and 6 months post intervention) include:</p> <ul style="list-style-type: none"> · 96% reduction in criminal charges · 68% reduction in Police vulnerable person's reports · 62% improvement in parenting skills · 71% improvement in family routines · 58% improvement in home living conditions · 69% of children/young people and 83% of adults reported improved physical fitness/participation in sport and activities and an improved understanding of healthy living. · 76% of adults reported improved personal functioning and wellbeing · 84% of adults participated in employability activities
Fairer Scotland Duty	Aberdeen City Council NHS Grampian	Consideration of the impact of new strategies on socio-economic inequality.

Priorities for 2020/21

During 2020/21 there has been a very strong focus on mitigating the impacts of Covid-19 across the City, with high profile examples being the creation and disbursement of the Lord Provost’s Charitable Fund; the distribution of Crisis Grants, delivery of free food packages; maintaining school lessons through Google classroom, and the development of the ‘Fit Like’ Hubs. This response will be reported on extensively in the Child Poverty Action Report for 2020/21, that will be delivered in mid 2021.

In addition to this work, work has continued where possible to work towards the LOIP outcomes through identified Improvement Charters. The following priorities have also been identified:

New Actions for 2020/21					
Via Healthier, Wealthier Children Fund (HWCF): Capturing the lived experience of children in poverty	Reduce the cost of living. Engagement and participation Enabling Tackling stigma	NHS Grampian Aberdeen City Council CFINE Robert Gordon University	March 2022	March 2021	
Update to March 2021					
<p>In the generic feedback received against the first year LCPAR’s, the need to capture the lived experience of people in poverty was highlighted as an opportunity whereby regions could strengthen their action plans by enabling those experiencing poverty in their communities to inform and influence planning activities. Further emphasis was put on this with the recommendations of the Independent Care Review (previously referenced) published in February 2020. The recommendations were based on the voices of care experienced children and young people; many of whom had experience of poverty.</p> <p>A proportion of the HWCF has been allocated to develop a creative approach to capturing the lived experience of children in poverty. A creative based approach to engage with children attending a holiday programmes with CFINE was intended, but has had to be deferred due to Covid-19. While this activity will indirectly give children and young people some knowledge and skills that may reduce the cost of living in the home (cost effective cooking, recycling), it will have added benefits not directly linked to the drivers of poverty, such as helping to tackle the stigma of poverty.</p> <p>Seeking to understand the lived experience of children in poverty has become more important than ever as we begin to see the impacts of COVID-19 on our society. We will apply the GIRFEC framework in working with children to continue to hear their voices, and will support and enable them to inform and influence actions.</p>					

Via Healthier, Wealthier Children Fund (HWCF): Research into the implementation of the Financial Inclusion Pathway	Increasing uptake of social security Reducing the cost of living	NHS Grampian Robert Gordon University	March 2022	March 2021	
Update to March 2021					
<p>A research proposal to understand the experiences of women, and of Health Visitors and family Nurses, around the implementation of the Financial Inclusion Pathway has gained ethics approval. Focus groups were due to start in summer 2020, however there is likely to be some delay due to Covid-19.</p> <p>This research will let us know how women feel about enquiries being made with regard to their financial situation. The output will enable us to share learning with clinical colleagues and financial support agencies. If there are things that can be done to improve the pathway or make it more acceptable to women then modifications can be made at an early stage. Where the pathway is working well will share these experience, letting colleagues know that their efforts are valued by women.</p> <p>The research report will be published and appended to our 2021/22 LCPAR.</p>					

Capturing the lived experience of low income families	Increasing uptake of social security Reducing the cost of living Increasing income through employment	NHS Grampian Robert Gordon University CFINE Fersands Project	March 2022	March 2021	
Update to March 2021					
<p>NHSG has commissioned a study to capture lived experience of low income families. The study will be undertaken by Robert Gordon University in partnership with CFINE, the Woodside Pantry and the Fersands project. It had been anticipated that participants would be recruited and interviews conducted in March and April 2020, however this has been deferred due to Covid-19. It is hoped that the study will now be able to commence in late summer/ early autumn.</p> <p>Measures to determine 'in work' poverty are difficult to determine, but one of the indicators used is the number of working families claiming Working Tax Credits. In data published for 2017/18 showed that working families in Aberdeen City were least likely to be claiming Working Tax Credits, indicating that as a local authority area the comparative rates of in work poverty are less than other parts of Scotland.³ However local data tells us that there are still families, where at least one adult is working, that are still experiencing poverty across Aberdeen. This is anticipated to be even more so, as we emerge from COVID-19.</p>					
Providing more support to children and families in the hospital setting by providing advice, signposting and warm hand-overs to specialist	Engagement and participation	NHS Grampian	March 2022	March 2021	

³ <https://www.scotpho.org.uk/life-circumstances/income-and-employment/data/working-age-poverty>

financial support services, with regard to all aspects of income maximisation	Tackling stigma Increasing uptake of social security Reducing the cost of living	Aberdeen City Council SAMH			
Update to March 2021					
<p>SAMH has been commissioned to deliver pilot project for 6 months starting in summer 2020. A Primary Care Link Worker with experience in engaging with families, income maximisation/ financial inclusion knowledge, and strong links with support services would attend the hospital setting one day per week (RACH and Aberdeen Maternity Hospital) to offer direct support to families and/or provide warm hand-over to specialist financial support agencies as required. The service would include all aspects of 'money matters', including debt advice, support to apply for social security benefits, budgeting, and employability for example.</p> <p>Clinical staff would benefit from the increased confidence of having an 'expert' colleague to offer this support to families, and who will share their knowledge with the wider team as required. This work will also link well with Child Protection and neglect priorities.</p> <p>Anonymised data will be collected over the pilot period to provide information with regard to numbers of contacts, types of support required, onward referrals and outcomes. The pilot will be evaluated to inform a sustained service implementation. Unfortunately the pilot start has needed to be deferred due to the impact of COVID-19.</p>					
Promote and distribute information and resources designed to address aspects of poverty	Increasing uptake of social security Reducing the cost of living Increasing income through employment	NHS Grampian Aberdeen City Council Third Sector Partners	March 2022	March 2021	

Update to March 2021					
<p>The Scottish Government have announced several new measures to support people experiencing poverty as a result of COVID-19, such as the furlough scheme, and financial grants for certain groups. Many third sector agencies are also offering support, such as One Parent Scotland Families, Scotland who are launching an energy fund⁴ on 12th June to support single parent families. We have a role in ensuring that those that can benefit from such opportunities are aware of them and can be supported to access them if required, and as such we will develop a forum/mechanism whereby people can access information easily, and in one place where possible.</p>					
Investment in affordable housing through Strategic Housing Infrastructure Plan (SHIP)	Reducing the cost of living	Aberdeen City Council Registered Social Landlords Developers Scottish Government	March 2022	March 2021	
Update to March 2021					

⁴ <https://opfs.org.uk/get-involved/news-and-events/news/100k-funding-for-fuel-payments-secured-by-one-parent-families-scotland/>

351 units completed, £29.4m budget to deliver these.					
Improve knowledge of Adverse Childhood Experiences with a view to better understanding the long term impacts of poverty and interconnected work-streams	Reducing the cost of living	Community Planning Partners	March 2022	March 2021	
	Income from employment	Care Experienced Young People			
Update to March 2021					
Actions to engage directly with care experienced young people are reflected in Corporate Parenting action plans. Learning and reflection as a result of the recent Care Inspectorate report ⁵ on the review of inspections for children and young people in need of care will be incorporated into our planning.					

⁵ <https://www.careinspectorate.com/images/documents/5817/Review%20of%20findings%20from%20inspection%20programme%20for%20CYP%202018%20to%202020.pdf>



Community Planning Aberdeen

Progress Report	Community Justice Outcome Activity Annual Return for submission to Community Justice Scotland
Lead Officer	Derek McGowan, Chief Officer Early Intervention and Community Empowerment
Report Author	Christopher Parker, Community Justice Officer
Date of Report	23 September 2021
Governance Group	CPA Management Group – 27 October 2021

Purpose of the Report
The purpose of this report is to seek the endorsement of the CPA Management Group of the completed Community Justice Outcome Activity Annual Return for submission to Community Justice Scotland.

Summary of Key Information
<p>1 BACKGROUND</p> <p>1.1 The Community Justice (Scotland) Act 2016 requires community justice statutory partners in each local area to report and publish annually on outcome activity. The LOIP Annual Report included information about the progression of improvement work in relation to Community Justice, and provided CPA's formal published report on outcome activity during the year.</p> <p>1.2 In addition, Community Justice Scotland (CJS) is required to publish (and submit to Scottish Ministers) a national report setting out its assessment of performance across Scotland in relation to the achievement of the national outcomes. To this end, CJS provide a template for completion by local areas, which is required to be returned to them by 24th September 2021. A draft was submitted to CJS meeting the deadline and it was agreed that amendments could be submitted after this date. This was agreed on two grounds, firstly the post of Community Justice Officer had been vacant and secondly Aberdeen City had been refreshing the LOIP. The draft completed template is attached as an appendix to this report.</p> <p>1.3 The CPA Community Justice Group have progressed some improvement work during the course of the year, updates on which have been submitted to the Management Group, and the return/template captures relevant data and information about impact from this work. CJS have amended the reporting requirements for this year in acknowledgement of the disruption of COVID. The report does ask additional questions regarding the impact of COVID.. Contributions to the report have been sought from members of the CJ Group, including the community representatives, and from project leads (where they are not members of the CJ Group.)</p> <p>2 NEXT STEPS</p>

2.1 Subject to the endorsement of the draft return/template by the CPA Management Group, CJS will be informed of any amendments and the report will be finalised.

Recommendations for Action

It is recommended that members of the CPA Management:

endorse the draft Community Justice Outcome Activity Annual Return for submission to Community Justice Scotland.

Opportunities and Risks

The submission of this return provides an opportunity to highlight at a national level (to CJS and to Scottish Ministers) improvement work which has been undertaken by partners in Aberdeen during the past year. This year in particular the report demonstrates some pro-active responses to a national emergency.

Failure to demonstrate progress towards achieving improvement in outcomes carries a reputational risk for CPA.

Consultation

Who was consulted in the preparation of this report?

Members of the CJ Group, including community representatives, and other CJ project leads.

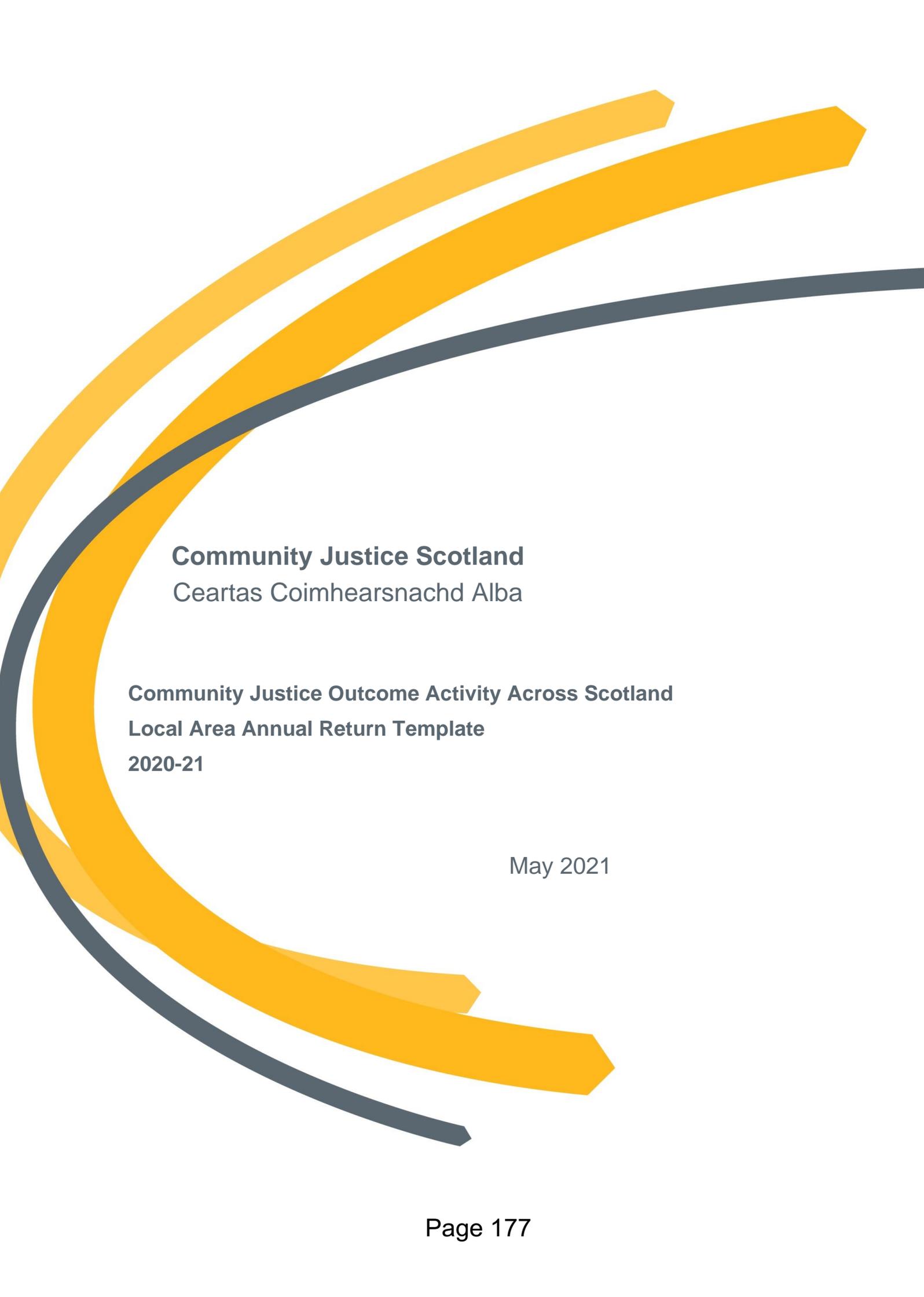
Background Papers

N/A

Contact details:

Name	Christopher Parker
Title	Community Justice Officer
Email Address	chparker@aberdeencity.gov.uk

Appendix 1: Community Justice Outcome Activity Annual Return 2020-21



Community Justice Scotland
Ceartas Coimhearsnachd Alba

Community Justice Outcome Activity Across Scotland
Local Area Annual Return Template
2020-21

May 2021

1. Background

The introduction of the [Community Justice \(Scotland\) Act 2016](#) (the Act) triggered the formal implementation of the new model of Community Justice in Scotland. A number of key documents are associated with the Act including the [National Strategy](#), [Guidance for local partners in the new model for community justice](#), [Justice in Scotland: Vision & Priorities](#) and the [Framework for Outcomes, Performance and Improvement](#).

The Act places a duty on community justice statutory partners to produce a Community Justice Outcome Improvement Plan (CJOIP) which outlines key local needs and priorities and the plans and actions to address these against a backdrop of the documents noted above. Beyond this, the partners are also tasked with reporting, on an annual basis, the community justice outcomes and improvements in their area, again with reference to the associated strategy, guidance and framework documents and, when complete, submit those annual reports to Community Justice Scotland (CJS)¹.

CJS is committed to working in partnership with community justice partners and have designed the template and guidance to support local areas in reporting on their annual outcomes and improvements in a meaningful way that captures necessary data in an effective and efficient manner. It also supports areas in fulfilling their statutory obligations on annual reporting under section 23 and fulfils our requirement to consult on the preparation of an annual report on performance in relation to community justice outcomes under section 27(3).

CJS recognises that there are a set of circumstances at time of writing that make this process different from the three previous Annual Outcome Activity Returns; namely:

1. The Covid-19 pandemic which was present for the entirety of the 2020-21 reporting period and will continue to have implications for the work of community justice partners.
2. The review of the Outcomes Performance and Improvement Framework (OPIF) which is running concurrently with the Outcome Activity Returns process. Until the review of the OPIF has concluded CJS recognises a transitional template (such as this one) is likely to be required.

To allow for both of these, CJS surveyed community justice partnerships in April 2021 seeking views on the completion of the annual report template covering the

¹ Guidance for statutory partners on this annual reporting process – to which community justice partners must have regard - is available at paragraphs 6.38-6.42 of the "Guidance for local partners in the new model for community justice" (linked to above).



period 2020-21. The 2020-21 template takes into account the feedback from 17 completed surveys with the following changes:

1. The most substantial change is the focus on outcomes taking account of the indicators rather than asking partnerships to report on progress against each individual indicator.
2. We have created space for community justice partners to reflect on the collective achievement they are most proud of during the reporting period.
3. There is an opportunity to reflect the impact of the pandemic on community justice activity under each of the outcomes. There is a dedicated section to give partners the opportunity to reflect on the impact of the Covid-19 pandemic on the partnership.

This template includes a new section to allow community justice partners to reflect on how they have, or intend to, implement activity in response to recommendations in the 2019-20 Annual Outcome Activity Return.

CJS would like to extend thanks to those community justice partners that took the time to complete the template survey, spoke to us as part of the OPIF review process and to those that sense-checked the guidance points in the draft template.

2. Statement of Assurance and Data Usage

The information submitted to Community Justice Scotland using this template is for the primary purpose of fulfilling the requirement under s27 of the Community Justice (Scotland) Act 2016 for Community Justice Scotland to produce a report on performance in relation to community justice outcomes across Scotland.

In line with provisions in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR), CJS will use appropriate data to ensure that there is continuous reporting, development and progress towards the national outcomes. By providing data to CJS you are consenting to its use by CJS as indicated. Community Justice Partnerships should be aware that any information held by Community Justice Scotland is subject to statutory Freedom of Information obligations.



3. General principles of the template

The template is designed to capture a range of important data in a way that allows local partners to highlight key aspects of community justice activities, outcomes and improvements over the specified period without it being onerous or time and resource demanding. CJS has made some changes to the template this year (as outlined on pages 2-3) to account for the ongoing OPIF review process and the Covid-19 pandemic.

Most of the template is self-explanatory and, where this is the case, there is little guidance required. In the sections that require more direction for completion, the text (in blue) will outline what is expected in terms of reporting.

Template sections:

[Section 1 Community Justice Partnership / Group Details](#)

[Section 2 Template Sign-Off](#)

[Section 3 Governance Arrangements](#)

[Section 4 Progress from 2019-20 Recommendations](#) (new section for 2020-21)

[Section 5 Covid-19 Pandemic Impact](#) (new section for 2020-21)

[Section 6 Performance Reporting – National Outcomes](#)

[Section 7 Partnership Achievements](#)

[Section 8 Challenges](#) (unrelated to Covid-19 pandemic)

[Section 9 Additional Information](#)

It would be helpful if responses in each of the “evidence and data” boxes within section 6 of the template (“performance reporting”) is kept to a minimum by capturing the main points only. This allows for an efficient analysis by Community Justice Scotland on return. The use of bullet points in your answers is acceptable.

Where the template asks for evidence, a written response will suffice and there is no expectation that you send additional supporting documentation – if there are any aspects Community Justice Scotland is unclear on it will be our responsibility to request clarification where necessary.

If any response or evidence requires details about people with lived experience (e.g. evidence in respect of someone’s life story) please **DO NOT** include any personal or sensitive information (as outlined in Schedules 2 & 3 of the Data Protection Act 1998) as Community Justice Scotland does not require such information. If this is unavoidable then please ensure that the data is fully anonymised.



This is the fourth iteration of the template and guidance. If you have any queries about completing the template then please email CJSImprovement@communityjustice.scot.



4. Template Completion

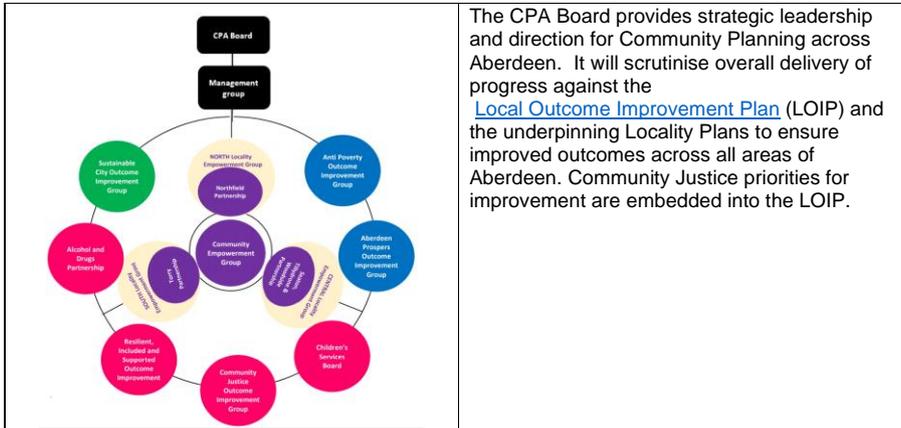
1. Community Justice Partnership / Group Details	
Community Justice Partnership / Group	Aberdeen Community Justice Group
Community Justice Partnership Group Chair	Derek McGowan, Chief Officer, Early Intervention & Community Empowerment, Aberdeen City
Community Justice Partnership / Group Coordinator	Christopher Parker, Community Justice Officer
Publication date of Community Justice Outcome Improvement Plan (CJOIP)	7th July 2021

2. Template Sign-off	
<p>The content of this annual report on community justice outcomes and improvements in our area has been agreed as accurate by the Community Justice Partnership / Group and has been shared with our Community Planning Partnership through our local accountability arrangements.</p>	
Signature of Community Justice Partnership / Group Chair:	Date:
.....	
.....	

3. Governance Arrangements
<p>Please outline below your current governance structure for the community justice arrangements in your area. This section is the same as previous templates so if there have been no changes in this respect, copying and pasting from previous template submissions is acceptable.</p>



Community Planning Aberdeen (CPA) Accountability Structure



The CPA Board provides strategic leadership and direction for Community Planning across Aberdeen. It will scrutinise overall delivery of progress against the [Local Outcome Improvement Plan \(LOIP\)](#) and the underpinning Locality Plans to ensure improved outcomes across all areas of Aberdeen. Community Justice priorities for improvement are embedded into the LOIP.

The CPA Management Group is accountable to the CPA Board and oversees the delivery of progress by our seven themed Outcome Improvement Groups (OIGs), including the **Community Justice Group** (the CJ Group).

