The Highland Council

9th May 2013

Agenda Item	
Report No	

Audit Scotland report: Improving Community Planning in Scotland

Report by the Chief Executive

Summary

This reports highlights the key findings for community planning partnerships (CPPs) arising from the Audit Scotland report and identifies opportunities for reviewing partnership arrangements that would help to deliver the new style Single Outcome Agreement (SOA).

1. Background

1.1 Audit Scotland published its report into Improving community planning in Scotland in March 2013. The report assesses how community planning partnerships (CPPs) are doing and what needs to be done to improve performance. It recognises that legislation to support community planning has been in place for ten years. The report drew on evidence gathered in 2012 from three early audits carried out in Aberdeen, North Ayrshire and the Scottish Borders. The report is appended.

1.2 The national report was presented to the Scottish Parliament Public Audit Committee on 27th March 2013 and was used as evidence for the Local Government and Regeneration Committee on 24th April 2013. It was also presented to the National Community Planning Group on 10th April 2013. The Council Leader is a member of this national group.

1.3 The Council's Community Safety, Public Engagement and Equalities Committee has considered up-date reports on community planning, based on national statements made on community planning, the guidance issued to CPPs on drafting Single Outcome Agreements (SOAs) and information on the new style audit of community planning.

2. Key audit findings for CPPs

2.1 The key audit findings and recommendations for CPPs are that:

1. Many examples of good joint working can be found across Scotland with improvements seen at a local level.
2. Community planning has been seen as a council-driven exercise and not part of the day job for anybody.
3. CPPs are not yet able to show consistently that they have made a significant impact in delivering improved outcomes across Scotland.
4. CPPs have had weak governance and accountability and more is needed to improve planning and performance management.

5. Community planning has had little influence over mainstream resources and collective resources are not well known or used.
6. Community planning partners need to work together to overcome barriers to improve local services and make best use of scarce resources.
7. CPPs need shared leadership with each partner held to account for their contribution to the CPP and development and delivery of SOAs.
8. CPPs need to be clear about the key priorities for improvement in their area.
9. CPPs have not made an impact on reducing social inequality. The requirement for prevention to become a focus of new SOAs and national priorities are noted as ways of addressing this.
10. Public service reform -the creation of national services could bring risks and tensions locally and there is a lack of clarity in how health and social care integration aligns with CPP reform.
11. CPPs need to: use the SOA guidance; have partner resources aligned and focused on partnership priorities; and improve their governance and accountability and their planning and performance management.

2.2 There are findings too for the Scottish Government on joining up the different strands of public service reform and for the National Community Planning Group to provide leadership and support for community planning in Scotland.

2.3 On a positive note, auditors did also find that there is a renewed and optimistic focus on community planning, locally and nationally with a good deal of change and improvement including:

- Reviews of governance structures
- Establishing fewer and clearer priorities
- An increased focus on prevention
- A stronger commitment to community engagement.

It recognises that the new style SOAs should be a driver for change.

3. Implications for community planning in Highland

3.1 The last best value audit of the Council and community planning in Highland was positive. Audit Scotland has reported for 2013 that it finds that the Council has well-developed community planning and engagement structures, as reported in the separate report to this Council meeting on the Assurance and Improvement Plan.

3.2 The new style audits in the future are likely to have a different focus on achieving outcomes, joint prevention approaches and how resources are being used collaboratively. They may also focus on new areas of public service reform such as health and social care integration and the impact of fire and police reform.

3.3 Five CPPs are to be audited in 2013/14; although those CPPs are not yet identified.

3.4 While some of the findings in the national audit report could be recognised in Highland, it is worth noting that community planning often takes place without

it being recognised as community planning. Since the last Single Outcome Agreement was approved in 2009, changes to partnership working and engagement in Highland include:

- the integration of health of social care for older people and children;
- creating District Partnerships for Health and Social Care to support successful integration of these services locally;
- establishing the Highland Economic Forum;
- establishing the Highland Environment Forum;
- establishing Safer Highland joint working arrangements with police, fire and health services;
- testing out new ways of engaging with police and fire services as they move to national organisations through the Community Safety, Public Engagement and Equalities Committee;
- developing some Council ward forums as public service forums e.g. in Skye this a community planning ward forum;
- the creation of a Third Sector Interface and the establishment of the Highland Third Sector Partnership as a representative and development body for third sector organisations.