These groups facilitate effective joint working across Community Planning partners and with communities to ensure delivery of the LOIP and locality plans remain on track, and to advise the CPA Board of any additional action required to overcome barriers.

The LOIP is complemented and underpinned by three Locality Plans for North, South and Central areas of the City. The plans identify community priorities and community ideas to be tested as part of the LOIP improvement projects. The plans take an asset based approach by working with communities to harness the skills, knowledge, experience and ideas of communities in tackling priority issues. The Locality Empowerment Groups (LEGs) will support the development and delivery of the Locality Plans in each of the three localities. The Locality Empowerment Groups (LEGs) will support the development and delivery of the Locality Plans in each of the three localities. Locality Partnerships oversee the delivery of Locality Plans with communities to ensure that improved outcomes are being achieved for our most disadvantaged communities in Aberdeen.

4. Progress From 2019-20 Recommendations

To reduce the burden of reporting on progress from 2019-20 recommendations through an additional process please detail any work the partners have undertaken, or intend to undertake, in response to the following 2019-20 recommendations:

Recommendation for CJPs	Progress / Activity during 2020-21
-------------------------	------------------------------------



<p>That community justice partners establish mechanisms to identify and engage collectively with local third sector and victims organisations.</p>	<p>2020/21 brought significant challenges for communication and the traditional mechanisms of engagement. During the early stages of lockdown each partner took great steps towards digitising their working practices and moving to virtual meetings. All the Community Justice Partners have been able to meet via MS Teams and data sharing agreements where put in place swiftly.</p> <p>This quick adoption of technology and change of working practice enabled groups such as the Housing Support Hub to meet weekly and discuss the changing needs of their service users and how best to meet those needs. The Housing Support Hub consists of Housing, Third Sector Support Providers, Social Work and NHS as required.</p> <p>These virtual forums were used for newly emerging needs such as early release from prison. This is discussed in more detail in Outcome 2, but is a good example of overcoming a newly identified risk through establishing new mechanisms and leveraging available technology to mitigate the risk.</p>
<p>That community justice partners meet statutory requirements for strategic planning. This includes being able to evidence:</p> <ul style="list-style-type: none"> a) a range of strategic needs and strengths assessment (SNSA) activity b) a published and up-to-date Community Justice Outcome Improvement Plan (CJOIP) which includes a participation statement c) a published annual report assessing progress towards outcomes 	<p>During the reporting period a Population Needs Assessment Link was undertaken. The Population Needs Assessment is a high-level analysis of key groups, priorities, and challenges across public services, including service performance and information available on the customer perspective. The PNA identifies areas where more detailed analysis is required to ensure a greater understanding of existing and potential provider strengths and weaknesses, and opportunities for improvement.</p> <p>In Aberdeen City the CJOIP is integrated in to the LOIP which has been refreshed for 2021. As part of the refresh of the LOIP the improvement projects for Community Justice have been reviewed along with membership of the Community Justice Outcomes Improvement Group.</p>



Ensure community justice SNSA activity forms a crucial component of understanding the needs of the whole area population.

See above, the CJOIP is integrated in to the LOIP and a Population Needs Assessment was conducted taking Community Justice in to account.



5. Covid-19 Pandemic Impact

This is a new section for 2020-21. It should be used to reflect some of the a) challenges/negative implications and b) opportunities/positive implications from the Covid-19 pandemic on the community justice partnership / group. There is an opportunity to reflect impact on community justice activity in Section 6 under each of the national outcomes so this section is to capture any impact on the partnership over and above this.

Area impacted	Challenges / Negatives	Positives / Opportunities
---------------	------------------------	---------------------------



<p>Our community justice partnership</p>	<p>Aberdeen Violence Against Women Partnership All meetings became virtual including operational meetings.</p> <p>Specialist support services reported increased referrals as soon as lockdown restrictions began to ease which further impacted on capacity.</p>	<p>All partnership and operational meetings became virtual which improved attendance and participation at all levels, from Decision Making Forums for the disclosure scheme to the AVAWP meetings themselves. In turn, this made it easier to arrange any focussed, short-term groups to look at any issues/pieces of work more quickly.</p> <p>The partnership focussed on the promotion of national and local preventative messaging from the outset due to the potential that abuse is more prevalent behind closed doors in family situations, or on-line. Media campaigns and initiatives were crucial with regards preventative messaging and also ensuring victims are aware of the support and assistance available to them.</p> <p>The Scottish Government Domestic Abuse campaign was well supported through social media channels and the AVAWP to ensure victims are aware that support is available locally and nationally despite COVID-19 restrictions. Local messages were translated into the 10 most requested languages and sent out through community channels to ensure the messages were as wide-reaching as possible. This included articles published in local community newsletters and distributed to locality areas, aiming to reach those who may not have internet access. With local radio supporting the campaign, this preventative multi-faceted public messaging was continued to ensure focus remained on helping the most vulnerable in our communities.</p>
---	---	--



6. Performance Reporting – National Outcomes

This section is designed to capture the evidence and data that has been used by your Partnership over the reporting period to assess progress against the national outcomes.

This year we are asking you to report on each outcome rather than against every indicator (as in previous years) but we ask that you report against the outcome **taking account** of the indicators. Please detail any specific impacts (positive and negative) the Covid-19 pandemic had on activity or progress under each of the outcomes.

We encourage you to **share life stories and practice examples** as part of your evidence and data – this enriches the final report and creates deeper understanding of community justice activity.

Please indicate where any particular factors have been a **hindrance in making progress** against a particular outcome.

NATIONAL OUTCOME ONE

Communities improve their understanding and participation in community justice

Where applicable have regard to the following indicators:

- Activities carried out to engage with ‘communities’ as well as other relevant constituencies
- Consultation with communities as part of community justice planning and service provision
- Participation in community justice, such as co-production and joint delivery
- Level of community awareness of / satisfaction with work undertaken as part of a CPO
- Evidence from questions to be used in local surveys / citizens’ panels and so on
- Perceptions of the local crime data

	Please describe the activity	Then describe the impact
Evidence and Data	<p><u>Online Public Values Simulator</u></p> <p>To ensure our communities are heard, thematic sessions have been held with our Locality Empowerment Group and</p>	<p>A total of 2,642 people took part in the Simulator exercise.</p> <p>There was substantial variation in how projects were scored by</p>

	<p>Community Planning Aberdeen launched an online simulator to enable citizens to express what is important and of value to them and for their community and this was open from 1-30 March 2021. Due to the COVID-19 pandemic and restrictions imposed, the engagement took place online.</p> <p>The values simulator was easy to use and allowed citizens to vote on the improvement projects they thought would achieve results for our City. The values simulator allowed participants to choose from a set of projects and to rank those projects in relation to the importance they have for the participant. The categories and improvement projects identified for inclusion in the simulator were a simplified version of the 15 Stretch Outcomes and 120 Improvement Projects within the Aberdeen City Local Outcome Improvement Plan of which the Community Justice Outcome Improvement Plan is integrated. The CJ Outcomes were incorporated under the heading "Support for Vulnerable People".</p> <p>The outcomes from both are being used by the Partnership to inform the development of the refreshed LOIP and Locality Plans to be considered by the CPA Board on 7 July 2021. Once the LOIP refresh and Locality plans are approved opportunities for citizens to participate in the Partnership's improvement activity both city wide and at a locality level will be promoted.</p> <p>The full report on the simulator and how this was conducted can be found Here.</p>	<p>participants, with mean scores for individual projects ranging from a low of 6.7 to a high of 31.5.</p> <p>The five highest ranking projects were:</p> <ol style="list-style-type: none"> 1. Supporting children and young people with their mental health (31.5) 2. Making sure no-one goes without food due to poverty (31.1) 3. Creating new employment and training opportunities (30.3) 4. Encouraging employers to offer the real living wage (29.5) 5. Supporting people in distress and reducing suicide rates (26.8) <p>The five lowest ranking projects were:</p> <ol style="list-style-type: none"> 1. Changing attitudes to reduce smoking (6.7) 2. Changing attitudes towards alcohol (7.6) 3. Increasing community resilience and opportunities to volunteer (11.3) 4. Support people to manage their own weight (12.3) 5. Educational input and support to children and young people regarding substance misuse (14.0) <p>While it is fair to say that the principles underpinning community justice run through many of the projects, there were two specific projects relating to community justice: Increase awareness of all forms of domestic abuse (18.8) Supporting people who are involved, or are at risk of becoming involved, in offending behaviour to get back on track (14.5)</p> <p>Participants were also given the opportunity to make suggestions. One of the standout suggestions was More services should be made available for young offenders.</p>
--	--	--



Level of community awareness of / satisfaction with work undertaken as part of a CPO	This is reported on separately as part of the CPO Annual Report.	
Perceptions of the local crime data	Not focused on by CJ Group during the year	
Other information relevant to National Outcome One		



NATIONAL OUTCOME TWO		
Partners plan and deliver services in a more strategic and collaborative way		
Where applicable have regard to the following indicators:		
<ul style="list-style-type: none"> ➤ Services are planned for and delivered in a strategic and collaborative way ➤ Partners have leveraged resources for community justice ➤ Development of community justice workforce to work effectively across organisational/professional /geographical boundaries ➤ Partners illustrate effective engagement and collaborative partnership working with the authorities responsible for the delivery of MAPPA 		
	Please describe the activity	Then describe the impact
Evidence and Data	<p>A QI approach is used for all projects, which involves focused collaborative effort involving relevant partners, aimed at testing ideas which it is thought will lead to the improvement sought. Project charters are subject to approval by the CJ Group and CPP Board.</p> <p>The following multi agency improvement projects have been progressed in this way by the CJ Group during the year:</p> <p>Employability Project (My Way To Employment (MWTE)) Aim: Increase to 30 in total, the number of individuals who are on a custodial sentence, on a Community Payback Order with a Supervision Requirement, or who have been Diverted from Prosecution who are being supported to make progress on the Employability Pipeline by September 2021</p> <p>Between March and September 2020 the project was impacted by Covid but the project was reset in October. New partners were brought into the project team to</p>	<p>The project has achieved over 50% so far with 19 individuals referred to/supported by the MWTE project to-date. Data regarding improvement in mental health has just started to be recorded.</p> <p>The below chart shows the impact of Covid and how it stalled the project not only in uptake but also in recording results. The project reset is indicated and demonstrates an immediate increase.</p>



strengthen community part and the following now being tested:

- New lead agency approach for in-custody clients via CMB
- Test new No one Left Behind referral process (including referral form) and allocation of lead professionals for community process
- Highlight service to Diversion from Prosecution team
- Publicise project to potential referral agencies – social work, court officials

Further ways of increasing referrals from CJSW are to be tested especially in light of changes to disclosure legislation.

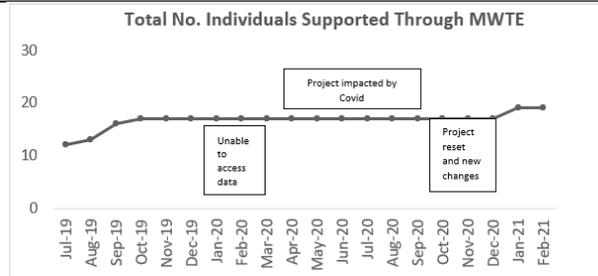
Supporting People Liberated from Prison

This project began in February 2020.

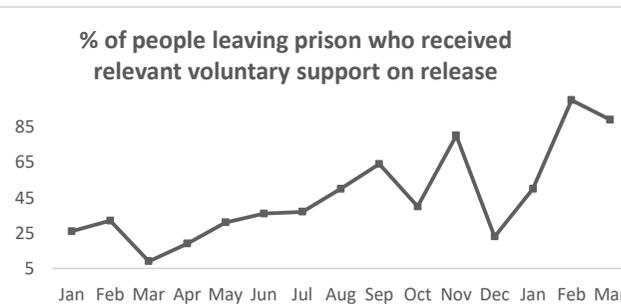
Aim: Increase % of non-statutory prisoners (aged 21+) who are offered relevant voluntary support on release from HMP Grampian by 2021

The following changes are now being tested on those individuals located within HMPYOI Grampian who are preparing for release:

- Bring forward commencement of engagement pre-release to increase quality of awareness and motivation to engage
- Engage with throughcare service providers and users to develop a co-produced, in-house media strategy within the prison to improve quality of awareness and motivation to engage
- Develop a comprehensive preparation for release information pack



It is too early at this time to assess if the changes made are having a positive, sustainable impact, as they are not all complete. Also, the level of service delivery in some areas has been negatively impacted upon by the Covid 19 pandemic, which will make measuring the actual impact of the improvement more difficult to accurately assess.



	<p><u>Early release from prison</u> Covid 19 presented challenges that required immediate leveraging of resources from partners. An example of this in Aberdeen was the response to the early release from prison. In Aberdeen an operational working group was formed consisting of; CJSW Housing ADP Homeless NHS Third Sector Throughcare</p> <p>A formal Data-Sharing Agreement was established between the working group members so actions could be planned prior to release. The group maintained contact through collaborative documents updated weekly and met fortnightly to identify releases and the needs and risks of each individual.</p>	<p>This was a direct and dynamic response to covid and therefore the raw data has yet to be processed to demonstrate impact as the response is still in place.</p> <p>A clear impact has been improved information sharing between statutory partners prior to release for all SPS releases (not just Grampian which CMB covers)</p> <p>This response has provided the ability to review cases shortly after release to ensure that a service has had contact with the prison release, and if not, co-ordinate action to remedy that situation.</p>
<p>Other information relevant to National Outcome Two</p>		
<p></p>		



NATIONAL OUTCOME THREE

People have better access to the services that they require, including welfare, health and wellbeing, housing and employability

Where applicable have regard to the following indicators:

- Partners have identified and are overcoming structural barriers for people accessing services
- Existence of joint-working arrangements such as processes / protocols to ensure access to services to address underlying needs
- Initiatives to facilitate access to services
- Speed of access to mental health services
- % of people released from a custodial sentence:
 - a) registered with a GP
 - b) have suitable accommodation
 - c) have had a benefits eligibility check
- Targeted interventions have been tailored for and with an individual and had a successful impact on their risk of further offending

	Please describe the activity	Then describe the impact
Evidence and Data	<p>See outcome 2 on Early Release from Prison measures.</p> <p>See Outcome 2 for details on the Supporting People Liberated from Prison Project. Improvement work in these areas is due to be taken forward by the following project which commenced just prior to COVID-19, and which will progress as soon as possible. This project will measure the % of people released from a custodial sentence accessing services.</p>	<p>The success of the data sharing agreement and collaboration of services will inform ongoing work towards meeting the SHORE standards. The intention is to include more partners in this working group and build on the good practices established through the emergency response.</p>

Other information relevant to National Outcome Three



NATIONAL OUTCOME FOUR
 Effective interventions are delivered to prevent and reduce the risk of further offending

- Where applicable have regard to the following indicators:**
- Use of 'other activities requirements' in CPOs
 - Effective risk management for public protection
 - Quality of CPOs and DTTOs
 - Reduced use of custodial sentences and remand:
 - a) Balance between community sentences relative to short custodial sentences under one year
 - b) Proportion of people appearing from custody who are remanded
 - The delivery of interventions targeted at problem drug and alcohol use [NHS Local Delivery Plan (LDP) Standard]
 - Number of Police Recorded Warnings, police diversion, fiscal measures, fiscal diversion, supervised bail, community sentences (including CPOs, DTTOs and RLOs)
 - Number of short-term sentences under one year

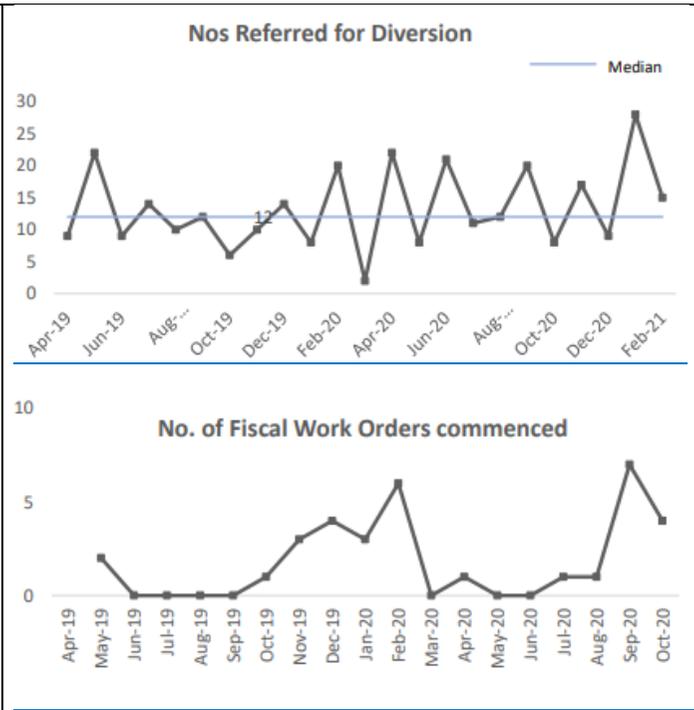
	Please describe the activity	Then describe the impact
<p>Evidence and Data</p>	<p>Use of 'other activities requirements' in CPOs and Quality of CPOs and DTTOs are reported separately as part of the CPO Annual Report.</p> <p>Over the last year Police have had to deal with a number of different changes to the CJ environment. The cessation of many CJ processes meant that Police had to look at alternative routes from custody. The implementation of the CJ Act in 2018 and the presumption of liberty enshrined within same already meant that this was common practice within Police routine, but the need to keep people away from the custody setting where possible, meant that use of fixed penalties and other measures such as charging at scene became commonplace.</p>	<p>Police Scotland create a Crimefile when an incident is reported. The following graph shows all the Crimefiles that were investigated and resolved through means of a disposal such as a warning or fine. Each Crimefile could have several offences recorded within it and they were all resolved through one disposal.</p>



	<p>Police also had to work to understand, and implement new and untested work processes under the various pieces of Coronavirus legislation, which was then underpinned by the Police stance of the 4E's – Engage, Explain, Encourage and Enforce – with the understanding that the last E had to be used as a means of last resort to ensure our core role of Policing by Consent was not undermined. This included use of fixed penalties for breaches of COVID regulations where applicable.</p>	<div data-bbox="987 311 1615 687"> <table border="1"> <caption>Count of Crimefiles</caption> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>2019/20</td> <td>532</td> <td>447</td> <td>444</td> <td>322</td> </tr> <tr> <td>2020/21</td> <td>332</td> <td>273</td> <td>229</td> <td>256</td> </tr> </tbody> </table> </div> <p>This graph shows a decline in the Crimefiles that were resolved by disposal but what this really demonstrates is the impact of the pandemic and the shutdown of the night time economy. It also highlights that 2020/21 may well be incomparable to previous years.</p>	Year	Q1	Q2	Q3	Q4	2019/20	532	447	444	322	2020/21	332	273	229	256
Year	Q1	Q2	Q3	Q4													
2019/20	532	447	444	322													
2020/21	332	273	229	256													
	<p><u>Diversion from Prosecution</u> <u>This project began in September 2019.</u> <u>Aim:</u> <u>Extend the multi-agency problem solving approach to all 16 and 17 year olds charged with an offence to reduce the likelihood of reoffending which could lead to a conviction by 2021; and Increase the number of cases of people appropriately diverted from prosecution by 2021.</u></p> <p>The following changes are being tested City Wide:</p> <ul style="list-style-type: none"> • <u>Training/awareness-raising input on Diversion from Prosecution</u> • <u>Briefing note for Police staff</u> 	<p><u>The numbers of referrals for Diversion were at a Median of 12 since April 2019. The number of Fiscal Work Orders dropped initially during COVID, potentially due to challenges relating to undertaking Unpaid Work during the lockdown restrictions (see outcome 6). The referrals began to increase after the first lockdown but were affected by a further lockdown, albeit to a lesser degree as diversions adapted. The below graphs show the numbers referred over the year. The effect of covid measures can most clearly be seen in the graph representing commenced fiscal work orders.</u></p>															

Formatted: List Paragraph, Bulleted + Level: 1 + Aligned at: 0.63 cm + Indent at: 1.27 cm





Other information relevant to National Outcome Four

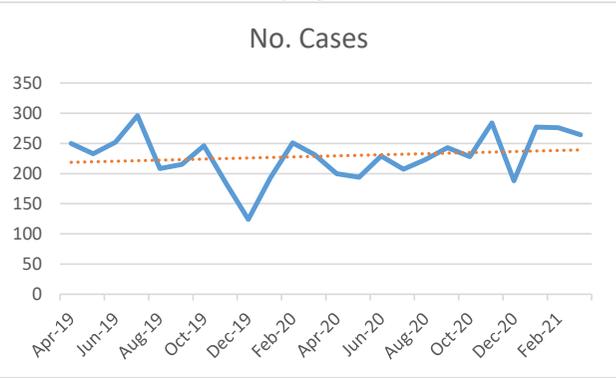


NATIONAL OUTCOME FIVE

Life chances are improved through needs, including health, financial inclusion, housing and safety, being addressed

Have regard to the following indicator:

- Individuals have made progress against the outcome

	Please describe the activity	Then describe the impact
<p>Evidence and Data</p>	<p>Aberdeen City Council employs a Financial Inclusion Team which remained open and responsive throughout 2020/21. The Aberdeen Financial Inclusion Team is a free, expert and confidential service provided for residents of Aberdeen City.</p> <p>The Money Advisers can:</p> <ul style="list-style-type: none"> • Check you are receiving all you are entitled to. • Assist you to challenge benefit decisions you are unhappy with. • Provide representation at appeal tribunals. • Help you deal with all types of problem debts. • Provide advice on what your creditors can/can't do and speak to your creditors on your behalf. <p>The team provide an advice line, duty and appointment service for clients, staff and partner agencies.</p>	<p>During the early stages of the lockdown it was felt that the uncertainty of closing so many businesses and the complexities of furlough would increase contact with the team.</p> <p>The below chart demonstrates that this was generally the case but not as dramatically as expected. The key indicator for the uptake in the service is through comparison of the December cases. This month is generally low with an increase in contact in January. The graph shows that this is still the case in 2020 but still the numbers are relatively high.</p> 

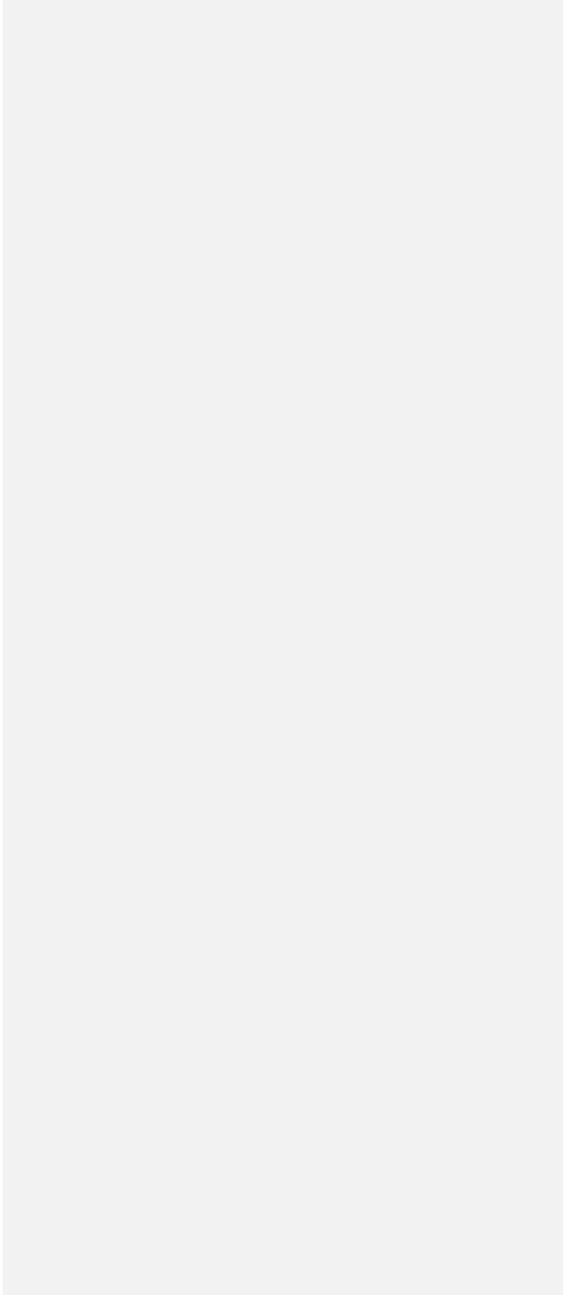


		It is also worth noting that the Citizens Advice Bureau were awarded government funding to support Universal Credit claims. This will undoubtedly have affected the number of cases.
Other information relevant to National Outcome Five		



NATIONAL OUTCOME SIX People develop positive relationships and more opportunities to participate and contribute through education, employment and leisure activities		
Have regard to the following indicator: ➤ Individuals have made progress against the outcome		
	Please describe the activity	Then describe the impact
Evidence and Data	<p><u>Community Payback</u> During the initial lockdown all unpaid work was placed on hold. As the year progressed there was increasing uncertainty on how long services would remain undeliverable. This prompted a more fluid approach to what was considered unpaid work and other activity Work began on Blended Learning Packs and by October there was a suite of both educational and practical projects that could be completed at home.</p>	<p>We found that several clients who would not have managed traditional placements in traditional settings, completed many more hours and completed their orders. This included males and females with Health, Mental Health and Substance issues and women who often do not manage the settings and/or work type due to child-care or trauma issues.</p> <p>An unforeseen benefit was contact between workers and clients significantly increased with working from home options. Relationships improved and more welfare work could be undertaken. When clients are avoiding unpaid work they also tend to avoid their workers and it is more difficult to offer a welfare service when needed.</p>
Other information relevant to National Outcome Six		





NATIONAL OUTCOME SEVEN Individuals' resilience and capacity for change and self-management are enhanced		
Have regard to the following indicator: ➤ Individuals have made progress against the outcome		
	Please describe the activity	Then describe the impact
Evidence and Data	Community Payback (See Outcome 6)	As stated in Outcome 6 the blended working packs introduced by the Unpaid Work Team was a great success. It enabled engagement with people that previously have not engaged with community payback and demonstrated that a flexible approach and supporting people to self-manage activities can actually increase engagement and communication.
Other information relevant to National Outcome Seven		



7. Partnership Achievement

Virtual courts

During the closure of courts steps were taken to develop the means in which to continue holding court sessions without risking public health. Holding virtual courts was explored as an option and during summer 2020 summary trials began to be held. To make this work the jury occupied a nearby cinema. Restrictions were placed on the requirements for a virtual court, for example No digital evidence could be used, no interpreter and no more than one accused. From February 2019 Domestic Abuse cases began to be heard in this manner.

So far two trials have been taken to conclusion and 14 are scheduled.

Aberdeen Violence Against Women Partnership

The Data Set subgroup produced their initial reports this year. Although still under development, this has provided the basis of a quality assurance programme going forward and has given all relevant partners the opportunity to input relevant data to allow the AVAWP to have a more holistic view.

8. Challenges

This question was presented to Community Justice Partners and they were asked to reflect on the challenges outwith the pandemic. The feedback was that 2020-21 has been a year defined by COVID-19 and there is no challenge or barrier that was not affected or influenced in some way.

An example of this is the ongoing engagement and attendance at meetings. Prior to 2020 a meeting would have been held in person and not every partner would have been able to attend. This was a challenge that may have been met by the use of digital platforms. The pandemic accelerated this and enabled an increased attendance, but this posed different challenges through the adoption of technology and the different paces that partner organisations were able to adopt the technology. This would have been a challenge regardless of the pandemic but it was born out of necessity due to the pandemic.

In summary the partnership was unable to answer this question.

9. Additional Information



This page is intentionally left blank



Community Planning Aberdeen

Progress Report	Joint Response to National Care Service for Scotland Consultation
Lead Officer	Gale Beattie, Chair of CPA Management Group and Aberdeen City Council Director of Commissioning
Report Author	Michelle Cochlan, Community Planning Manager
Date of Report	15 October 2021
Governance Group	CPA Management Group – 27 October 2021

Purpose of the Report

This report presents a joint response to the National Care Service for Scotland Consultation on behalf of Community Planning Aberdeen. The deadline for submission to the Scottish Government is 2 November 2021.

Summary of Key Information

1 BACKGROUND

- 1.1 The [National Care Service for Scotland Consultation](#) opened on 9 August. It sets out Scottish Government proposals to improve the delivery of social care in Scotland. The Independent Review of Adult Social Care recommended the creation of a National Care Service, with Scottish Ministers being accountable for adult social care support. However, the Scottish Government's ambition is to go beyond that. The consultation seeks views on creating a community health and social care service that supports people of all ages.
- 1.2 The Community Planning Aberdeen Board agreed on 15 September 2021 to prepare a joint response to the consultation.

2 CPA JOINT RESPONSE

- 2.1 The draft CPA Joint Response to the consultation included in Appendix 1 is based on contributions received from the following partners:

- Aberdeen City Council
- Active Aberdeen Partnership via Sport Aberdeen
- Aberdeen City Health and Social Care Partnership
- Skills Development Scotland
- North East Scotland College
- Police Scotland
- Scottish Fire & Rescue Service

3 NEXT STEPS

3.1 Subject to the approval of the CPA Management Group and Chair of Community Planning Aberdeen, the response included in Appendix 1 will be submitted to the Scottish Government by the deadline of 2 November 2021.

Recommendations for Action

It is recommended that members of the Management Group:

- i) Approve the CPA Joint response to the National Care Service for Scotland Consultation .

Opportunities and Risks

The response included in Appendix 1 makes comments on the opportunities and risks presented by the proposals made in the National Care Service for Scotland Consultation.

Consultation

The following people were consulted in the preparation of this report:

Community Planning Aberdeen Board Members
Community Planning Aberdeen Management Group Members

Background Papers

The following papers were used in the preparation of this report.

[A National Care Service for Scotland - Consultation](#)

Contact details:

Michelle Cochlan
Community Planning Manager
Aberdeen City Council
Email: mcochlan@aberdeencity.gov.uk

A National Care Service for Scotland - Consultation
RESPONDENT INFORMATION FORM

Please Note this form **must** be completed and returned with your response. To find out how we handle your personal data, please see our privacy policy: <https://www.gov.scot/privacy/>

Are you responding as an individual or an organisation?

- Individual
 Organisation

Full name or organisation's name

Community Planning Aberdeen

Email

communityplanning@aberdeencity.gov.uk

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

- Publish response with name
 Publish response only (without name)
 Do not publish response

Information for organisations:

The option 'Publish response only (without name)' is available for individual respondents only. If this option is selected, the organisation name will still be published.

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

- Yes
 No

Organisations – your role

Please indicate what role your organisation plays in social care

- Other public sector body

Questions
Improving care for people

Improvement

Q1. What would be the benefits of the National Care Service taking responsibility for improvement across community health and care services? (Please tick all that apply)

- Better co-ordination of work across different improvement organisations
 Effective sharing of learning across Scotland
 Intelligence from regulatory work fed back into a cycle of continuous improvement
 More consistent outcomes for people accessing care and support across Scotland
 Other – please explain below

We welcome the policy intention of this consultation to strengthen and improve the vital adult social care services throughout Scotland. However, we do not agree that establishing a National Care Service is the right approach. Implementing a new structure in itself will not necessarily give rise to the identified improvements. The implication is that there is currently no means by which these improvements can take place, which is not the case.

The framework, governance and delivery of key structures within the Community Health and Care spectrum has been subject to numerous refinements and reviews over a number of years. There are assessed to be strong and effective systems in place for the delivery of that service locally. From an Aberdeen City perspective, there is positive evidence of learning, development, accountability and ensuring that services deliver what is expected from feedback from our service users/communities. External reviews, over a period of years, would support that position. Respecting the need to achieve efficiencies and consistency, both fiscal and in terms of service, coupled with the actual complexity of arrangements across the country, perhaps there could be a more simplistic approach to achieving that via cross sector redesign, more intuitive consultation and looking at what is 'good' and replicating that elsewhere, if apparent that services/standards are more variable in different areas.

The proposals outlined in this consultation paper do not reflect the characteristics of recognised best practice in securing improvement in health and social systems and disempower those operating in the system.

Community Planning Aberdeen has invested significantly in the use of the Institute for Healthcare Improvement (IHI) Model for Improvement. It is central to the delivery of Aberdeen's Local Outcome Improvement Plan and there is a growing confidence around its use across all services. This investment in strategic quality improvement is paying dividends. We have a coalition of the willing in the adoption of a formal quality improvement methodology, including our health and social partnership, but results take time and require a consistency of commitment to achieve them.

We believe that an approach mirroring that of the Patient Safety Programme would be more successful. It would enhance the visibility of the commitment to improvement at a national level whilst supporting the activation of improvement at a local level, building on the momentum many of us have been building within local systems. The Government's commitment to improvement in the adult social care must match that of the investment made in the adult medical care treatment system.

The current national approach in relation to "improvement" across the adult social care system is significantly under-developed in comparison to the infrastructure in place to support adult social care within the hospital-based treatment system of care.

For example, since its inception, the role of the Care Inspectorate within the improvement space has been limited. Their focus has been, and remains, on their scrutiny duty. This continued to be evident during the Covid pandemic. Our experience of involving the Care Inspectorate in local Care Home assurance meetings reflected their contribution to the improvement journey and was in our experience extremely limited. During these conversations they continued to look through the lens of scrutiny and regulation.

If the plans for a National Care Service (NCS) are progressed and the Care Inspectorate is to be given an enhanced responsibility for improvement, then there needs to be a radical overhaul of the approach and capabilities of the Care Inspectorate. Such a radical overhaul should be informed by the development of Health Improvement Scotland and the significant investment in national improvement programme's like the National Patient Safety Programme.

- Q2.** Are there any risks from the National Care Service taking responsibility for improvement across community health and care services?

Risk that a 'National' approach, dilutes the current progress, ownership and accountability for improvement in social care services.

Risk of disempowerment of staff operating at a local level both between now and the establishment of the national care service and once it is in operation.

Risk of making poor decisions based on limited options appraisal and without examination of the full implications for the health system.

Risk of lack of capacity and leadership to make these proposed changes work at a national level thereby repeating criticism of current system.

Access to Care and Support

Accessing care and support

- Q3.** If you or someone you know needed to access care and support, how likely would you be to use the following routes if they were available?

Not answered – question for individuals

- Q4.** How can we better co-ordinate care and support (indicate order of preference)?

Not answered – question for individuals

Support planning

- Q5.** How should support planning take place in the National Care Service? For each of the elements below, please select to what extent you agree or disagree with each option:

Not answered – question for individuals

- Q6.** The Getting It Right For Everyone National Practice model would use the same language across all services and professionals to describe and assess your strengths and needs. Do you agree or disagree with this approach?

Not answered – question for individuals

- Q7.** The Getting It Right for Everyone National Practice model would be a single planning process involving everyone who is involved with your care and support, with a single plan that involves me in agreeing the support I require. This would be supported by an integrated social care and health record, so that my information moves through care and support services with me. Do you agree or disagree with this approach?

Not answered – question for individuals

- Q8.** Do you agree or disagree that a National Practice Model for adults would improve outcomes?

Agree

Disagree

Please say why.

Without access to the evidence base underpinning the proposal for the practice model, it is difficult to either agree or disagree. The Scottish Government introduced the GIRFEC practice model for children services, but we are unaware of any formal evaluation which the government has commissioned to evaluate the impact of this practice model. If an evaluation does exist, then its findings should be publicly available if it is informing the proposals within this consultation document.

Right to breaks from caring

Q9. For each of the below, please choose which factor you consider is more important in establishing a right to breaks from caring.

Not answered – question for individuals

Q10. Of the three groups, which would be your preferred approach?

Not answered – question for individuals

Using data to support care

Q11. To what extent do you agree or disagree with the following statements?

There should be a nationally-consistent, integrated and accessible electronic social care and health record.

Strongly Agree	Agree	Neither Agree/Disagree	Disagree	Strongly Disagree
X				

Information about your health and care needs should be shared across the services that support you.

Strongly Agree	Agree	Neither Agree/Disagree	Disagree	Strongly Disagree
X				

Q12. Should legislation be used to require all care services and other relevant parties to provide data as specified by a National Care Service, and include the requirement to meet common data standards and definitions for that data collection?

- Yes
 No

The premise of the question is based on the establishment of a National Care Service but we do not agree that this is a requirement to improve the specification, collection, sharing and use of data (based on FAIR data principles). The consultation highlights the importance of improved practices and use of data. Our view is that this should not wait nor be dependent upon the creation and design of a National Care Services.

Q13. Are there alternative approaches that would address current gaps in social care data and information, and ensure a consistent approach for the flow of data and information across the National Care Service?

We are aware that the UK Government recently published its national data strategy. An equivalent Scottish Government strategy is required to tackle three fundamental challenges: data is scattered; data cannot be accessed digitally and data is not interoperable. Common data standards and data sharing is critical; however, accessibility and interoperability of data is most critical at a local level where operational decisions are made for both commissioning and case work. The consultation refers to the need to reduce siloed data, but it is unclear what evidence has been considered which suggests that a National Care Service is necessary for this or can deliver it. Indeed, there is a risk that the creation of a third legal entity, in addition to the NHS board and local authority, could create further hurdles to data sharing across relevant service providers.

Complaints and putting things right

Q14. What elements would be most important in a new system for complaints about social care services? (Please select 3 options)

- Charter of rights and responsibilities, so people know what they can expect
- Single point of access for feedback and complaints about all parts of the system
- Clear information about advocacy services and the right to a voice
- Consistent model for handling complaints for all bodies
- Addressing complaints initially with the body the complaint is about
- Clear information about next steps if a complainant is not happy with the initial response
- Other – please explain:

The current complaint system design is a product of existing Scottish Government legislation. Within this nationally designed framework, customers are enabled to raise complaints through a variety of agencies. If a complaint involves more than one public body, the agencies involved will effectively work together and agreement will be reached regarding which agency will take the lead. Customers are informed of the lead agency to enable a single point of access for them and clarity on how their concerns are being investigated and taken forwards. Therefore, the options set out above are already in place with the exception of the charter of rights and responsibilities. If such rights were to have a legislative underpinning, then it would be for the Scottish Government to propose this. A non-statutory backed charter could be introduced immediately by partnerships.

Q15. Should a model of complaints handling be underpinned by a commissioner for community health and care?

- Yes
- No

Please say why.

All agencies are required to follow the Complaints Handling Procedure set out by the Scottish Public Services Ombudsman (SPSO) to ensure consistency in approach and standards within the current system. If there is variation, the SPSO should address this rather than create a parliamentary commissioner.

Q16. Should a National Care Service use a measure of experience of those receiving care and support, their families and carers as a key outcome measure?

- Yes
- No

Please say why.

The current system of adult social care uses measures of experience as a key outcome measure. The adult social care system comprises a range of providers and each will have its own system for measuring experience.

Residential Care Charges

Q17. Most people have to pay for the costs of where they live such as mortgage payments or rent, property maintenance, food and utility bills. To ensure fairness between those who live in residential care and those who do not, should self-funding care home residents have to contribute towards accommodation-based costs such as (please tick all that apply):

- Rent
- Maintenance
- Furnishings
- Utilities
- Food costs
- Food preparation
- Equipment
- Leisure and entertainment
- Transport
- Laundry
- Cleaning
- Other – what would that be

Additionally, Buildings & Contents Insurance

Q18. Free personal and nursing care payment for self-funders are paid directly to the care provider on their behalf. What would be the impact of increasing personal and nursing care payments to National Care Home Contract rates on:

Self-funders

This will depend on whether any increase is passed on to the self-funder. If Free Personal and Nursing Care (FP/NC) payments have not kept up with costs in recent years then yes, the funding from increased payments should directly benefit self-funders on a £1 for £1 basis. Several factors will likely impact this including whether care home operators state that they've passed on the additional cost i.e., so that it will benefit self-funders provided the care homes don't increase the gross fee that they charge. If there was to be an increase in the rate paid then it needs to be demonstrable and have a tangible relationship with the care that is being provided. A self-funder should be confident of the value of contribution that is being paid to fund personal and nursing care so that they are not subsidising it through the other charges that they must pay.

Self-funders should not be subsidising someone who is receiving funding from the local authority for their accommodation costs, not only is it important that the elements that make up personal and nursing care costed and funded by the Scottish Government, but that the national care home rates are robust and cover the costs they are intended to cover. Only by doing this can self-funders expect to clearly receive value and services from the additional funding that they pay to a care home operator and can be confident that they do not get overcharged for their care.

Transparency is important and, in an environment, where national standards, national rules and means testing are all well-established, it could be argued that charges levied on self-funders are not sufficiently detailed. An opportunity to improve this would be welcome whatever the future model of care.

Care home operators

See above, and in short, an increased payment for FP/NC will result in more public income for the care home operators. This should only be provided based on a transparent approach to what the average costs are (to make it administratively simple). There needs to be acceptance of the costs and what is being paid for and how these change over time. Each

operator will have a different cost base depending on size and scale of operation. The national cost model for care homes that supports a 'funded' residents has been criticised in other areas, particularly contribution to capital costs and operator profit. Resolving one aspect of cost may not resolve the whole situation nor create a position where care home operators agree that they are funded sustainably. Increasing the payments does not address the desired outcome of shifting the balance of care, where potentially the population or customer base of care home operators should be reducing, and the sector needs to address this.

Local authorities

In a scenario where the local authorities still have responsibility for funded clients, increased payments will also benefit the Local Authorities. This is provided these are applied to national care home rates and funding is provided to the increased level to support those payments. If one of any of the elements doesn't follow through, then local authorities will not benefit and may be exposed. Maintaining a simple and straightforward approach to FP/NC payments would be essential to administer simply. If local authorities are taken out of the process, then funding will diminish from the Local Government Settlement and responsibilities to undertake payment processes will also be removed. Funding adjustments must be limited to the funding that goes in at present and not presume that additional funding is provided by the Council Taxpayer.

Q19. Should we consider revising the current means testing arrangements?

- Yes
 No

If yes, what potential alternatives or changes should be considered?

Charging for care services is complex, widely misunderstood, confusing and expensive both to administer and to pay for.

There are additional taxes being raised in response to the needs of health and social care that will further add to the complexity and expectation of people. Increased National Insurance costs of both employee and employer bring increased expectation of what will be delivered from the health and care system. This has no cross reference or connection to means testing in managing public expectation about care accommodation costs and adds to misunderstanding, lack of preparation by individuals to deal with a situation of needing care home accommodation, particularly later in life.

The lack of clarity on responsibilities results in an underlying distrust of the system that one person will be treated the same as another and can lead to assets / finance being hidden, passed on and undeclared, which adds to the administration burden of the scheme. If there is no funding stream from self-funders, then how is the current cost of residential accommodation paid afforded by the public purse. There must be an alternative, and societal differences in our wealth – be that assets or income based – make it challenging to find a financially comfortable balance. In Q17 we have said that residential charging should include passing on the cost of normal living costs to the resident, the alternatives to securing that contribution are not in themselves straightforward.

Alternatives include being clear with the public what the financial obligation they must meet, potentially through an annual cap or upper limit, thereby reducing the number of people contributing in full, but potentially extending the period over which the contributions are made at a higher level. An alternative to that is a lifetime cap or upper limit on the amount that you will pay. Either of these would require an assessment to be made but with greater clarity may come improved compliance and less administratively costly. As assessed care requirement (in a similar way to NHS provision) could be free at the point of delivery. The future funding for this could be achieved through a change in taxation or an insurance backed approach could be taken. This could be invested to fund future liabilities (such an approach would be unlikely to fund current liabilities). Society would therefore contribute depending on means but all would benefit in the future.

National Care Service

Q20. Do you agree that Scottish Ministers should be accountable for the delivery of social care, through a National Care Service?

- Yes
- No, current arrangements should stay in place
- No, another approach should be taken (please give details)

There is a lack of in depth and rigorous evaluation to demonstrate that the proposals will deliver better results and lack of evidence that the NCS would be financially sustainable and supported by a detailed workforce plan. Two issues raised by Audit Scotland in its assessment of the centralisation of police and fire.

The diagnosis of the problems of the current system of adult social care by the independent review was limited and the accelerated pace of moving from the publication of the review findings into this current consultation, has not permitted any significant evidence-based challenge of the review findings. Even if the diagnosis of the problems within the adult social care system, by the independent review were entirely accepted, the government should set out a range of options for addressing the problems rather than recommend one course of action.

The consultation paper does not set out a range of options – it is not designed to be inclusive. The consultation response template is limited and simplistic. Many of the questions force the respondent to choose between retaining the current system or a new NCS which has been positioned to be the answer to all current issues.

The diagnosis within the Independent Review of Adult and Social Care (IASCR) and consultation document is that joint working has failed and that the answer is a national body. IJB's have been in existence for less than 5 years. Outside of the pandemic operating environment, IJBs had been in existence for little more than 3 years. Given the scale of integration that was intended they deliver it is perhaps unsurprising that there continues to be challenges to them delivering the intended scale of change.

While acknowledging there will always be room for improvement in Aberdeen City, we have many examples of how collaborative leadership and vision has led to improvement in service delivery of integrated services before and during the pandemic. The Scottish Government has expressed regret for mistakes made during the pandemic. This demonstrates that issues are not addressed merely by transferring control to a national body. As the Interim Controller of Audit reporting to the Accounts Commission on 3 June 2021 commented, solutions to the challenges facing social care go far beyond new structures. The case for change in this document is based on making ministers accountable for social care. However, the actions of ministers during covid indicate that they can already direct resource towards adult social care.

Of significant concern, is the inclusion of children's social work within the services to be included within the scope of the national care service. The recently published National Child Protection Guidance (August 2021) reinforces the duties and responsibility of Chief Officers in relation to child protection. The proposed inclusion of children's social work will require Scottish Ministers to be accountable for all child protection arrangements.

An options appraisal should take into account the future demand facing the adult social care system against current demand. This should include the role of digital technology and impact of forthcoming legislation on human rights, local governance review, education reform etc.

Q21. Are there any other services or functions the National Care Service should be responsible for, in addition to those set out in the chapter?

No

Q22. Are there any services or functions listed in the chapter that the National Care Service should not be responsible for?

The IRASC was instigated due to the acknowledged national challenges in the provision of social care and the level of Care Home COVID related deaths during the pandemic. The consultation paper notes the IRASC review did not consider the inclusion of Justice and Children's Social Work within the scope of an NCS. It is therefore unclear as to the evidence basis for the inclusion of these services. It is our view that government needs to come forward with a further consultation on the proposed transfer of children's social work – there is insufficient detail included in this consultation to enable a considered opinion to be given.

Scope of the National Care Service

Children's services

Q23. Should the National Care Service include both adults and children's social work and social care services?

- Yes
 No

Please say why.

The Consultation notes that the scope of the IRASC did not consider whether Children's Social Work should be part of an NCS. To date there has been no independent research as to which model delivers better outcomes for children and families. We suggest there would be value in such research being undertaken. There is inadequate evidence available to determine the matter.

The voice of children's social work staff has not been sought prior to the consultation. Engagement with staff at a local level highlights genuine unease with proposals. It is less than two years since the publication of the Independent Care Review – The Promise. The ICR considered the voices of more than 5000 children, young people, parents, and carers with experience of the care system. It also consulted extensively with social work staff. Over and above The Promise, the level of policy change in the past year, in addition to dealing with the demands of the COVID pandemic, has been significant.

These will take time to embed and support the workforce to understand their implications. There is a real risk the positive impacts these legislative and policy changes will not be realised due to the upheaval of the proposed structural reorganisation. The Government also needs to take time to join up its own policy thinking and direction of reform for children services between "The Promise", the National Care Service, the UNCRC and its response to the Organisation for Economic Co-operation and Development's (OECD) review on the education system. There is currently no coherence and no clarity that there is the capacity and capability nationally and locally to cope with this extent of reform across universal and specialist children services.

The establishment of IJB's resulted in structural fragmentation. Adult social care was delegated to the IJB to enable alignment and integration with adult health care services. Included within the transfer of adult social care was the specialist social work services of adult protection and criminal justice. This resulted in a fracturing of what had previously been an integrated social work service comprising both adults and children's which itself made the

“whole family” model easier. Following the creation of IJBs, the social work service was split. The remaining children’s social work services have subsequently become more integrated with the universal education and health services for children. In recognition of the fractured lines created by the creation of the original IJBs, there has been an increasing policy focus from Scottish Government on whole family models. Now this consultation proposes that children’s social work should transfer to the national care service. This will inevitably create another fracture line between children’s social work services and universal education and health services for children. This creation of different fracture lines is increasingly and unnecessarily making local delivery more complex. If latest research demonstrates the benefits of whole family approaches, then we need organisational structures which facilitate that approach rather than hinder it.

There is clear evidence that organisational change is driving improvement in outcomes and in culture across Aberdeen City. There is a very real risk that the removal of children’s social work could compromise the improvement in outcomes and culture made across the city. There is anecdotal evidence from other Local Authorities that separating children’s social work and education will damage relationships and undermine the emphasis on prevention and early intervention. It could inadvertently lead to children escalating through the care system causing lifelong trauma.

Relevant evidence exists within those local authority areas which originally placed Children’s Social Work within the Health and Social Care Partnership (HSCP) only to move it back to the Council in subsequent years. One of the primary factors in these decisions was the fragmentation of the relationships between Children’s Social Work and Education. This fragmentation was assessed as having a direct adverse impact on the planning and preventative work for some children who escalated into and through the care system. This increased an already unsustainable financial cost, and it also had a detrimental impact to the individual children. In Aberdeen, agencies effectively collaborate to support children at an appropriate level according to need and risk. Where there is a difference of view this is quickly resolved due to the collaborative and integrated working of both services.

Q24. Do you think that locating children’s social work and social care services within the National Care Service will reduce complexity for children and their families in accessing services?

For children with disabilities,

Yes

No

Please say why.

No, it will increase complexity and increase risk to families who may require access to a range of services such as housing and financial inclusion services. The Government’s practice model, GIFREC and named Persons legislative framework, created the role of “named person” to act as the professional for supporting a family to access services within the tiered intervention framework. The updated and recently published Scottish Government GIFREC guidance has not presented a concern about the complexity of accessing services and does not present a corresponding policy response. So, there is a contradiction between the practice model of GIFREC and its ongoing development and the inference of complexity problem which can only be addressed through the proposals for an NCS.

The Child Protection Improvement Programmes at both a local and national level recognise the vulnerabilities of children with a disability and the need for all agencies to work collaboratively to better protect this vulnerable group of children. Education staff, with the visibility and knowledge they have of children with a disability from age 3 -18, have a critical role in this improvement priority. While moving children’s social work into a NCS may, on the face of it, strengthen links with health, it would compromise established and positive working relationships with education, undermine improvement activity, and ultimately put at risk the safety of children with a disability.

For transitions to adulthood

Yes

No

Please say why.

In Aberdeen, we are working to deliver improved transitions for children and young people. Utilising support from the Association for Real Change (ARC), we are working on a multi-agency collaborative basis to embed the Principles of Good Transitions into local planning and practice. We are seeing some positive progress while recognising there is still improvement. Our approach demonstrates that the key to improving transitional experiences is the relationship between partners not necessarily the organisational structures. Education colleagues have a vital role to play to support the planning of transitions for young people.

For children with family members needing support

Yes

No

Please say why.

In Aberdeen City we have increasingly moved our practice to Getting it Right for Every Child and Family. The recent SG paper – Improving Holistic Family Support: Towards a Whole Family Approach and Family Inclusive Practice in Drug and Alcohol Services -supports the move we are making locally. The move to the provision of a continuum of Whole Family Support is one which should significantly improve outcomes. This should not be restricted to drug and alcohol services. For example, mental health, learning disability and domestic abuse are other areas where such an approach has equal applicability. At the heart of intervention is the impact of trauma. Taking a whole family trauma informed approach to supporting families would support improved outcomes for children, young people, and their parents. A trauma informed approach should be at the cornerstone of all family support interventions.

Supporting the children's and adult's workforce (social work and non-social work) is critical to developing our capacity and responsiveness to trauma. It promotes early and proportional support at all stages of intervention. There is no evidence to suggest that moving some of the system (adult services, potentially children's social work, and health) together will in a structural reorganisation deliver the aspirations set out in the consultation or The Promise. Tier 1 support (primary prevention) will still be delivered by the universal service of education. There needs to be strong alignment between all tiers of intervention. Tier 1 supports are considerable in terms of resource. A perceived split in ownership and responsibilities, or a failure for these to align with Early Intervention (Tier 2) and Specialist (Tier 3) levels, would be detrimental.

Q25. Do you think that locating children's social work services within the National Care Service will improve alignment with community child health services including primary care, and paediatric health services?

Yes

No

Please say why.

In Aberdeen we have developed positive working relationships with our IJB Chief officer and health colleagues as evidenced in our 2019 strategic inspection: Within a national care service, there would be a risk of losing some of the good working relationships with education, housing, community, and financial inclusion services. Health offer vital universal support through the school nursing service and schools and families value this resource. The reach of the service is extensive and close working arrangements are in place. A very small number of children would be 'co owned' by health specialists and children's social work. Only children with the most complex health needs would have routine and very regular

engagement with health. Considerable time would be required to upskill education staff to delivery therapeutic interventions in keeping with best practice (around 100 members of staff). Education and children's social work would share responsibility for over 3000 children and have a responsibility to work proactively to reduce risk from escalating to that requiring statutory measures. The lack of detail in the proposals hamper our ability to fully understand the consequences of the proposed change on vulnerable groups.

Q26. Do you think there are any risks in including children's services in the National Care Service?

Yes

No

If yes, please give examples

- Risk of undermining positive local relationship between Education and Children's Social work.
- Risk that a failure to adequately and engage with children, young people and their parents/carers will undermine confidence on the extent to which we are giving effect to the UNCRC.
- Risk of lack of engagement with children's social work staff has the potential to exacerbate recruitment and retention issues of social work staff and undermine engagement in the establishment of an NCS.
- Risk that the delivery of The Promise will be derailed by upheaval of organisation change to establish an NCS. Any delay would risk undermining the confidence of the care experienced children and young people and their families who so generously contributed to the work of the ICR/Promise Team.
- Risk that local oversight of public protection by Chief Officers Group is undermined
- Risk that positive and existing relationships with Housing, Communities and Financial Inclusion services which are key to ensuring adequate preventative interventions to health determinants are negatively impacted.
- Risk that there is no plan to how a NCS would support the mitigation of the impact of poverty on children, young people, and families.
- Risk that it is unclear how a Chief Social Work Officer would be able to give effect to their duties for child protection if they are not part of the NCS

Healthcare

Q27. Do you agree that the National Care Service and at a local level, Community Health and Social Care Boards should commission, procure and manage community health care services which are currently delegated to Integration Joint Boards and provided through Health Boards?

Yes

No

Please say why.

The commissioning and procurement of community adult social care transferred to the IJB because of the 2014 Act. However, the IJB continues to be supported by the council's procurement function as well as by Scotland Excel, the sectoral centre of procurement excellence in this delegated function. The NCS and community health and social care boards would require a corresponding infrastructure to support it.

Q28. If the National Care Service and Community Health and Social Care Boards take responsibility for planning, commissioning, and procurement of community health services, how could they support better integration with hospital-based care services?

The question suggests that the current IJB boards have not managed to support better integration with hospital based care services. We would draw the government's attention to the leadership model in place between NHS Grampian and the 3 IJB's. This model of leadership see's the 5 chief officers share the responsibility for the planning, commissioning, and procurement of community health services and for overseeing the integration with hospital based care services. This model of leadership is being supported by NHS Grampian's technical partner, Kings Fund, with formal evaluation of its progress being published in an academic paper due course, and we would encourage the government to look at this alternative approach.

Q29. What would be the benefits of Community Health and Social Care Boards managing GPs' contractual arrangements? (Please tick all that apply)

- Better integration of health and social care
- Better outcomes for people using health and care services
- Clearer leadership and accountability arrangements
- Improved multidisciplinary team working
- Improved professional and clinical care governance arrangements
- Other (please explain below)

The current IJB have responsibility for managing the GP's contractual arrangements. It is the Scottish Government which negotiates what is essentially a national contract with very little scope for influencing that contract at a local level. There is no detail provided on what would be different in that current arrangement if responsibility transferred to the new community health and social care boards. What would assist current local arrangements is greater clarity on accountability arrangements to ensure a consistent interpretation of such arrangements.

Q30. What would be the risks of Community Health and Social Care Boards managing GPs' contractual arrangements? (Please tick all that apply)

- Fragmentation of health services
- Poorer outcomes for people using health and care services
- Unclear leadership and accountability arrangements
- Poorer professional and clinical care governance arrangements
- Other (please explain below)

There is no detail provided on what would be different to the current arrangement if responsibility transferred to the new community health and social care boards and so it is difficult to articulate the risks.

Q31. Are there any other ways of managing community health services that would provide better integration with social care?

The potential to commission health and social care services via the community health and social care boards potentially adds another layer of bureaucracy in the delivery of health and social care services. It means that some of the conversations which currently happen at a high level in relation to total funding for IJBs will potentially move to a lower service or function level in relation to the value of services commissioned. IJBs currently produce a strategic plan which addresses local issues and takes account of local circumstances\ variations. Focus by the IJB on the delivery of this strategic plan is appropriate. Minimum standards of care, terms and conditions, training for social care could be done through legislation without requiring a structural reorganisation. In Aberdeen all Partners are committed to the integration of health and social care and have been working well to deliver it. The risk with the approaches outlined in the consultation is integration of social care in Aberdeen City is held back or hampered by putting in place complicated commissioning\contracting arrangements between partners.

Social Work and Social Care

Q32. What do you see as the main benefits in having social work planning, assessment, commissioning and accountability located within the National Care Service? (Please tick all that apply.)

- Better outcomes for service users and their families.
- More consistent delivery of services.
- Stronger leadership.
- More effective use of resources to carry out statutory duties.
- More effective use of resources to carry out therapeutic interventions and preventative services.
- Access to learning and development and career progression.
- Other benefits or opportunities, please explain below:

There is limited evidence presented to suggest that these benefits are not currently realised, or have the potential to be realised, under current arrangements. As described earlier in our response, progress is being made across Aberdeen partners in responding to local data and priorities. While these areas are all important, creating a fractured local landscape of service provision in these key areas risk undermining the excellent links between social care services and the wider public sector in each local authority area. These include but are not limited to education services, housing and homelessness services, revenues and benefits provision, and income maximisation services. There is a significant risk of breaking existing links to the harm of local children and families.

Q33. Do you see any risks in having social work planning, assessment, commissioning and accountability located within the National Care Service?

There is a significant risk that a centralised national care service will undermine the importance of social work services connection to communities. It is also difficult to see how a national and centralised approach will support a co-designed/co-produced approach to service design. The interconnection between assessment and commissioning cannot be understated. The assessment of need and the planning of how such a need should be met cannot exist in a vacuum. Planning needs to take account of which services are best placed to meet identified need, but also which services are failing to meet need or in some circumstances keep individuals safe. Needs are not static and as they change and evolve review processes need to be clear and robust to ensure planning takes account of an individual's changing circumstances. There is an absence of detail on the operational delivery of the GIRFE model. This needs to set out where accountability sits and the role of "Named Persons" and "Lead Professional".

Nursing

Q34. Should Executive Directors of Nursing have a leadership role for assuring that the safety and quality of care provided in social care is consistent and to the appropriate standard? Please select one.

- Yes
- No
- Yes, but only in care homes
- Yes, in adult care homes and care at home x

Please say why

Within the Aberdeen's IJB, NHS Grampian appointed its professional advisory structures to support the work of the IJB. COVID evidenced the limitations of the knowledge and expertise of professional advisors for the complexities of different community settings. There is a requirement for professional advisors who can provide advice covering the range of settings from hospital to community settings to realise the potential of health and social care integration.

Q35. Should the National Care Service be responsible for overseeing and ensuring consistency of access to education and professional development of social care nursing staff, standards of care and governance of nursing? Please select one.

- Yes
 No, it should be the responsibility of the NHS
 No, it should be the responsibility of the care provider

Please say why

This seems to be an unnecessary step, with local providers best placed to understand the development needed amongst their staff group, based on personal relationships and assessment of care provided. National bodies are in place to monitor these existing arrangements.

Q36. If Community Health and Social Care Boards are created to include community health care, should Executive Nurse Directors have a role within the Community Health and Social Care Boards with accountability to the National Care Service for health and social care nursing?

- Yes
 No

If no, please suggest alternatives

Aberdeen's IJB currently has a representative of the nurse director who has responsibility for community care.

Justice Social Work

Q37. Do you think justice social work services should become part of the National Care Service (along with social work more broadly)?

- Yes
 No

Please say why.

The evidence basis to suggest that outcomes would be improved by justice social work moving to the NCS is unclear. We would suggest there needs to be a far stronger articulation of this as well as engagement with service users, staff, and key stakeholders to this proposal. The 2020 Care Inspectorate's Inspection of Aberdeen City's Justice Social Work recognised real strength in the leadership of Justice Social work which had contributed to improving outcomes for individuals. Given the significant health dominated focus of IJBs, Justice social work can often be an overlooked service. Experience locally would indicate that it has not benefited from the integration within an IJB with challenges persisting for individuals with mental health and addiction needs.

The consultation does not make clear how integration would be different for justice social work within a national care service. The health agenda will continue to be the dominant focus for any new local integration board with justice remaining a small component. It is worth noting that we do already have the National Outcomes and Standards for justice social work. However, the inconsistency of outcomes is likely to be based on a range of factors including lack of investment in the service, stigma as well as poor governance rather than the lack of a national framework. At a national level, the strategy and policy framework is confused and it is unclear how an NCS would fit in or improve that picture. Local arrangements in Aberdeen are working well. There was an excellent Criminal Justice inspection report and good progress on Community Justice outcomes such as diversion from prosecution and employability for those liberated. Further structural upheaval, without a clearly established evidence base will distract from the progress made. The transfer of responsibility from regional community justice authorities to Community Planning Partnerships needs to continue to be allowed to cement and develop.

Q38. If yes, should this happen at the same time as all other social work services, or should justice social work be incorporated into the National Care Service at a later stage?

- At the same time
 At a later stage

Please say why.

N/A

Q39. What opportunities and benefits do you think could come from justice social work being part of the National Care Service? (Tick all that apply)

- More consistent delivery of justice social work services
 Stronger leadership of justice social work x
 Better outcomes for service users
 More efficient use of resources x
 Other opportunities or benefits - please explain

It is important to highlight these opportunities and benefits could be realised through alternative governance arrangements and are not restricted to the establishment of an NCS. Key to delivering the above outcomes and benefits is the strength of relationships and partnerships that exist locally.

Many individuals receiving support from Justice Social work have other challenges in their lives – housing and homelessness services, poverty, adult learning, employment etc. Feedback from individuals open to Justice Social Work repeated highlight that these issues are as important to them as access to addiction or mental health services. Housing, financial inclusion as well as adult learning services would remain with Councils and there is a risk that by overly focusing on improving the interconnectedness of social work and health services the importance of other key relationships will not receive the same attention to the detriment of outcomes for individuals.

Q40. What risks or challenges do you think could come from justice social work being part of the National Care Service? (Tick all that apply)

- Poorer delivery of justice social work services.
 Weaker leadership of justice social work.
 Worse outcomes for service users.
 Less efficient use of resources.
 Other risks or challenges - please explain:

- Risk that Justice social work becoming part of the NCS could further weaken the leadership of justice and health & social care agenda could dominate the NCS
- Risk of further cluttering of the landscape around the justice agenda.
- Risk that current ring-fenced funding for justice being removed and that some justice services would not be prioritised
- Risk creating unhelpful silos which may inhibit and deter collaboration between the LA and the NCS and put at risk the preventative work that mitigates demand on justice social work

Q41. Do you think any of the following alternative reforms should be explored to improve the delivery of community justice services in Scotland? (Tick all that apply)

- Maintaining the current structure (with local authorities having responsibility for delivery of community justice services) but improving the availability and consistency of services across Scotland.
 Establishing a national justice social work service/agency with responsibility for delivery of community justice services.

- Adopting a hybrid model comprising a national justice social work service with regional/local offices having some delegated responsibility for delivery.
- Retaining local authority responsibility for the delivery of community justice services, but establishing a body under local authority control to ensure consistency of approach and availability across Scotland.
- Establishing a national body that focuses on prevention of offending (including through exploring the adoption of a public health approach).
- No reforms at all.
- Another reform – please explain:

It is not clear what the role and relationship will be of Community Justice Scotland within the noted proposals. The recent Audit Scotland report on the impact of Community Justice Scotland flagged concern on its impact on delivering on its stated aims. The relationship between Community Justice Scotland and an NCS responsible for the delivery of Justice Social Work services, and the other statutory partners under the Community Justice (Scotland) Act, needs to be more clearly set.

Q42. Should community justice partnerships be aligned under Community Health and Social Care Boards (as reformed by the National Care Service) on a consistent basis?

- Yes
- No

Please say why.

No. We do not see the benefit of doing this. Community justice partnerships are made up of statutory partners under the community planning agenda, including police and fire.

Prisons

Q43. Do you think that giving the National Care Service responsibility for social care services in prisons would improve outcomes for people in custody and those being released?

- Yes
- No

Please say why.

Access to care and support has not always been comprehensive and driven largely by the Scottish Prison Service (SPS) budgets Service Level Agreements (SLAs) and the complex nature of the prison environment. Each prison estate has different third sector services and SPS programmes with many of these services being cut over the years. Whilst SPS should focus on the care and support to prisoners during their sentence social work and health require to be very much part of the assessment and planning process. There are many prisoners who are never referred to Prison Based Social Work (PBSW) and leave prison with no access to the right support required to enable rehabilitation and desistance. That said resources are finite which results on the focus being on high-risk statutory prisoners and those who have significant complex needs. Lower-level needs are not always acted upon which leads to poor outcomes. Social care in prison requires to reflect on the complex needs of prisoners and taking a much wider holistic approach to assessment support and how we prepare prisoners for release. The review of social care in prisons highlighted the need for more joined up system working between health social work local authorities and SPS. The relationship between PBSW SPS and health can often be positive but there is inconsistency across the prison estate depending on relationships within that prison. The SLA in place between SPS and local authorities to provide PBSW further complicates the opportunity for a whole system approach to improving outcomes to those in prisons. Social care for

prisoners like those in communities is best placed to be planned and delivered by health and social care rather than SPS but it is the creation of the pathways that is more essential to get right. In preparing a prisoner for liberation Local Authorities will work to the SHORE standards (Safe Housing on Release). This is the culmination of what has happened during their stay in prison and planning often with 3rd sector partners to ensure a smooth transition to a community setting. This may be through MAPPA processes. The introduction of a further agency into this with little local accountability may introduce further risk into this process.

Q44. Do you think that access to care and support in prisons should focus on an outcomes-based model as we propose for people in the community, while taking account of the complexities of providing support in prison?

- Yes
 No

Please say why.

Each prisoner should have a care plan with a holistic assessment and outcome focused plan in place. This should consider what services are required during sentence which flows seamlessly into the community. This would ensure that prisoners get access to the right support and treatment in prison and a rehab plan in place for release. As stated within the consultation, the current eligibility criteria does not fit with this model nor does the role of PBSW. To get an outcomes-based model in prison is essential but we need to recognise that there will be limitations to this within a prison environment. It is therefore beneficial to see the report being published this year and it is hoped that this will pave the way to the right pathways in place for access to services.

Alcohol and Drug Services

Q45. What are the benefits of planning services through Alcohol and Drug Partnerships? (Tick all that apply)

- Better co-ordination of Alcohol and Drug services
 Stronger leadership of Alcohol and Drug services
 Better outcomes for service users
 More efficient use of resources
 Other opportunities or benefits - please explain

ADPs allow for locality engagement and community-based opportunities. If ADPs were more centralised, then this might dilute the opportunities and benefits. It could reduce the opportunity for innovative solutions to local issues. In Aberdeen City we have worked to ensure the voice of lived experience is strongly represented on our ADP. It is important a sense of localism continues to be responsive to the needs of local communities. If a more centralised approach is taken this could diminish a sense of connectedness to local circumstances but also a concern that the voice of those areas with more acute need are more acutely are disproportionately prioritised. Aberdeen City's Chief Officers Group has a well-developed public protection perspective supported by robust governance. This includes drug and alcohol services given their relevance to child and adult protection as well as MAPPA and suicide prevention. This broader perspective of public protection needs to be retained to support the focus on prevention and early intervention.

Q46. What are the drawbacks of Alcohol and Drug Partnerships? (Tick all that apply)

- Confused leadership and accountability
 Poor outcomes for service users
 Less efficient use of resources
 Other drawbacks - please explain

The complexity of the wider health and social care system, drug and alcohol issues can be seen as the sole responsibility of the ADP's whilst the issues are system wide, therefore leading to potential siloed approaches. The significant and understandable emphasis on reducing drug related deaths has potentially overly focused on short term actions at the expense of system wide change with a preventative and early intervention focus. The recent SG paper - Improving Holistic Family Support: Towards a Whole Family Approach and Family Inclusive Practice in Drug and Alcohol Services - is welcomed. Understanding the impact of trauma on families is critical to supporting recovery. This needs to be understood in a whole family context. The NCS consultation is largely silent on the impact of poverty on the health and wellbeing of citizens. The relationship between addiction and poverty is well established. There needs to be a joined up holistic approach to supporting the recovery of those with addiction needs. The major challenge to the effectiveness of ADP's has been the historic void in the national policy agenda around drug addiction. Aligned to this has been the underfunding of addiction services supporting sustained recovery. The recent increased focus on drug addiction as well as associated funding is welcomed, despite it being ring fenced limiting local innovation. Addiction cannot be seen in isolation. It needs to be considered within the whole life experiences of the individual and through the lens of trauma. It needs to consider wider physical and mental health needs, housing needs, financial inclusion, employment, and social exclusion. To break the cycle of addiction and the intergenerational pattern, ADP's need to influence the strategic planning of services across the systems of health and local authorities. Consequently, we would strongly suggest that ADP's need to continue sit within Community Planning Partnership but also within the public protection responsibility of Chief Officer Groups. This will ensure the required cross cutting influence of ADP's continues to be recognised.

Q47. Should the responsibilities of Alcohol and Drug Partnerships be integrated into the work of Community Health and Social Care Boards?

Yes

No

Please say why.

It is important that the planning of resources is fully integrated in the health and social care system. However, a key role of ADP's is to support the preventative agenda with a strong emphasis on young people. The landscape in relation to drugs is a constantly changing one. It is important that ADP's retain strong connection to Universal Education services sharing their subject matter expertise and information about local circumstances. Alcohol and Drugs Partnerships have a crucial role to play in addressing the various challenges addiction brings; and this is supported locally by people with lived experience of addiction. This strength would be lost if these responsibilities were transferred and would be at odds with the narrative promoted through the NCS report of ensuring community voices are heard. The recent SG paper – Improving Holistic Family Support: Towards a Whole Family Approach and Family Inclusive Practice in Drug and Alcohol Services - is important in this consideration and a greater level of evidence would be required to demonstrate this would benefit local families.

Q48. Are there other ways that Alcohol and Drug services could be managed to provide better outcomes for people?

The needs of individuals and families whose lives are blighted by addiction requires a multi-agency, multi service response. We would contest that this is best delivered within the strategic context of Community Planning Partnerships. This will enable local provision to be developed to meet local need. It would also ensure the voice of those with lived experienced could most effectively influence and shape local services. There is a real risk that this voice of localism would be lost within a NCS and ultimately be counterproductive to positively impacting on improving outcomes. A local approach to planning and the development of enhanced addiction services would enhance efficiency and reduce duplication.

Q49. Could residential rehabilitation services be better delivered through national commissioning?

- Yes
 No

Please say why.

We would suggest that a local commissioning approach would be more effective than a national approach. Local commissioning could realise financial benefits, standardise client provision and help with an evidence-based approach. It would also enable a provision that is responsive to local need. There is a risk that if a national approach was adopted then it would be weighted towards those areas with greatest need and inhibit innovation and responsiveness at a local level.

Q50. What other specialist alcohol and drug services should/could be delivered through national commissioning?

Potentially, GP residential contracts.

Q51. Are there other ways that alcohol and drug services could be planned and delivered to ensure that the rights of people with problematic substance use (alcohol or drugs) to access treatment, care and support are effectively implemented in services?

Consideration should be given to whether alcohol and drug services should come under the remit of the Care Inspectorate and Health Improvement Scotland. This will support the embedding of a rights-based approach to service delivery and help bring greater consistency and standardisation to the provision of services in Scotland. This should include the registration of the addiction services. Developing the capacity of the key elements of the workforce to be more trauma informed as well as having knowledge of addiction is important. Developing this knowledge across key professional groups/services, e.g., alcohol & drug services/criminal justice/mental health, would support prevention and early intervention as well as reduce the stigma felt by those whose lives are challenged by addiction.

Mental Health Services

Q52. What elements of mental health care should be delivered from within a National Care Service? (Tick all that apply)

- Primary mental health services
 Child and Adolescent Mental Health Services
 Community mental health teams
 Crisis services
 Mental health officers
 Mental health link workers
 Other – please explain

There has been an increased focus on mental health provision and subsequent health debt because of the pandemic. The picture as the consultation highlights, across the country is varied and the pathway between each is cumbersome. The difficulty is then exacerbated by staffing shortages in this area coupled with increasing demand and complexity. This results in challenges in terms of early intervention and prevention.

It is therefore important that the various components of mental health provision remain connected to each other. This reflects that needs of individuals will often result in them having a “flow” through the various components. It is important that any transition between the various mental health components ensures minimal disruption for the individual.

Q53. How should we ensure that whatever mental health care elements are in a National Care Service link effectively to other services e.g. NHS services?

We need to continue to adopt a less siloed approach to the delivery of mental health services. Our consultation response argues that the case for including children's social work services in a NCS has not been clearly articulated and there has been a lack of engagement with staff and service users. We would contend that the same would apply to Child and Adult Mental Health Services (CAMHS). As a specialist mental health service for children, CAMHS collaborate with other key partners including Education, Social Work and third sector partners. The needs of a child cannot be seen in isolation. The inclusion of CAMHS and social work within an NCS may support collaborative practice to a degree. However, without the critical contribution of education partners being included there is a risk of collaborative practice being more challenging to the overall detriment to service users.

Services need to increasingly develop a "whole family" service perspective. The mental health and wellbeing of parents is a significant contributing factor to the mental health and wellbeing needs of their children. While recognising the individuality of need you cannot fully separate, their shared needs. There requires to be a seamless pathway between all services considering the link to other services such as acute, housing, justice SW, community justice, primary care, education. Mental health care runs through the heart of all our services, and we must move from a medical model of treatment to a more proactive, cross sector way of delivering mental health care. Treatment for those with mental disorder, quite rightly requires the medical model of treatment but this should be combined more on the focus on rehabilitation and support. The eligibility criteria for mental health services also needs to be considered and how the third and independent sector are linked in.

The move to the provision of a continuum of Whole Family Support is one which should significantly improve outcomes. This should not be restricted to mental health services. It has a connection to drug and alcohol services, learning disability and domestic abuse. The impact of trauma should be at the heart of intervention. Taking a whole family trauma informed approach to supporting families would support improved outcomes for children, young people, and their parents. A trauma informed approach should be at the cornerstone of all mental health provision.

Taking a local approach to developing a whole family service would provide enhanced agility and responsiveness to need at a community level. It would enable a building of skill and capacity drawing on local circumstances and strengths. It would support preventative and early intervention responses working across local systems. Adopting a national approach runs the risk of a one size fit all approach and the voice of local citizens not being heard. At a national level, there is a lack of training available to professionals across the board on working with and responding to lower levels of mental health issues. Mental health care and the outcomes for such requires national leadership and investment across all statutory services to ensure early intervention and prevention can be truly embedded

National Social Work Agency

Q54. What benefits do you think there would be in establishing a National Social Work Agency? (Tick all that apply)

- Raising the status of social work
- Improving training and continuous professional development
- Supporting workforce planning
- Other – please explain

The consultation recognises the absence, at a national level, of a body with appropriate oversight, support, and promotion of social work. This has adversely impacted on the voice of social work within the discourse around formulating social policy. For several years, the profession has experienced recurring recruitment challenges. Additionally at a time when the work of social workers has grown in its complexity there is a need at a national level for a strategic approach to support the continuous development of the workforce. Such would support improvement outcomes for those who use the service and ultimately the success of an NCS. As we emerge from the COVID pandemic there is evidence that the social work workforce is exhausted. Adopting a strategic approach would positively contribute to the recruitment and retention issues faced by most local authorities.

The absence of a National Social Work Agency (NSWA) (or equivalent) has contributed to misunderstandings about the role of social work and the critical role it plays in the assessment, care and protection of individuals who need the state to intervene in their lives. At points the consultation, along with other national policy documents, use the terms social care and social work interchangeably. While recognising there is a clear interconnection, a failure to fully understand the critical contribution of social work has the potential to undermine the success of an NCS.

Social workers professional training and skills uniquely equip them to engage and build relationships with individuals and families where there are significant risk factors. Often a multi-agency response is required, and the role of social work is to coordinate, support and manage risk. They do this by utilising the statutory powers to safeguard individuals and communities whilst empowering individuals/families to live independently. This role is undertaken by no other agency. Unless there is a clearly and respected discourse about the role of social work then this has the potential to create vulnerability exposing risk to individuals, families, communities and ultimately to an NCS.

The consultation largely refers to people (families) who know what they need and what support they need. This predominantly relates to the social care. The consultation however is far quieter on the role the state needs to play in the lives of those individuals/families who don't recognise their needs/vulnerability nor have access to family/community supports. Without intervention the risk of harm to those individuals is high. The role of social work is critical to safeguarding and protecting those individuals to determine when statutory powers should be used to care and protect individuals/families unable to do so for themselves. This is the domain of social work.

Given the focus on health and social care integration as well as the focus on demands on the health service, there has been a cumulation in health being the dominant voice within IJB/HSCP's. This has made it difficult for the social work voice to be heard and understood. This was at times acutely apparent during the pandemic. One example being the pressure faced by social work staff to arrange for the transfer of individuals without capacity from hospital to care homes without there being a robust legal basis to do so. The pandemic also shone the light on social work in stepping above and beyond to keep people safe during the pandemic. Whilst other services stood down, ceased home visits, and pulled back on their engagement with adults/families, social work values remained. The workforce responded and worked even more to support and reduce harm in the communities. The pandemic also highlighted how lean social work was in terms of its resources and how this differed between authorities/IJB's and between children and adult services.

Having an independent social work voice via an NSWA, just as there is an independent nursing voice, would enhance integration, collaboration, and planning at both a national and local level. It would also create stronger professional identity for social work and parity of standing and esteem alongside other professions

As a result of budget pressures and capacity challenges across all local authorities the ability of individual CSWO to drive forward the workforce development is extremely limited. There

is not the capacity to keep abreast of research and practice development across the breadth of subject matter knowledge required across the entire social work workforce. An NSWSA would support this and promote consistency and challenge the workforce to continue to remain relevant to the ever-changing landscape.

Since the outset of the Scottish Government there has been a minister with responsibility for health. Consequently, there has been a stronger policy framework around health. Responsibility for social work services sits across several ministerial portfolio's – Health; Education; Justice and Communities. This has at times resulted in a fragmented and disjointed policy framework. The lives and needs of individuals requiring social intervention require agencies to work collaborative using a rights-based approach. An NSWSA will support and strengthen a coherent voice of social work within a national policy framework.

Q55. Do you think there would be any risks in establishing a National Social Work Agency?

The IRASC recognised that if an NSWSA was established then it would be necessary to revisit the role, functions, and powers of the SSSC. Resolving this will be critical to ensure the duties and functions of a NSWSA (as well as the SSSC) are clearly defined. Without such there is a risk that the impact of a NSWSA will be diminished and eventually overlooked. Social workers make up a very small percentage of those registered with the SSSC. The expansion of the SSSC to include the registration of nursery staff, social care staff, childminders and others has impacted on the identity and function of the SSSC. While the SSSC has a role in supporting the development of the workforce, the diversity of those registered with the SSSC makes this a difficult role to fulfil hence the impact of the SSSC to develop the social work workforce has been very limited.

Q56. Do you think a National Social Work Agency should be part of the National Care Service?

- Yes
 No

Please say why

The role of a NSWSA would have a broader responsibility beyond the delivery of social work within a NCS or within local authorities – whatever is concluded via this consultation. It is important that an NSWSA takes a whole system approach and critically links with those universities who deliver social work training. There has been a recurring concern that some Universities have become disconnected from practice experience. This has the potential to not adequately prepare Newly Qualified Social Workers (NQSWS) for employment within statutory social work. Ensuring the foundations right is critical to developing the workforce. There would be merit in a NSWSA being aligned to a centre of excellence. The Centre for Excellence in Children's Care and Protection (CELCIS) has made a positive contribution to research in social work/social policy. It has also supported the development of social work practice over recent years. Aligning such centres of excellence will support improvement activity and encourage the profession continues to be well connected to current literature and research.

Q57. Which of the following do you think that a National Social Work Agency should have a role in leading on? (Tick all that apply)

- Social work education, including practice learning
 National framework for learning and professional development, including advanced practice
 Setting a national approach to terms and conditions, including pay
 Workforce planning
 Social work improvement
 A centre of excellence for applied research for social work

Reformed Integration Joint Boards: Community Health and Social Care Boards

Governance model

Q58. “One model of integration... should be used throughout the country.” (Independent Review of Adult Social Care, p43). Do you agree that the Community Health and Social Care Boards should be the sole model for local delivery of community health and social care in Scotland?

Yes

No

Please say why.

In Aberdeen the (ACHSCP)Aberdeen City IJB and Health and Social Care Partnership has fully embraced integration and has developed very positive relationships across the whole health and social care system. We have examples of integrated working initiatives designed to improve outcomes which could be shared.

It is recognised that not every IJB/HSCP will be in a similar situation. The current IJB’ model for local delivery of community health and social care has not been given sufficient time and support to achieve the original vision for reform as set out in the 2014 Act, Unexpectedly, the global pandemic has done more to catapult the original vision for integration forward and we should now be concentrating on embedding the changes achieved during the pandemic as part of the permanent redesign. We should take confidence from the scale of change that has been achieved and re-commit nationally and locally to a pace and scale of reform.

The consultation paper describes the proposals for an NCS as the biggest public sector reform in Scotland for decades. Indeed, it could be considered to represent a paradigm shift in how services are delivered. However, some of the usual pre-conditions for a paradigm shift appear to be missing. For example, there is no substantive evidence of an overall dissatisfaction with the current model of delivering social care. There is no widely agreed alternative paradigm which communities across the country widely support as a better fit and a consensus across all communities that the new paradigm is better to the current one.

The proposals are largely focused on one solution with little concrete evidence to support the proposed model over the existing model. There has been no wide scale consultation or debate on alternative solutions that might allow all relevant parties to land on a mutually agreed approach to take forward. There is no evidence of consultation and deliberation with children which would appear to be inconsistent with the spirit of the UNCRC. There is no evidence of an outward focus consideration of examples of best practice across the UK and the world.

One model of integration will not necessarily meet the needs of all of Scotland’s diverse communities. Local Authorities and Health Boards working with third sector organisations, private sector and communities would benefit from having the flexibility to deliver innovative solutions that are tailored to local conditions.

The consultation document suggests that one model of integration is required to achieved ‘focused services based on need’. However, the law already requires integration boards to develop a Strategic Plan every three years. The Strategic Plan sets out how the local authority intends to achieve national health and wellbeing outcomes and other material as the IJB thinks fit. In Aberdeen, this plan is supported by a strategic commissioning plan which sets out those activities the IJB will commission based on an analysis of need within the local community. The needs of our communities drive the strategic allocation of resource.

Q59. Do you agree that the Community Health and Social Care Boards should be aligned with local authority boundaries unless agreed otherwise at local level?

- Yes
 No

Q60. What (if any) alternative alignments could improve things for service users?

Q61. Would the change to Community Health and Social Care Boards have any impact on the work of Adult Protection Committees?

APC's have a distinct role under legislation to oversee adult protection policies in their area. This is a multi-agency committee to which IJB's are a member. In Aberdeen the IJB has a lead for adult protection which ensures adult protection is a priority and well embedded within the HSCP. The local authority however is the lead agency and holds the responsibility and accountability for adult protection. Council Officers are employed by LAs to discharge our duties under the legislation and in Aberdeen this duty is delegated to the IJB. It is not clear how an NCS will play its part in adult protection and whether the duties will remain with LA's. Further detail is required on where statutory responsibilities will sit in the future. There is a risk that the focus and good practice locally could be lost with the establishment of CHSCB's. The number of statutory duties shared by local partners in respect of social care is significant and spans legislation across many decades. The creation of a new legal entity would require Parliament to be explicitly clear on where those statutory duties will lie in the long term, including those associated with the work of an Adult Protection Committee. In Aberdeen, there is strong leadership in public protection with a Chief officers Group for Public Protection overseeing APC, CPC, and other committees. This has established strong strategic delivery and improvement activity of public protection in Aberdeen. In addition to this we have a Grampian Public Protection Forum to create a joined-up approach and seek innovation and excellence across the Grampian area. Again, it is important that the focus on public protection is not lost within any NCS, and clear accountabilities must be established from the offset. This will require all relevant statutory responsibilities being identified and suitably allocated across all relevant organisations.

Membership of Community Health and Social Care Boards

Q62. The Community Health and Social Care Boards will have members that will represent the local population, including people with lived and living experience and carers, and will include professional group representatives as well as local elected members. Who else should be represented on the Community Health and Social Care Boards?

Aberdeen's current membership of voting and non-voting members is appropriate. It includes:

NHS Grampian (NHSG) Voting Members
Aberdeen City Council (ACC) Voting Members
IJB Chief Officer
IJB Chief Finance Officer
Clinical Director
Secondary Care Advisor
NHSG Depute Director of Health
NHSG Staff Rep
NHSG Nursing Rep
ACC Union Rep
ACC Chief Social Work Officer
Third Sector Rep
Carer Rep x 2
Parent/Service User Rep

Q63. "Every member of the Integration Joint Board should have a vote" (Independent Review of Adult Social Care, p52). Should all Community Health and Social Care Boards members have voting rights?

- Yes
 No

Q64. Are there other changes that should be made to the membership of Community Health and Social Care Boards to improve the experience of service users?

See response to Question 62.

Community Health and Social Care Boards as employers

Q65. Should Community Health and Social Care Boards employ Chief Officers and their strategic planning staff directly?

- Yes
 No

Q66. Are there any other staff the Community Health and Social Care Boards should employ directly? Please explain your reasons.

Given the social care sector in Scotland as a whole employs some 200,000 people making up nearly 8% of the all Scottish employment, this is an area that will require significant careful consideration and significant scrutiny.

Commissioning of services

Structure of Standards and Processes

Q67. Do you agree that the National Care Service should be responsible for the development of a Structure of Standards and Processes

- Yes
 No

If no, who should be responsible for this?

- Community Health and Social Care Boards
 Scotland Excel
 Scottish Government Procurement
 NHS National Procurement
 A framework of standards and processes is not needed

Q68. Do you think this Structure of Standards and Processes will help to provide services that support people to meet their individual outcomes?

- Yes
 No

Q69. Do you think this Structure of Standards and Processes will contribute to better outcomes for social care staff?

- Yes
 No

Q70. Would you remove or include anything else in the Structure of Standards and Processes?

A national Structure of Standards and Processes would provide a foundation upon which to build, however this does not require to be through the vehicle of an NCS. This could be put in place by the Government through legislation. It is noted however, that an additional layer of “local standards and processes” would help recognise the unique nature of Scotland’s communities and offer better services to the people living in those communities. A national structure of standards and processes has the potential to ensure consistency of improvements, but there is a requirement for processes that respond to local variances and encourage local accountability. There is a risk that a centrally driven approach with an emphasis on minimum standards and one-size fits all will inhibit local commissioning solutions that will help to provide services that support people to meet their individual outcomes. If the balance is too focussed on national commissioning, there would be undesirable implications for local flexibility in procuring services, with impacts upon local employability and third sector local provision. This undermines one of the key levers available to local authorities as anchor organisations to influence and support local economies through targeted procurement spend.

Market research and analysis

Q71. Do you agree that the National Care Service should be responsible for market research and analysis?

- Yes
- No

If no, who should be responsible for this?

- Community Health and Social Care Boards
- Care Inspectorate
- Scottish Social Services Council
- NHS National Procurement
- Scotland Excel
- No one
- Other- please comment

National commissioning and procurement services

Q72. Do you agree that there will be direct benefits for people in moving the complex and specialist services as set out to national contracts managed by the National Care Service?

- Yes
- No

If no, who should be responsible for this?

- Community Health and Social Care Boards
- NHS National Procurement
- Scotland Excel

Regulation

Core principles for regulation and scrutiny

Q73. Is there anything you would add to the proposed core principles for regulation and scrutiny?

Regulation and scrutiny should always be conducted through the lens of improvement. Explicit reference to this is essential. The Core Principles are proportionate. However, the wording around this section is unclear. Further information is required as to “who does what” in terms of regulation, scrutiny, and inspection. This needs to be explicitly clear. During the initial phases of the pandemic, the Care Inspectorate was part of the daily local meetings in relation to supporting Care Homes manage the range of risks. Their participation and engagement was predominantly experienced through the lens of scrutiny as opposed to a partner with a shared responsibility for improvement. It is unclear whether Care Inspectorate and Scottish Social Services Council would still exist or whether the regulation of care services and workforce would be undertaken by another organisation. It would be important that it is independent of the NCS to ensure objectivity. If the Care Inspectorate is to retain responsibility for the registration and regulation of care services, they need to demonstrate a meaningful focus and contribution to service improvement. They need to support and enable services to be sector leading. Regulators and inspectors need to keep abreast of current research and practice. There needs to be further clarity as to the role of the existing agencies and arrangements (including relationship to health scrutiny and improvement agencies). As noted in relation to the proposed establishment of a NSWA (Q54) there will be a need to examine the role and duties of the SSSC.

Q74. Are there any principles you would remove?

Principle No. 4 needs to be further considered. The breadth of the proposed NCS and the number of professional groups that will fall within its remit, will require consideration to be given to how the various regulators work collaboratively to support the delivery of coherent professional standards.

Q75. Are there any other changes you would make to these principles?

The Care Inspectorate has a role to play here, and this could be strengthened in the principles. The current model of using local Care Home Assurance Teams is working well and enables local, supportive relationships to be developed with providers and drives improvement – this is a model which could be built upon. An intelligence-led and co-ordinated approach to improvement is desirable; as is the proposed independence of the regulator from the NCS. Both providers and end-users are key to effective outcomes and local accountability should not be diminished by an emphasis on accountability to a national body. Principles in themselves are fine, in that they are simply principles of good practice. It is the detail of by who and how they are to be carried out that requires further consideration. It is important to recognise that the Care Home Assurance Model is something that can be developed further. However, to develop this effectively to include all the social work support that will enable effective provision of care, this will require investment into more than nursing capacity.

Strengthening regulation and scrutiny of care services

Q76. Do you agree with the proposals outlined for additional powers for the regulator in respect of condition notices, improvement notices and cancellation of social care services?

- Yes
 No

Please say why.

The consultation highlights issues with the speed of these processes – the service users and staff can suffer as a result, and this needs rectifying. We agree that there can be occasions when action needs to be swift to protect vulnerable people at risk of harm. There also needs to be checks and balances to ensure that radical actions which may impact on individuals (e.g. closure of homes forcing people to move) are not taken without appropriate scrutiny. Other than in cases where individuals are at real risk, action should support quality improvement rather than being punitive.

Q77. Are there any additional enforcement powers that the regulator requires to effectively enforce standards in social care?

No. The existing enforcement powers are considered sufficient. There does need to be consistent application of their use when appropriate.

Market oversight function

Q78. Do you agree that the regulator should develop a market oversight function?

- Yes
 No

Q79. Should a market oversight function apply only to large providers of care, or to all?

- Large providers only
 All providers

Q80. Should social care service providers have a legal duty to provide certain information to the regulator to support the market oversight function?

- Yes
 No

Q81. If the regulator were to have a market oversight function, should it have formal enforcement powers associated with this?

- Yes
 No

Q82. Should the regulator be empowered to inspect providers of social care, as well as specific social care services?

- Yes
 No

Please say why

Having market oversight may prevent major disruption to people using care services – the national picture should oversee the whole as well as the local markets. However, there needs to be more clarity about the current capacity and capability within the Care Inspectorate to take on this additional function. Having a market oversight function would provide an early warning system of potential failure that would assist commissioners to work on contingency plans to inform business continuity goals. There is a particular benefit to applying to large providers where the business volume has added challenges for contingency planning, but the application would also be useful for smaller and more specialist services that may be harder to replace if a re-provision is required. The structure of some care providers can be complicated. Better understanding and regulation of providers may prevent the collapse of large providers or at worst pre-empt it to allow for preventative action to be taken. The ability to scrutinise a whole organisation would help with this. However, it would require increased investment from the providers to change current practice.

Enhanced powers for regulating care workers and professional standards

Q83. Would the regulator's role be improved by strengthening the codes of practice to compel employers to adhere to the codes of practice, and to implement sanctions resulting from fitness to practise hearings?

The proposals outlined in the Consultation highlight the need to clarify the role and remit of the regulator and who the regulator should be. If an NSWRA is established, there will be a need to revisit the role and remit of the SSSC. The legislation relating to the establishment of the SSSC is over twenty years old and needs to be revisited to ensure currency and to take account the outcome of this Consultation. The consultation also highlights that some groups of staff are not required to register with the regulator while comparable groups are. For example, day care of adult services isn't required to register while day care of children's services is. This needs to be resolved to ensure consistency and equity. This is really a question for the regulator. This workforce is already regulated by the SSSC. It is not clear on whether the SSSC would be replaced by the NCS, or the two bodies would work alongside each other, and where overall responsibility for regulation would sit. As a Local Authority employer, we already adhere to the codes of practice and implement the outcomes of fitness to practise hearings. We are resourced to able to do this as we have appropriate policy routes available to us (e.g., performance management, disciplinary etc.) and support functions in place (e.g., HR and Legal Services) to advise on their application. Smaller, independent employers might not have access to the same levels of support and there is the potential for this to create additional financial burdens on them. Mandatory adherence to the codes of practice and implementation of fitness to practise hearings would give consistency across the workforce.

Q84. Do you agree that stakeholders should legally be required to provide information to the regulator to support their fitness to practise investigations?

Yes. Consideration should be given to whether any changes are required to current data protection legislation.

Q85. How could regulatory bodies work better together to share information and work jointly to raise standards in services and the workforce?

There is already a high degree of joint working at a local level this includes education and social work. It is not clear from the consultation the extent to which other services, such as Education and Housing, would be impacted by the proposals. It is essential for supportive service delivery that there is seamless integration to provide appropriate solutions at a local level. Data protection legislation should be considered.

Q86. What other groups of care worker should be considered to register with the regulator to widen the public protection of vulnerable groups?

None

Valuing people who work in social care

Fair Work

Q87. Do you think a 'Fair Work Accreditation Scheme' would encourage providers to improve social care workforce terms and conditions?

Yes

No

Please say why.

We firmly support the Fair Work commitment. It is vital that steps are taken to make "working in care" a meaningful career path. Recognition; career advancement; self-development are as important as terms and conditions.

Q88. What do you think would make social care workers feel more valued in their role?
 (Please rank as many as you want of the following in order of importance, e.g. 1, 2, 3...)

	Improved pay
3	Improved terms and conditions, including issues such as improvements to sick pay, annual leave, maternity/paternity pay, pensions, and development/learning time
	Removal of zero hour contracts where these are not desired
1	More publicity/visibility about the value social care workers add to society
6	Effective voice/collective bargaining
	Better access to training and development opportunities
	Increased awareness of, and opportunity to, complete formal accreditation and qualifications
	Clearer information on options for career progression
	Consistent job roles and expectations
4	Progression linked to training and development
5	Better access to information about matters that affect the workforce or people who access support
	Minimum entry level qualifications
	Registration of the personal assistant workforce
2	Other (please say below what these could be)

Please explain suggestions for the “Other” option in the below box

All these areas are important if Fair Work is to be achieved. Pay and terms and conditions are part of this, but it is unclear whether these issues would resolve the capacity problems across the social care workforce. More research is needed on this with a clear focus on future workforce and developing awareness and credibility of social care and social work as professions of choice from school age. This would require clear, affordable, and accessible training and education pathways.

Pay and terms are not the sole driver when considering factors that lead someone into a vocation; particularly the care sector. None of the areas listed address directly the content of the job. For example, why is it that the role may not be attractive and what could be done to address core issues, either perceived by potential workforce of the future or real experiences of current staff? The Scottish labour market report suggests that a key reason employees are leaving the social care workforce is due to stress and workload issues. Reducing workload requires significant investment. The point is made in the consultation document that frustration at a local level is often due to a need for investment to address concerns and issues and that funding to pay living wage has not extended to uplifts for more senior posts. It's not clear how the proposed actions will make a change to this without the accompanying investment.

Autonomy over working hours may be one way to ensure appropriate work life balance within the profession. Whilst opportunities for national voice is important, local pressures and contexts need to be considered and issues addressed swiftly and directly. If issues are raised nationally and not perceived to be addressed, this will further exacerbate the sense of frustration already reported.

The consequences for the remainder of the workforce employed by any provider including local government, must also be considered if changes were made to those areas listed for social care. It is important to recognise that jobs within the care sector have been evaluated through the COSLA job evaluation scheme. Increasing the pay level for this group of staff will lead to the possibility for equal pay claims to be submitted by employees whose roles were evaluated at the same level as the care roles.

Q89. How could additional responsibility at senior/managerial levels be better recognised?
 (Please rank the following in order of importance, e.g. 1, 2, 3...):

	Improved pay
	Improved terms and conditions
	Improving access to training and development opportunities to support people in this role (for example time, to complete these)
	Increasing awareness of, and opportunity to complete formal accreditation and qualifications to support people in this role
1	Other (please explain)

Please explain suggestions for the “Other” option in the below box

It's unclear how improved terms and conditions generally supports the recognition of additional responsibility at senior or managerial levels. The appropriate mechanism for identifying increases in salary is to reflect additional responsibilities via a job evaluation, not simply through applying salary uplifts across the workforce or across one element of the workforce. Improved pay or terms and conditions can be a crude measure in themselves. It is important that the total reward package is considered, including workload, self-esteem and other aspects of wellbeing support. If there were improved terms and conditions for senior managers only, this would increase the risk of challenge from other members of the workforce based on equity. Job Evaluation ensures appropriate reward is in place for the undertaking of higher graded duties. The consultation does not refer to any analysis that has been undertaken with those in managerial roles to identify current gaps or issues for them specifically. There is no evidence regarding what is unattractive about managerial roles. However, it is suggested that changes and improvements to the work-life balance could be attended through increased flexibility and empowerment. Furthermore, improved support for wellbeing and better accessibility to those support mechanisms available for NHS staff would have a positive impact.

Should the National Care Service establish a national forum with workforce representation, employers, Community Health and Social Care Boards to advise it on workforce priorities, terms and conditions and collective bargaining?

- Yes
 No

Please say why or offer alternative suggestions

No, based on the purpose being suggested. Workforce issues will be different at a local level to a national level. Our experience has been that local bargaining and discussion with Trades Unions (TUs), and workforce representation is more effective at a local level for quick and effective resolution. Where there is nationally determined workforce practice, local context can be overlooked. Whilst a framework for decision making is helpful, specifics should be determined locally. This was demonstrated during the pandemic when issues had to be discussed and consulted upon rapidly. This worked best when the national position was clear to allow practices to be developed with local trade unions. A forum for the purpose of sharing best practice, sharing information, cross sector support and benchmarking would be of benefit – this would enable sharing of good standards across multiple providers and employers. A forum for the purposes suggested would be difficult to manage given the range of stakeholders, providers, and the context in which they work. It would be a significant size and difficult to see how employees and providers could be properly represented. It would also duplicate the work of already undertaken within existing forums which deal with matters such as terms and conditions, collective bargaining, etc. It is also unclear how this aligns with the drive towards designing services around communities and customer centred design, all of which points towards context specific needs.

Workforce planning

Q90. What would make it easier to plan for workforce across the social care sector? (Please tick all that apply.)

- A national approach to workforce planning
- Consistent use of an agreed workforce planning methodology
- An agreed national data set
- National workforce planning tool(s)
- A national workforce planning framework
- Development and introduction of specific workforce planning capacity
- Workforce planning skills development for relevant staff in social care
- Something else (please explain below)

We acknowledge the complexities involved in workforce planning for the entirety of the sector especially in a period of change brought upon by the pandemic. Lessons can be learnt from the pandemic and there is a need to better understand, and more importantly present solutions to improve workforce planning for the social care sector.

If funding is available for workforce planning capacity and support this would be welcomed, as would extra funding for training. Workforce planning within the front-line social care workforce is very much influenced by local requirements and demands. It is difficult to see how this could be undertaken on a national basis. It is unclear how national workforce planning could result in improvements to social care which could not be achieved if further funding were provided to undertake this in a way which reflects and supports the local workforce at a local level. This could be combined with the ability to raise issues and trends for national support and progression.

There is no apparent evidence that a national workforce planning approach would genuinely facilitate movement of qualified or appropriately trained staff from one geographical area to another. It is not clear the benefits in terms of managing capacity that can be gained from a national approach. Equally, the apparent issues cited regarding the number of employers from a range of providers would not be addressed unless there was a single employer.

There may be benefits in considering how Scottish Government can add value to the workforce planning process if workforce planning continues to be undertaken at a local level in response to local needs. For example, work could be done to support common issues and themes arising from local workforce plans. This may be around areas such as promotion of social care as a profession, support for recruitment, support to grow the capacity of the workforce in social care, support to ensure sufficient access to university and college courses to support expansion of capacity, etc.

Access to suitably qualified individuals has challenges in Aberdeen, which are not the same as those faced in more densely populated areas with access to neighbouring cities and a wider range of education providers. Gathering trends in workforce planning is important, only if both the trends and the context specific workforce planning issues are to be addressed. Skills Development Scotland collates and shares a range of labour market intelligence such as regional skills assessments and sector skills assessments, which can support workforce planners to see how the skills system is responding to demand for talent and skills supply. Therefore, many of the trends are already known and it is unclear how the proposals would directly address these issues.

SDS works with industry to ensure work based learning is efficient, responsive and future-focused; and we highlight the importance of work based learning routes such as foundation, modern and graduate apprenticeships – our approach to apprenticeships is aligned to pathways based approach and aims the balance the needs of employers, individuals and the Scottish economy. However, there is not an established graduate apprenticeship framework

for the degree in Social Work. Were this to be agreed, this would be an attractive option for individuals already in the social care/social work sector who wish to progress their career to a professional social work role, given that affordability is often a key barrier to achieving this. Any national approach or framework for workforce planning must be a means of not only gathering but addressing this type of issue.

In terms of the current workforce planning requirements for Health and Social Care Partnerships (HSCPs), it is not currently clear what data sets are required and what Scottish Government would wish to be recorded and reported, etc. Any future requirements for this, including those currently being developed, would benefit from being in a standard format. The problem cited around complexity of workforce planning across health and social care in terms of the number of systems being used is not clearly addressed by the solution proposed.

Training and Development

Q91. Do you agree that the National Care Service should set training and development requirements for the social care workforce?

Yes

No

Please say why

Service providers across Scotland employ their own workforce leading to variation in training, education, development, expectations, and standards of care. A more collaborative approach is required to streamline and lessen disparity in workforce.

If an NCS was established it should seek to address and develop workforce standards, offer training and development and progression therefore attracting higher numbers of applicants. Such standards would require to be set by the NCS given the proposed extent of professionals that would operate under an NCS. Standards of a proportion of those professionals are currently set by SSSC. There is no clarity on the role of the SSSC should the NCS set standards. It is possible that this would either duplicate or add complexity. Any change would need to be clear on the benefits and the impact on the future role of the SSSC.

Training and development should also flow from local workforce plans as well as professional standards. There would need to be a link between the plans and the standards and with local providers. A coordinated approach to the procurement and provision of training across Scotland may bring added value, as would the consistent provision and delivery of this training. This would promote consistent standards across the country, enhancing the profession and increasing employability. However, this does not rely on a National Care Service. Such training and development could be coordinated at a national level whilst maintaining existing structures.

North East Scotland College is currently involved in development and delivery of a course in conjunction with CDN and SFC called Introduction to a Career in Social Care. Rationale for the course is to address the number of vacancies within Social Care across Scotland and build the workforce. The course is aimed at over 25-year-olds who are currently unemployed or at threat of unemployment. An online delivery predominantly but with a limited lecturer input per week. It is run over a 6-week period with 5 broad themes all relating to training and developing a new workforce. Part of the strategy for the National Care Service is to support those starting work in Care and this course will meet this need. Course is developed across all Scotland's college giving an integrated approach with shared good practice utilised to meet different needs across regions.

An area of concern is that workers and providers are unclear what training or qualifications are required or where to get this training and education. Colleges in Scotland can signpost workers and service providers and deliver courses to help build the workforce across all levels. Currently, support is aimed at people in crisis rather than prevention. It is reactive as opposed to being proactive. Clear need to develop a bigger workforce to address this issue. This will allow time for staff development, mentoring of new workers, and importantly from a college perspective more time for placements for students to help with their studies and qualifications which eventually leads to a better and more qualified cohort of workers.

Q92. Do you agree that the National Care Service should be able to provide and or secure the provision of training and development for the social care workforce?

- Yes
 No

Personal Assistants

Q93. Do you agree that all personal assistants should be required to register centrally moving forward?

- Yes
 No

Please say why.

A register may help ensure consistency and quality of care and bring greater recognition to the role and support they provide. It may also identify individuals who should not be taking on the role thereby providing greater protection to those commissioning the care and support. Consideration however will need to be given to the unintended consequences of mandating registration. Would registration come with “mandatory training” and or qualifications? Who would pay for the cost of registration? Both factors may have potential benefits, but they will also likely deter some people from considering the role when there is already in many parts of the country a shortage of personal assistants. As noted previously the consultation largely refers to people (families) who know what they need and what support they need. The whole ethos of Self-Directed Support (SDS) is to provide individuals and families with the opportunity to have a far greater say in how and who provides their care and support. At the cornerstone of the role of Personal Assistant’s (PA) is the relationship between them and the person they provide the care for. Often PA’s come from within the existing support/personal network of the individual/family commissioning the service. These arrangements often work very well with minimum interface with HSCP staff. This strength of relationship often results in PA’s going above and beyond. This can include undertaking tasks which might not be sanctioned if enhanced regulation existed e.g., just as family will often “lift” family members so will PAs when it may be recommended to use a hoist or carrying out personal care tasks when in other settings two carers may be required. Would enhanced regulation create rigidity on a system that works at its best when there is flexibility? Where family/support networks aren’t able to identify PAs, there can be significant challenges identifying local PAs to provide the care and support necessary.

Q94. What types of additional support might be helpful to personal assistants and people considering employing personal assistants? (Please tick all that apply)

- National minimum employment standards for the personal assistant employer
 Promotion of the profession of social care personal assistants
 Regional Networks of banks matching personal assistants and available work
 Career progression pathway for personal assistants

- Recognition of the personal assistant profession as part of the social care workforce and for their voice to be part of any eventual national forum to advise the National Care Service on workforce priorities
- A free national self-directed support advice helpline
- The provision of resilient payroll services to support the personal assistant's employer as part of their Self-directed Support Option 1 package
- Other (please explain)

There is a recurring difficulty identifying PAs to take on the role where a family is unable to identify a person from within their own network. Many are students (nurses, occupational therapists, social workers etc.) and the supply of PAs is unreliable. Developing a regional network may support the matching of available resource across a wider geographical area however transport costs may limit access. Many PAs undertake the role due to a pre-existing relationship they have with the person requiring care. Many would be reluctant to take on such a role for unknown others. Therefore developing "career pathways" would have limited impact. Promotion of the broader "social care" professional may attract some who are undertaking the role to consider other roles. A pathway which enables people to readily step off and on at times appropriate to their personal circumstances is essential.

Q95. Should personal assistants be able to access a range of training and development opportunities of which a minimum level would be mandatory?

- Yes
- No



Community Planning Aberdeen

Progress Report	Summary Refreshed Local Outcome Improvement Plan 2016-26
Lead Officer	Gale Beattie, Chair of CPA Management Group and Aberdeen City Council Director of Commissioning
Report Author	Allison Swanson, Improvement Programme Manager
Date of Report	15 October 2021
Governance Group	CPA Management Group – 27 October 2021

Purpose of the Report
This report presents the public facing summary of the refreshed Aberdeen City Local Outcome Improvement Plan 2016-26.

Summary of Key Information

1 BACKGROUND

1.1 The [Aberdeen City Local Outcome Improvement Plan \(LOIP\) 2016-26](#) was endorsed by Community Planning Aberdeen on 22 August 2016. A refreshed version was approved by the CPA Board in February 2019 and again in July 2021. This report presents the summary version of the refreshed LOIP to make the document more accessible to internal and external staff, communities and members of the public.

2 SUMMARY REFRESHED LOCAL OUTCOME IMPROVEMENT PLAN 2016-2026

2.1 The Summary LOIP is a short, easy read version of the Local Outcome Improvement Plan 2016-26. It explains the purpose of the LOIP and the 15 Stretch Outcomes that the Partnership aims to achieve by 2026. It also invites people across and outwith the Partnership to get involved in helping to deliver the improvement projects that the Partnership will take forward to achieve our aims.

2.2 The document is intended to support awareness raising of the LOIP across all communities in Aberdeen, this includes the third sector, private sector, community groups and individuals. It is hoped that this will lead to increased participation and collaboration to deliver the improvement projects that the Partnership believes will lead to improved outcomes for the people of Aberdeen.

3 NEXT STEPS

3.1 The Summary Local Outcome Improvement Plan will be published on the Community Planning Partnership’s website. This includes the electronic dissemination of the document by Partners to communities.

Recommendations for Action

It is recommended that members of the group:

- i) Approve the Summary Local Outcome Improvement Plan for publication and dissemination.

Opportunities and Risks

The refreshed Local Outcome Improvement Plan 2016-26 enables Community Planning Aberdeen to refocus on those priority areas that rely on Partners working together and with communities to learn how to work differently to achieve new levels of improvement. Success will depend on the drive and passion of the Partnership working with wider sectors and communities. The Summary LOIP is intended to support greater collaboration and partnership working between the Partnership and all communities in Aberdeen.

Consultation

The following people were consulted in the preparation of this report:

Michelle Cochlan, Community Planning Manager
CPA OIG and Locality Lead Contacts

Background Papers

The following papers were used in the preparation of this report.

[Local Outcome Improvement Plan 2016-26](#)

Contact details:

Name	Allison Swanson
Title	Improvement Programme Manager
Email Address	aswanson@aberdeencity.gov.uk



Local Outcome Improvement Plan (LOIP) In Summary



Community Planning
Aberdeen

Welcome

A warm welcome from Community Planning Aberdeen. We are a group of public service organisations working in partnership to improve outcomes for and with people across the City, especially those most in need. All Councils in Scotland are required to have a Community Planning Partnership in place, there are 32 across Scotland. Community Planning Aberdeen has 14 core partners, but we work alongside many more organisations and community groups. We are united in our desire to make things better for the people of Aberdeen through the delivery of the Local Outcome Improvement Plan (LOIP).

Member Organisations



What is the Local Outcome Improvement Plan (LOIP)?

You may have heard people talking about the Local Outcome Improvement Plan (LOIP) – but do you know what it is and what it means for Aberdeen? The LOIP is a document which sets out how Community Planning Aberdeen will improve outcomes for and with local people and communities. The vision set out in the LOIP is that Aberdeen will **be ‘a place where all people can prosper’** by 2026. By this we mean that we want everyone in the city to have the same opportunities, regardless of their background or circumstances.

To achieve this we have developed 15 goals that we are working to achieve over the next five years. They cover three themes: **Economy, People and Place**, with 75 improvement projects planned to help achieve our goals. This offers lots opportunities for you to get involved and you can find out details on how to get involved below. The LOIP is a ten year plan which is reviewed in consultation with partners every two to three years to make sure that we are making a difference.

The LOIP is our city wide plan. It is complemented and underpinned by Locality Plans for the North, South and Central localities of the City. This sees every neighbourhood in Aberdeen covered by a Locality Plan. The Locality Plans detail the priorities and improvement activity for the whole locality and/or targeted at specific neighbourhoods – in most cases priority neighbourhoods. The Plans also make the link between the ideas for improvement which have been identified by communities to the improvement projects within the LOIP.

We have Locality Empowerment Groups (LEGs) and Priority Neighbourhoods Partnerships open to any community member or representative of a community group/ network living in the area that has an interest in working collectively to improve outcomes for the Locality. For more information on the Locality Plans and Partnerships, visit www.communityplanningaberdeen.org.uk or email localityplanning@aberdeencity.gov.uk

Economy

The Economy section of the LOIP details the actions we will take to mitigate the causes of immediate and acute poverty and to improve our economy and increase employment opportunities in Aberdeen. These actions are known as our improvement projects. There are three outcomes in this section and 15 improvement projects that focus on improving Aberdeen’s economy. These projects focus on **ensuring all people across the City have access to food, fuel, shelter and finance**. We are also working to **create and support people new sustained, fair work** opportunities for unemployed residents and developing our residents’ skills through digital access, **skills and qualification/training opportunities**.

Economy Stretch Outcomes – by 2026:



1. No one
will suffer due to
poverty by 2026

2. 400 unemployed people
supported
into **fair work**



3. 500 people
skilled/ reskilled

ECONOMY IMPROVEMENT PROJECTS



Supporting those most impacted by Covid-19 to **recover**



Mitigating causes of acute poverty



Use of **food pantries**



Uptake of unclaimed benefits



Improving home energy



Financial assessments for homeless



Reducing fuel poverty



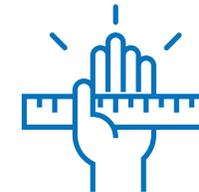
Supporting people to **start businesses**



Supporting labour market to **recover**



Support people into sustained, **good quality work** (priority neighbourhoods & over 50s)

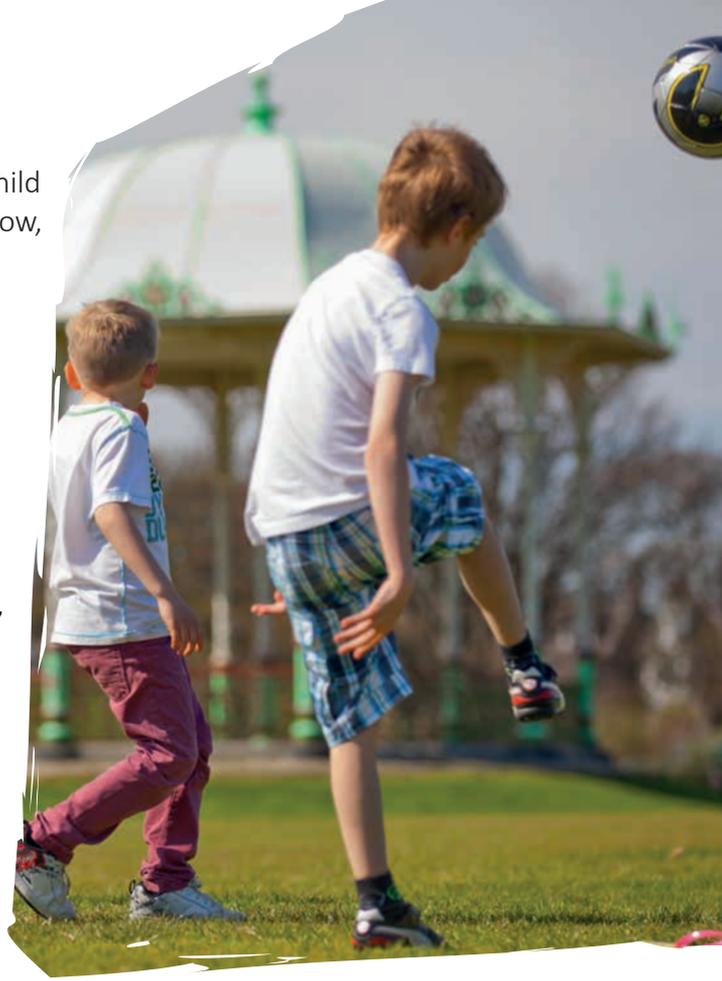


Increasing Modern and Graduate Apprenticeships

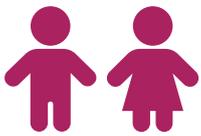
People (Children & Young People)

This section of the LOIP is all about making sure that every child and young person in Aberdeen has equal opportunities to grow, develop and reach their full potential. In total, there are six outcomes within this section and 27 improvement projects.

The projects we are working together to deliver this include supporting parents and families, reducing inequalities for **care experienced children** and improving outcomes for young people in our **priority neighbourhoods**. We want to improve our children and young people's **physical, mental and emotional health and wellbeing**, with projects focused on early intervention for young people with eating disorders, providing digital wellbeing resource. We will be delivering projects that tackle issues in these areas to lead to more positive outcomes. Other projects focus on **improving education experience and post-school opportunities**. Our projects will also provide appropriate and **effective interventions** for young people to reduce their involvement in offending behaviour and supporting them to more positive destinations. Community Planning Aberdeen is also committed to a UNICEF **Child Friendly City status**.



Children & Young People Stretch Outcomes - by 2026



4. 95% of children will reach their expected **developmental milestones**

5. 90% of children and young people will report that their experiences of mental health and wellbeing have **been listened to**



6. 95% of care experienced children and young people will have the **same levels of attainment** in education, health and emotional wellbeing, and **positive destinations** as their peers



7. 95% of children living in our priority neighbourhoods will **sustain a positive destination** upon leaving school



8. Child friendly city where all decisions which impact on children and young people are **informed** by them



9. 30% fewer young people (under 18) charged with an offence



CHILDREN & YOUNG PEOPLE IMPROVEMENT PROJECTS



Uptake of support
for parents and
families

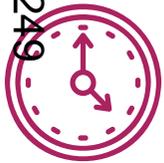


Keeping children safe –
reducing unintentional
injuries & births affected
by drugs



Improving pathways to employment/training
- care experienced & young people from
priority localities accessing a **positive and
sustained destination**

Page 249



**Timely access to
support –** sustainable
& equitable access to
counselling



Becoming a **Child
friendly city**



**Tackling antisocial
behaviour &** increasing
diversionary activities



Early intervention for
young people with
eating disorder



Increasing knowledge &
use of digital wellbeing
resources

People (Adults)

This section of the LOIP has three outcomes which include increasing healthy life expectancy (time lived in good health), decreasing criminal convictions, reducing unsafe levels of alcohol consumption and lowering the number of drug related deaths. There are 25 improvement projects to help us reach these aims.

These projects will focus on making sure that opportunities are in place for positive, safe and successful lifestyles; improving outcomes for people experiencing vulnerability or disadvantage, building resilience in communities and **help people with substance misuse**. To support this approach we are focused on supporting people to make **informed decisions about health and lifestyle**. Other projects focus on providing interventions and support for issues which are contributing to offending behaviour and **reducing the impact of crime** on communities. We will work with people involved in offending, delivering targeted interventions aimed at **reducing specific offences**, such as domestic abuse, hate crimes wilful fire and **access to support for victims**.

Adult Stretch outcomes - by 2026

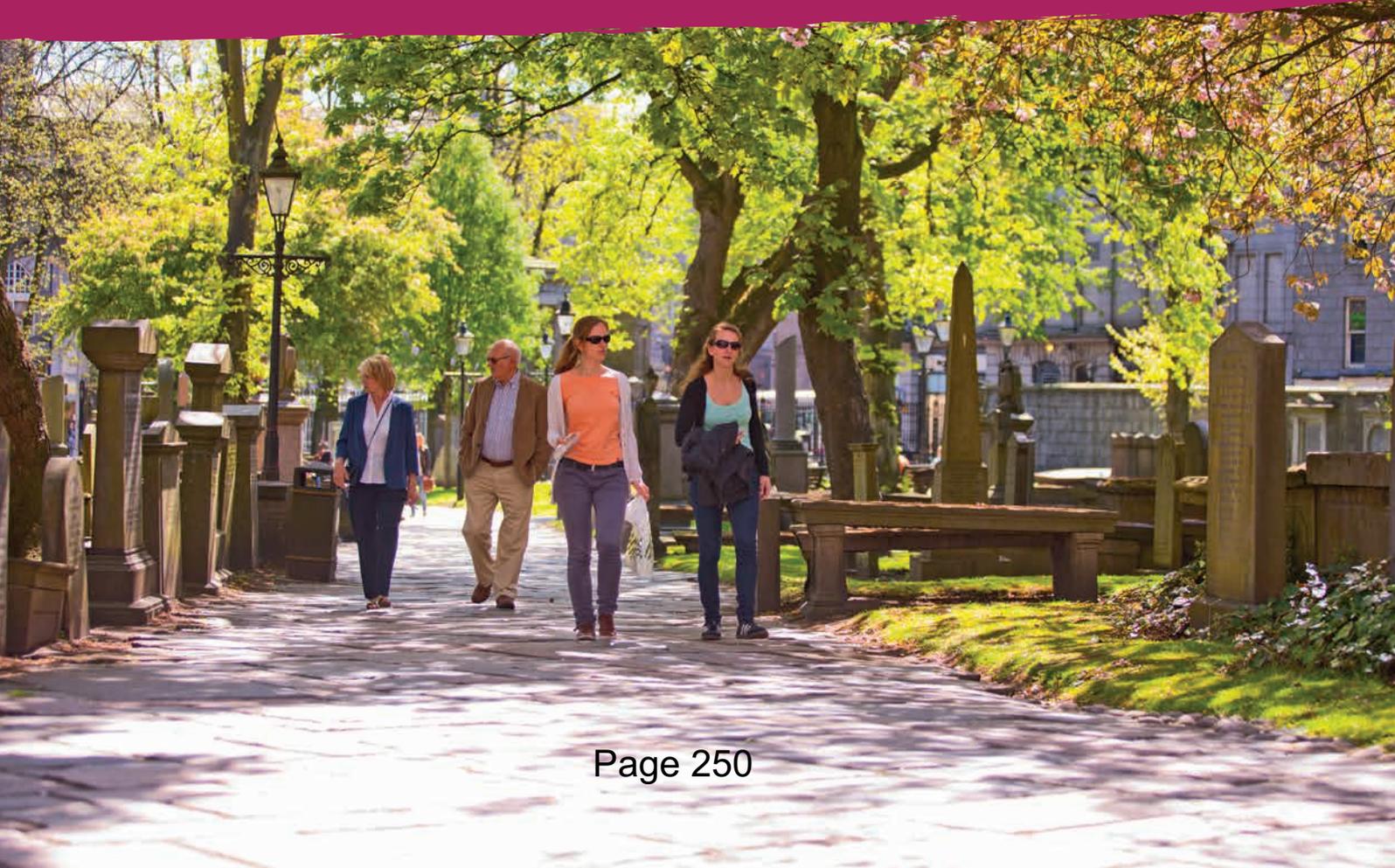


10. 25% fewer people receiving a first ever Court conviction and **2% fewer** people reconvicted within one year

11. Healthy life expectancy (time lived in good health) is **5 years longer**



12. Rate of harmful levels of alcohol consumption **reduced by 4%** and drug related deaths lower than Scotland



PEOPLE (ADULTS) IMPROVEMENT PROJECTS



Support to engage with services on release from prison & employability opportunities



Targeted interventions to reduce domestic abuse, hate crime & wilful fires



Changing attitudes towards alcohol



Increasing access to alcohol & drug treatment



Reducing drug related deaths & increasing access to naloxone



Support vulnerable and disadvantaged – reduce youth homelessness & suicides



Supporting wellbeing & good health choices & adopting healthier lifestyles



Reduce loneliness and social isolation by increasing volunteering opportunities



Support for unpaid carers

Place

This section of the LOIP is about how we can do even more to promote and improve the positive qualities of Aberdeen as a place to live, work, and visit. Our environment and the quality of the place is vital to the quality of life enjoyed in Aberdeen and encouraging the health and wellbeing of our citizens.

The three outcomes in this section cover reducing carbon emissions in the city, increasing active travel across the population of Aberdeen and addressing the nature crisis by protecting/managing green space. There are 8 improvement projects that will help us achieve these aims. These include a focus on **reducing carbon emissions and waste**, through increasing recycling and use of **reusable products; increasing walking and cycling**. Our plans also look to work with communities and build on the levels of community volunteering and collective ownership seen throughout the pandemic to further build community resilience through the development of **community led resilience plans**, increasing **community run green spaces and food growing**.



Place Stretch Outcomes - by 2026



13. Addressing climate change by **reducing Aberdeen’s carbon emissions** by at least **61%** and adapting to the impacts of our changing climate

14. Increase sustainable travel: **38%** of **people walking** and **5%** of **people cycling** as main mode of travel



15. Addressing the nature crisis by **protecting/managing 26%** of Aberdeen’s area for nature



PLACE IMPROVEMENT PROJECTS



Reducing carbon emissions



Reducing waste by increasing reuse and recycling



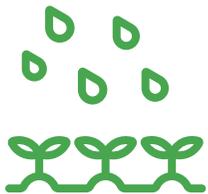
Developing Community Led Resilience Plans



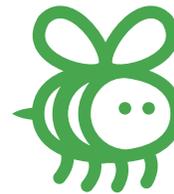
Increase sustainable travel: walking and cycling



Increasing **community run** green spaces



Food growing in schools, communities, workplaces



Organisations **pledging** their land **for nature**

How to Get Involved

To find out more and to read the full version of the Local Outcome Improvement Plan 2016-26, you can visit Community Planning Aberdeen's website, www.communityplanningaberdeen.org.uk.

If you would like to get involved in any of the improvement projects described in this document and want to be part of achieving our outcomes, please get in touch. We value your contribution and feedback. Please email: communityplanning@aberdeencity.gov.uk





Community Planning Aberdeen

Progress Report	Community Planning Budget 2021/2022 – Q1 Budget Monitoring Report
Lead Officer	Gale Beattie, Chair of CPA Management Group and Aberdeen City Council Director of Commissioning
Report Author	Michelle Cochlan, Community Planning Manager
Date of Report	7 October 2021
Governance Group	CPA Management Group – 11 August 2021

Purpose of the Report
The purpose of this report is to provide an update on the 2021/22 Community Planning Budget’s financial performance for the period 1 July 2021 to 30 September 21.

Summary of Key Information																		
<p>1 BACKGROUND</p> <p>1.1 The community planning budget agreed for 2021/22 on 28 April 2021 was £1,748,639. This included contributions from Aberdeen City Council, Police Scotland, NHS Grampian and NESTRANS.</p> <table border="1" data-bbox="300 1346 1233 1780"> <thead> <tr> <th></th> <th>2020/21 Budget £</th> </tr> </thead> <tbody> <tr> <td>Aberdeen City Council</td> <td>1,711,532</td> </tr> <tr> <td>NHS Grampian</td> <td>18,032</td> </tr> <tr> <td>Police Scotland</td> <td>5,000</td> </tr> <tr> <td>NESTRANS</td> <td>5,000</td> </tr> <tr> <td>Sub Total</td> <td>£1739,564</td> </tr> <tr> <td>Civic Forum carried forward</td> <td>3,890</td> </tr> <tr> <td>Police Scotland Local Partnership and Initiative Fund carried forward</td> <td>5,185</td> </tr> <tr> <td>Total</td> <td>1,748,639</td> </tr> </tbody> </table>		2020/21 Budget £	Aberdeen City Council	1,711,532	NHS Grampian	18,032	Police Scotland	5,000	NESTRANS	5,000	Sub Total	£1739,564	Civic Forum carried forward	3,890	Police Scotland Local Partnership and Initiative Fund carried forward	5,185	Total	1,748,639
	2020/21 Budget £																	
Aberdeen City Council	1,711,532																	
NHS Grampian	18,032																	
Police Scotland	5,000																	
NESTRANS	5,000																	
Sub Total	£1739,564																	
Civic Forum carried forward	3,890																	
Police Scotland Local Partnership and Initiative Fund carried forward	5,185																	
Total	1,748,639																	

2 COMMUNITY PLANNING BUDGET 2020/21

2.1 This budget monitoring report shows current and projected expenditure for 2021/22 as at the end of quarter 2.

	2021/22 Budget £	Year to date spend £	Full year forecast £	Variance £ (Difference between forecast and budget)
Fairer Aberdeen Fund	1,640,243	444,036	1,640,243	0
ACVO Third Sector Interface/ engagement: Community Planning	62,321	31,160	62,321	0
City Voice	37,000	37,000	37,000	0
Civic Forum	3,890	0	1,000	(2,890)
Police Scotland Local Partnership & Initiative Fund	5,185	5,185	5,185	0
Total	1,748,639	517,381	1,745,749	(2,890)

2.1 The underspend from the Police Scotland Local Partnership & Initiative Fund during 2020/2021 has now been awarded to the Anti-Social Behaviour Diversion Project in the Northfield Priority Partnership.

3 GRANT FUNDING 2020/21

3.1 As well as the agreed community planning budget, the Partnership receives income from a number of external funding sources. The funding secured to date is below:

	2021/22 Budget £	Year to date spend £	Full year forecast £	Variance £
Community Justice Transition Fund	62,000	15,625	62,000	0
Total	62,500	15,625	62,000	0

3.2 The Community Justice Transition fund for 2021/22 is being used to fund the continuation of the Community Justice Officer post.

Recommendations for Action

It is recommended that the CPA Management Group:

- i) Note Community Planning Aberdeen Budget's performance during quarter 2 of 2021/22.

Opportunities and Risks

Regular reporting on the current year's budget gives Community Planning Aberdeen the opportunity to determine whether value for money is being achieved and allows early identification of possible shortfalls.

Consultation

The following people were consulted in the preparation of this report:

Maggie Hepburn, CEO, ACVO
Jonathan Smith, Chair of Civic Forum
Aileen Duncan, Finance Development Officer, ACC
Susan Thom, Fairer Aberdeen Fund Co-ordinator, ACC
Martin Smith, North Locality Inclusion Manger, ACC

Background Papers

The following papers were used in the preparation of this report.

[Community Planning Budget 2021/22](#)

Contact details:

Michelle Cochlan
Community Planning Manager
Aberdeen City Council
Email: mcochlan@aberdeencity.gov.uk

This page is intentionally left blank

APPENDIX 1 Community Planning Aberdeen Funding Tracker

The tracker below includes key funding opportunities available to the Partnership linked to the themes within the LOIP and Locality Plans.

Title	Description	Amount	Deadline for applications	Relevant CPA Group
Economy				
<p>Zero Waste Scotland - Recycling Improvement Fund – Scottish Government</p> <p>https://www.zerowaste.scotland.org.uk/local-authorities/recycling-improvement-fund</p>	<p>This fund has been established to accelerate progress towards 2025 waste and recycling targets and Scotland’s net-zero carbon commitment, by strengthening and improving local authority recycling infrastructure resulting in increased consistency of collection, improvements to the quality and quantity of material collected, and wider environmental and carbon benefits.</p> <p>The funding will give local authorities the opportunity to take forward small and large-scale projects that increase both the quality and quantity of recycling, whilst delivering wider environmental benefits.</p> <p>This could include:</p> <ul style="list-style-type: none"> ❖ Promoting waste prevention or reuse ❖ Improving the consistency of collections ❖ Collecting problematic materials such as electrical items ❖ Improving sorting and treatment infrastructure ❖ Introducing new low-carbon technologies that would deliver wider environmental benefits, or encouraging behaviour change. <p>Eligible costs items may include, but are not limited to:</p> <ul style="list-style-type: none"> ❖ Plant, equipment, and machinery ❖ Collection containers and equipment 	<p>A total of £70 million has been made available over a five year period from 2021.</p> <p>The grant will be budgeted annually with the initial allocation noted below, this will be subject to regular review:</p> <p>Year 1 - £16 million Year 2 - £16 million Year 3 - £18 million Year 4 - £10 million Year 5 - £10 million.</p> <p>There is currently no limit to the amount which can be applied for and grants may be awarded to cover all or a proportion of the proposed costs.</p>	<p>An expression of interest (EOI) form must first be submitted to be considered eligible for the fund.</p> <p>Successful applicants will be invited to submit a Stage 2 full application.</p>	<p>Local authorities</p>

	<ul style="list-style-type: none"> ❖ Delivery and installation ❖ Buildings or compounds ❖ Site alterations (e.g. HWRC or improvements to communal recycling facilities or Recycling Points) ❖ Modifications to reception, storage, sorting, processing, and onward movement of materials (including modification or upgrades to existing plant and equipment) ❖ Digitalisation and automation ❖ Vehicles. 			
<p>Community Ownership Fund – Scottish Government</p> <p>https://www.gov.uk/government/publications/community-ownership-fund-prospectus</p>	<p>Community groups to bid for up to £250,000 matched-funding to help them buy or take over local community assets at risk of being lost, to run as community-owned businesses.</p> <p>In exceptional cases, up to £1 million matched-funding will be available to help establish a community-owned sports club or help buy a sports grounds at risk of being lost without community intervention.</p> <p>The Fund will run until 2024/25 and there will be at least 8 bidding rounds in total.</p>	<p>Up to £1 million</p> <p>Scottish based projects are guaranteed a minimum of £12.3m over the lifetime of the fund.</p>	<p>December 2021 – round 2 will open</p> <p>May 2022 – round 3 will open</p> <p>The Fund will run until 2024/25 and there will be at least 8 bidding rounds in total.</p>	<p>Community and voluntary organisations</p>
People				
<p>Triangle Trust 1949 Fund</p> <p>https://www.triangletrust.org.uk/</p>	<p>Grants are available for organisations that are working to support young offenders. To be eligible, projects must:</p> <ul style="list-style-type: none"> ❖ Have specific outcomes and targets related to securing employment for young people with criminal convictions. ❖ Show that they will also work with employers and provide post placement support to both employee and employer. 	<p>Up to £60,000</p>	<p>26 October 2021 with shortlisted applicants notified of outcome by 23 March 2022.</p>	<p>Charities, not-for-profit social enterprises and community interest companies</p>

	<ul style="list-style-type: none"> ❖ Demonstrate that they understand the wide range of challenges and issues that will need to be addressed to help a young person succeed on their employment journey. ❖ Show existing work with young people who have been in the criminal justice system is already taking place and can evidence a track record of helping them to achieve positive outcomes. 			
<p>Healthy Ageing Challenge - Designed for Ageing – Innovate UK</p> <p>https://apply-for-innovation-funding.service.gov.uk/competition/1013/overview</p>	<p>The Healthy Ageing Challenge is funding service-led innovation projects designed to support healthy ageing. These projects should deliver a clear game-changing service-led innovation to help people as they age, positively, actively, independently and with dignity.</p> <p>The aims of this competition are to:</p> <ul style="list-style-type: none"> ❖ Address the under-provision of products and services which support people as they age to remain active, independent and socially connected. ❖ Support business-led, near-to-market innovations that have potential to scale. ❖ Enforce good people-centred design principles. ❖ Encourage applications from businesses across the UK, by working with devolved government administrations in Scotland, Wales and Northern Ireland. <p>Projects must focus on one or more of the following service-led innovations that:</p> <ul style="list-style-type: none"> ❖ Enables self-care and new models of care for independent living. ❖ Encourages sustaining physical activity for people aged 50 and over, including for instance, active travel. 	<p>Up to £ 1,400,000</p> <p>Projects must have total eligible costs between £500,000 and £2 million. They must start by 1 May 2022, end by 30 April 2024 and last between 6 months and 24 months.</p> <p>Match funding is required.</p>	17/11/2021	<p>This competition is open to single applicants and collaborations.</p> <p>To lead a project the organisation must be a UK registered business of any size. To collaborate with the lead, the organisation must be a UK registered business of any size, academic institution, charity, not-for-profit, public sector organisation or research and technology</p>

	<ul style="list-style-type: none"> ❖ Improves mental health. ❖ Addresses the 'common complaints' of ageing, for example, incontinence, pain, mobility, hearing and eyesight. 			organisation (RTO).
KFC Foundation Community Grants Programme https://www.kfc.co.uk/kfc-foundation-community-grants	<p>The funding is intended for projects and activities which:</p> <ul style="list-style-type: none"> ❖ Benefit young people aged 11-25 years old. ❖ Support those in a position of social disadvantage (i.e. care leavers, those experiencing homelessness, young carers, young parents, young people at risk of or with experience of the criminal justice system). ❖ Provide spaces that allow young people to feel safe and secure, helping to unlock talent and build life skills, provide mentoring, and improve their chances of gaining meaningful employment. ❖ Ultimately empower all young people to fulfil their potential and build a positive future. ❖ Will demonstrate positive results within 12 months of the receipt of funding. 	Up to £2000	28/02/2022	Registered charities, registered community interest companies, unincorporated clubs or associations or unregistered charities in the UK, with a turnover of less than £300,000 can apply.
Music for All - Community Project Funding https://www.musicforall.org.uk/apply-for-funding/the-application-process/	<p>The grants programme aims to give a helping hand to projects and initiatives across the UK that are seeking to bring music to their communities.</p> <p>The funding is for groups that need assistance to fulfil their potential in developing truly sustainable music programmes - projects making a contribution to local communities and diversity; Educational establishments nurturing talent in children aged between 11-16 in underprivileged communities; Projects based on community choirs.</p>	Up to £2000	29/10/2021	Groups, schools and organisations that are bringing music to their communities in the UK

Place				
<p>FCC Scottish Action Fund – FCC Communities Foundation</p> <p>https://fcccommunitiesfoundation.org.uk/funds/fcc-scottish-action-fund</p>	<p>Applications will be considered for all types of projects included in the following SLCF Objects:</p> <ul style="list-style-type: none"> ❖ Land Reclamation (Object A): The reclamation, remediation, restoration or other operation on land to facilitate economic, social or environmental use. ❖ Community Recycling (Object B): Community-based recycling, re-use and waste prevention projects. ❖ Public Amenities and Parks (Object C): Providing, maintaining or improving a public park or other public amenity which is in the vicinity of a landfill or transfer station. ❖ Biodiversity (Object D): The conservation or promotion of biological diversity through the provision, conservation, restoration or enhancement of a natural habitat or the maintenance or recovery of a species in its natural habitat. Project must be in the vicinity of a landfill or transfer station. ❖ Historic Buildings (Object E): The maintenance, repair or restoration of a building, other structure or a site of archaeological interest which is a place of religious worship, or a site of historic or architectural or archaeological interest and is open to the public. Project must be in the vicinity of a landfill or transfer station. 	<p>Up to £40,000</p> <p>The funding can be used for the following types of costs:</p> <p>Contractors. Materials. Capital items. Small items of equipment used by volunteers and staff to deliver the project.</p> <p>Funding can be awarded towards the refurbishment of an existing community building.</p>	<p>01/12/2021</p>	<p>Local authorities, Charities, community councils, church or community organisations and voluntary groups</p>
<p>Sustrans – Love Your Network Grant</p> <p>https://www.sustrans.org.uk/our-</p>	<p>Grants are available for small, community-led projects that benefit people or wildlife on traffic-free National Cycle Network routes in Scotland.</p>	<p>Up to £1000</p>	<p>06/02/2022</p>	<p>Constituted community groups, charities and social</p>

<p>blog/projects/2019/scotland/the-love-your-network-grant-for-community-groups-in-scotland/</p>	<p>Awards take the form of equipment and training bundles rather than money. These include:</p> <ul style="list-style-type: none"> ❖ Litter picking bundles. ❖ Hand tool bundles. ❖ Scything equipment. ❖ Pollinator ID training. ❖ Beginner bird and other wildlife ID training. ❖ Ecology advice. 			<p>enterprises can apply, as well as informal groups.</p>
<p>International Tree Foundation - UK Community Tree Planting Programme</p> <p>https://internationaltreefoundation.org/</p>	<p>Funding is available to protect, promote and plant trees in local communities in the UK.</p> <p>The funding is for costs that directly relate to new tree planting projects that take place on land in which the general public can visit.</p> <p>In addition, the project must meet one or more of the following criteria:</p> <ul style="list-style-type: none"> ❖ Engage children and young adults in tree planting and learning about trees. ❖ Engage vulnerable groups and groups with low access to woodlands. ❖ Conserve existing ancient trees and indigenous woodlands as well as new planting. ❖ Create biodiversity habitat. ❖ Conserve soil and water. ❖ Demonstrate new approaches such as agroforestry. ❖ Support rewilding and natural regeneration. ❖ Support work or research on tree pest and disease resistance and climate change adaptation. ❖ Support urban tree planting. 	<p>Grants of up to £1,000 are available for projects of up to one year.</p> <p>Grants of up to £6,000 are available for large-scale projects planting between 1,000 and 5,000 trees.</p>	<p>16/12/2022</p>	<p>Applications to this round will be accepted from organisations that are community-based, such as a school, community group or non-governmental organisation.</p>

<p>National Lottery Community Fund - Together for Our Planet</p> <p>https://www.tnlcommunityfund.org.uk/funding/programmes/together-for-our-planet</p>	<p>The Together for Our Planet funding programme aims to support the nurturing and development of local ideas, contributing to a legacy of ongoing climate action projects in hundreds of communities across the UK. Funding is intended to support projects that focus on one or more of the following areas:</p> <p>Food; Transport; Energy; Waste and consumption; The natural environment.</p> <p>Eligible costs include:</p> <ul style="list-style-type: none"> ❖ Community-led research, feasibility studies or work to create a plan as to how and what climate action will look like for the applicant's community. ❖ Events and activity costs. ❖ Equipment and materials. ❖ Staff costs (proportionate to the funded activity). ❖ Training costs. ❖ Transport costs related to the project. ❖ Utilities or running costs related to the project. ❖ Volunteer expenses. ❖ Costs associated with delivering the project bilingually, such as translation costs. ❖ Small land or building projects. 	Up to £10,000	18/11/2021	<p>Constituted group or club. Voluntary or community organisation. Registered charity. Charitable incorporated organisation (CIO/SCIO). Community interest company. Not-for-profit company. School, college, university. Statutory body (including town, parish and community council). Community benefit society.</p>
<p>Central Scotland Green Network - Growing Food Together Fund</p> <p>http://www.centalscotlandgreennetwork.org/n</p>	<p>The funding aims to foster community engagement in growing and learning about food, and promote healthy eating and outdoor exercise.</p> <p>Projects could include elements of growing projects that involve:</p>	The minimum total project value is expected to be £5,000. The maximum contribution from the fund is 75%.	Short deadline 14/10/2021	Public and third sector organisations.

<p>ews-and-events/news/1395-growing-food-together-fund-2021</p>	<ul style="list-style-type: none"> ❖ The installation of infrastructure within a growing site, such as fencing, water harvesting systems, raised beds and improving access or social spaces. ❖ The sourcing of equipment and materials for use in a growing site during the 2022 growing season, such as tools, soil, plants and seeds. ❖ Feasibility studies, research and design work for the creation of new growing sites, such as contamination surveys, community consultation, and site design. ❖ The development and delivery, where possible, of learning exchange programmes, training activities, and the development of community growing networks, that will help support future growing activities and opportunities. 			
<p>Postcode Dream Trust - Dream Fund</p> <p>https://www.postcodedreamfund.org.uk/</p>	<p>The Fund is intended to give organisations the chance to deliver the project they have always dreamed of, but never had the opportunity to bring to life. This year's Dream Fund is seeking projects that are looking to deliver systemic change in the following categories:</p> <p>Environment/conservation - projects that challenge environmental degradation, in particular focusing on biodiversity and species preservation</p> <p>Social inequality - promote the social inclusion of groups that are disadvantaged or excluded from society. Potential areas of interest include early childhood development and educational attainment.</p>	<p>Grants of between £500,000 and £1.25 million are available to deliver a project over a period of 24 months to 36 months in one or more areas of Great Britain in 2022-2025.</p>	<p>Stage 1 applications will be accepted from 1 October 2021 to 1 November 2021 (5:30pm).</p>	<p>All applications must come from at least 2 organisations.</p> <p>The lead partner organisation must be a registered charity. The supporting partners can be charities, voluntary groups, community</p>

	Pandemic recovery – addressing loneliness and social isolation, health and wellbeing, domestic violence and support for neglected groups who have suffered disproportionately during the pandemic			interest companies, universities or other not-for-profit organisations.
Technology				
Scottish Zero Emission Bus Challenge Fund (ScotZEB) – Scottish Government https://www.transport.gov.scot/public-transport/buses/scottish-zero-emission-bus-challenge-fund/	<p>A fund to encourage individual companies, operators or partnerships of organisations to finance zero-emission buses in Scotland.</p> <p>ScotZEB will award grants for the acquisition of zero emission buses running registered bus services in Scotland. The grants will go towards the capital cost of zero emission buses and the associated infrastructure.</p>	<p>The programme has a total budget of £50 million available in 2021.</p> <p>A larger pot of funding is expected to be offered in 2022, should the programme be deemed successful.</p>	04/11/2021	Partnership bids are strongly encouraged and will need to define the lead bidder and how the parties will work together in the event of a successful application. Regional Transport Partnerships (RTP) may bid, or coordinate a bid from the areas they cover. Local authorities may still apply as a separate entity, even where the relevant RTP is bidding.
Scotland - eBike Grant Fund – Transport Scotland	Funds for projects that lead to the large-scale adoption of ebikes and ecargo bikes as an alternative to car journeys across Scotland. The fund is divided into the:	There are two levels of funding:	Category A: 23 July, 24 September, 3 December 2021	Local authorities; community groups; further

https://energysavingtrust.org.uk/grants-and-loans/ebike-grant-fund/	<p>Category A - Community Fund which provides grants to community groups and third sector organisations to support projects that will provide opportunities to trial ebikes.</p> <p>Category B - Public Sector Fund which provides grants to public sector organisations and local authorities for the purposes of providing fleets of pool bikes, bikeshare/hire schemes, and promoting large-scale uptake of ebikes as an alternative to car and van travel.</p>	<p>Category A Fund: Grants of up to £25,000.</p> <p>Category B Fund: Grants of up to £200,000</p> <p>Organisations must provide match funding from an eligible source: 50% cash match funding for Public Sector bodies; and 25% for Community and Third sector organisations, with in-kind funding only considered for the latter groups.</p>	<p>Category B: 6 August, 8 October 2021</p>	<p>and higher education institutions</p>
<p>The Road Safety Trust</p> <p>https://www.roadsafetytrust.org.uk/</p>	<p>Funding available for new road safety initiatives, trials and research. The overall aims of the Road Safety Trust are to reduce death and injury on the UK roads through providing independent funding for research and the development of innovative approaches.</p> <p>The objectives of the grant programme are to:</p> <ul style="list-style-type: none"> ❖ Generate new knowledge about what works. ❖ Translate ideas into new measures. ❖ Influence road safety policy and practice. ❖ Support partnership working and collaboration. 	<p>Major themed grants: between £25,000 and £200,000.</p> <p>Small grants programme 2021: grants of between £10,000 to £30,000 over a two-year period.</p>	<p>Small Grants Programme 2021 applications will be accepted till 18 October 2021.</p> <p>Main Themed Grants Programme has closed for 2021 and will reopen for applications in September 2022.</p>	<p>UK-based organisations, public and professional associations, registered charities, and university departments may apply.</p>



Community Planning Aberdeen

FORWARD PLANNER

The reports scheduled within this document are accurate at this time but are subject to change.

Title of report	Contact Officer
CPA Management Group: 19 October 21/ CPA Board 30 November 21	
CPA Improvement Programme and Locality Plans Quarterly Update	Allison Swanson (ACC)
CPA Quarterly Budget Monitoring Report (Management Group only)	Michelle Cochlan (ACC)
Joint CPA Response to National Care Service Consultation	Michelle Cochlan (ACC)
Summary LOIP 2016-2026	Allison Swanson (ACC)
Half Yearly and Annual Child Poverty Action report for 2020/21	Derek McGowan (ACC)
NESCol Strategic Plan	Robert Laird (NEScol)
Community Justice Annual Report	Derek McGowan (ACC)
Economy Project Charters	
Reduce by 50% the number of homes with an EPC rating of F&G by 2023, leading to 100% by 2026.	Derek McGowan (ACC)
Ensure 100% of people presenting as homeless have a full financial assessment and access to all appropriate benefits by 2023.	Derek McGowan (ACC)
Increase support for those who have been most disadvantaged through the pandemic by 2023.	Derek McGowan (ACC)
Supporting 50 people to start a business in Aberdeen who will be coming off the benefits system or significantly reducing their benefits through starting a business by 2023 and 100 by 2026.	Allison Carrington (SDS)
People (Children & Young People) Project Charters	
Increase the number of vulnerable learners entering a positive and sustained destination by 7% by 2023.	Graeme Simpson (ACC)
Increase to 80%, the number of staff who feel confident about how to directly support, or refer a child for support, and signpost to appropriate services by 2022.	Graeme Simpson (ACC)
Increase by 80% the use of digital wellbeing resources for children and young people's mental health and wellbeing by 2022.	Graeme Simpson (ACC)
Increase by 50% the number of communications which are accessible to children and young people by 2023.	Graeme Simpson (ACC)
Increase to 100% of staff working directly and indirectly with children who have received child friendly city training by 2023.	Graeme Simpson (ACC)
People (Vulnerable Adults) Project Charters	
Increase by 10% the number of clients who access assessment/support/treatment/services in relation to mental health issues: - in Police custody - on a community disposal - in HMP Grampian by 2023	Derek McGowan (ACC)
Increase by 15% victims of domestic abuse receiving support by 2022.	Derek McGowan (ACC)
Reduce youth homelessness by 6% by 2023.	Sandra MacLeod (HSCP)
Increase the number of unpaid carers feeling supported by 10% by 2023.	Sandra MacLeod (HSCP)

Title of report	Contact Officer
Place Project Charters	
N/A	
CPA Management Group: 26 January 22/ CPA Board 23 February 22	
CPA Improvement Programme Quarterly Update	Allison Swanson (ACC)
CPA Quarterly Budget Monitoring Report (Management Group only)	Michelle Cochlan (ACC)
Child Friendly City	Matt Reid (ACC)
Economy Project Charters	
Decrease the number of households in extreme fuel poverty in Aberdeen by 4% by 2023; and reduce the rate of socially rented households in fuel poverty in Aberdeen by 8% by 2023.	Derek McGowan (ACC)
Increase the uptake of unclaimed benefits across Aberdeen City by 2023.	Derek McGowan (ACC)
80% of young people will successfully complete their Modern Apprenticeship programme by 2022.	Allison Carrington (SDS)
Support 50 people into sustained, good quality employment by 2023, and 100 by 2026, with a particular focus on; those from priority neighbourhoods and people over 50.	Allison Carrington (SDS)
Support 15 care experienced young people progress to employment through public sector funded employability programmes by 2023.	Allison Carrington (SDS)
People (Children & Young People) Project Charters	
Increase uptake of parenting and family support by 10% by 2022.	Graeme Simpson (ACC)
Reduce the number of children starting P1 with an identified speech delay by 5% by 2023.	Graeme Simpson (ACC)
100% of schools offer sustainable and equitable access to counselling for those children aged 10 and above who require it by 2022.	Graeme Simpson (ACC)
The number of children and young people with an eating disorder who are identified within 3 months of onset is increased by 50% by 2023.	Graeme Simpson (ACC)
100% of children and young people have free access to physical activity which improves mental health and wellbeing by 2022.	Graeme Simpson (ACC)
By 2023 increase to 100% the number of multiagency governance arrangements which impact on children on young people that include their participation and engagement.	Graeme Simpson (ACC)
Increase the number of care experienced young people by 10% receiving multiagency throughcare/aftercare support by 2023.	Graeme Simpson (ACC)
Increase by 50% the number of 10 to 16 year olds in target areas of the city who access youth community activity by 2023.	Graeme Simpson (ACC)
Reduce by 5% the number of 16/17 year olds with higher support needs offending by 2022.	Graeme Simpson (ACC)
People (Vulnerable Adults) Project Charters	
Reduce the number of drug related deaths occurring within 6 months of liberation from custody from 10 to zero by 2023.	Derek McGowan (ACC)
To support 50 low income families in priority neighbourhood to improve eating behaviours and adopt positive lifestyle choices to help towards a healthy weight by 2023.	Sandra MacLeod (HSCP)
Refer 20% of people living with COPD or other respiratory conditions into specific PR physical activity and other support programmes delivered in community settings by 2023.	Sandra MacLeod (HSCP)
Place Project Charters	
At least 23 organisations across all sectors in Aberdeen pledging to manage at least 10% of their land for nature by 2023 (23BY23) and at least 26% by 2026 (26BY26).	Jillian Evans (NHSG)

Title of report	Contact Officer
CPA Management Group: 23 March 22/ CPA Board 20 April 22	
CPA Improvement Programme Quarterly Update	Allison Swanson (ACC)
CPA Budget Setting Report	Michelle Cochlan (ACC)
North East College Regional Outcome Agreement	Robert Laird (NEScol)
People (Children & Young People) Project Charters	
Increase the number of young people who leave school with a minimum of SVQ3 in literacy and numeracy and 4 other qualifications to 93% 2023.	Graeme Simpson (ACC)
People (Vulnerable Adults) Project Charters	
Increase the number of people undertaking recovery from drug and alcohol issues who are being supported to maintain drug / alcohol free lives in their community by 2023.	Neil Macdonald (Police Scotland)
CPA Management Group: 1 June 22/ CPA Board 6 July 22	
CPA Improvement Programme Quarterly Update	Allison Swanson (ACC)
CPA Quarterly Budget Monitoring Report (Management Group only)	Michelle Cochlan (ACC)
CPA Management Group: 17 August 22/ CPA Board 14 September 22	
CPA Improvement Programme Quarterly Update	Allison Swanson (ACC)
CPA Quarterly Budget Monitoring Report (Management Group only)	Michelle Cochlan (ACC)
CPA Annual Outcome Improvement Report	Michelle Cochlan (ACC)
CPA Management Group: 26 October 22/ CPA Board 30 November 22	
CPA Improvement Programme Quarterly Update	Allison Swanson (ACC)
CPA Quarterly Budget Monitoring Report (Management Group only)	Michelle Cochlan (ACC)
TBC	
People (Children & Young People) Project Charters	
Increase by 40% the use of the wellbeing scenario on the Mind of my Own app by care experienced children and young people by 2022.	Graeme Simpson (ACC)

Acronyms:

ACC	Aberdeen City Council
ACVO	Aberdeen Council of Voluntary Organisations
CPA	Community Planning Aberdeen
HSCP	Health and Social Care Partnership
NHSG	National Health Service Grampian
PS	Police Scotland
SDS	Skills Development Scotland

This page is intentionally left blank