These processes may not be branded as community planning, but essentially that is what they are about.

3.5 However, processes need to be reviewed and challenged to make sure they continue to be fit for purpose. With a new SOA to deliver from June 2013, a review of partnership working and governance arrangements is timely.

3.6 There is an opportunity to review:

1. Partnership working at strategic/Highland and operational/ local levels to deliver each of the outcome areas in the SOA;
2. The leadership and accountability role of Chief Officers and senior officers across the partnership;
3. The scrutiny and governance by elected and board members of the partnership – both in a partnership setting and within their own organisations.
4. Making the right links across all of those arrangements above.

3.7 There is a willingness among community planning partners to review joint working arrangements for the delivery of the SOA. Ideally this would be concluded in the summer.

4. Implications

4.1 The national audit report has identified the risks to effective community planning. The development of the SOA and the review of partnership arrangements should minimise that risk for Highland, building on the positive audit reports received for Highland to date. There are no further implications arising from the audit report.

5. Recommendation

5.1 Members are asked to note:

- the mixed findings from the national audit report and that community planning in Highland will be subject to a new style audit at any time from this year;
- while community planning audits have been positive, a review of joint working arrangements to deliver the new SOA would be helpful and timely, and that partners have agreed to do this;
- that this national audit report will be considered at a future Audit and Scrutiny Committee meeting.

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Date: 28.4.13

Background Papers: Audit Scotland report: Improving community Planning (2013), presentation by Antony Clark Audit Scotland, to the Community Planning Network 19.4.13.

Improving community planning in Scotland

AUDIT SCOTLAND

Prepared for the Accounts Commission and the Auditor General for Scotland
March 2013

The Accounts Commission

The Accounts Commission is a statutory, independent body which, through the audit process, requests local authorities in Scotland to achieve the highest standards of financial stewardship and the economic, efficient and effective use of their resources. The Commission has four main responsibilities:

- securing the external audit, including the audit of Best Value and Community Planning
- following up issues of concern identified through the audit, to ensure satisfactory resolutions
- carrying out national performance studies to improve economy, efficiency and effectiveness in local government
- issuing an annual direction to local authorities which sets out the range of performance information they are required to publish.

The Commission secures the audit of 32 councils and 45 joint boards and committees (including police and fire and rescue services).

Auditor General for Scotland

The Auditor General for Scotland is the Parliament's watchdog for helping to ensure propriety and value for money in the spending of public funds.

She is responsible for investigating whether public spending bodies achieve the best possible value for money and adhere to the highest standards of financial management.

She is independent and not subject to the control of any member of the Scottish Government or the Parliament.

The Auditor General is responsible for securing the audit of the Scottish Government and most other public sector bodies except local authorities and fire and police boards.

The following bodies fall within the remit of the Auditor General:

- directorates of the Scottish Government
- government agencies, eg the Scottish Prison Service, Historic Scotland
- NHS bodies
- further education colleges
- Scottish Water
- NDPBs and others, eg Scottish Enterprise.

Audit Scotland is a statutory body set up in April 2000 under the Public Finance and Accountability (Scotland) Act 2000. It provides services to the Auditor General for Scotland and the Accounts Commission. Together they ensure that the Scottish Government and public sector bodies in Scotland are held to account for the proper, efficient and effective use of public funds.

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Introduction

Introduction

1. Community planning is the process by which councils and other public bodies work together, with local communities, businesses and voluntary groups, to plan and deliver better services and improve the lives of people who live in Scotland.

2. It was given a statutory basis by the Local Government in Scotland Act 2003 (the Act) (Appendix 1). That Act, and the later statutory guidance, sought to establish community planning as the key means of leading and coordinating partnership working and initiatives at the regional, local and neighbourhood level.[1] It should add value by:

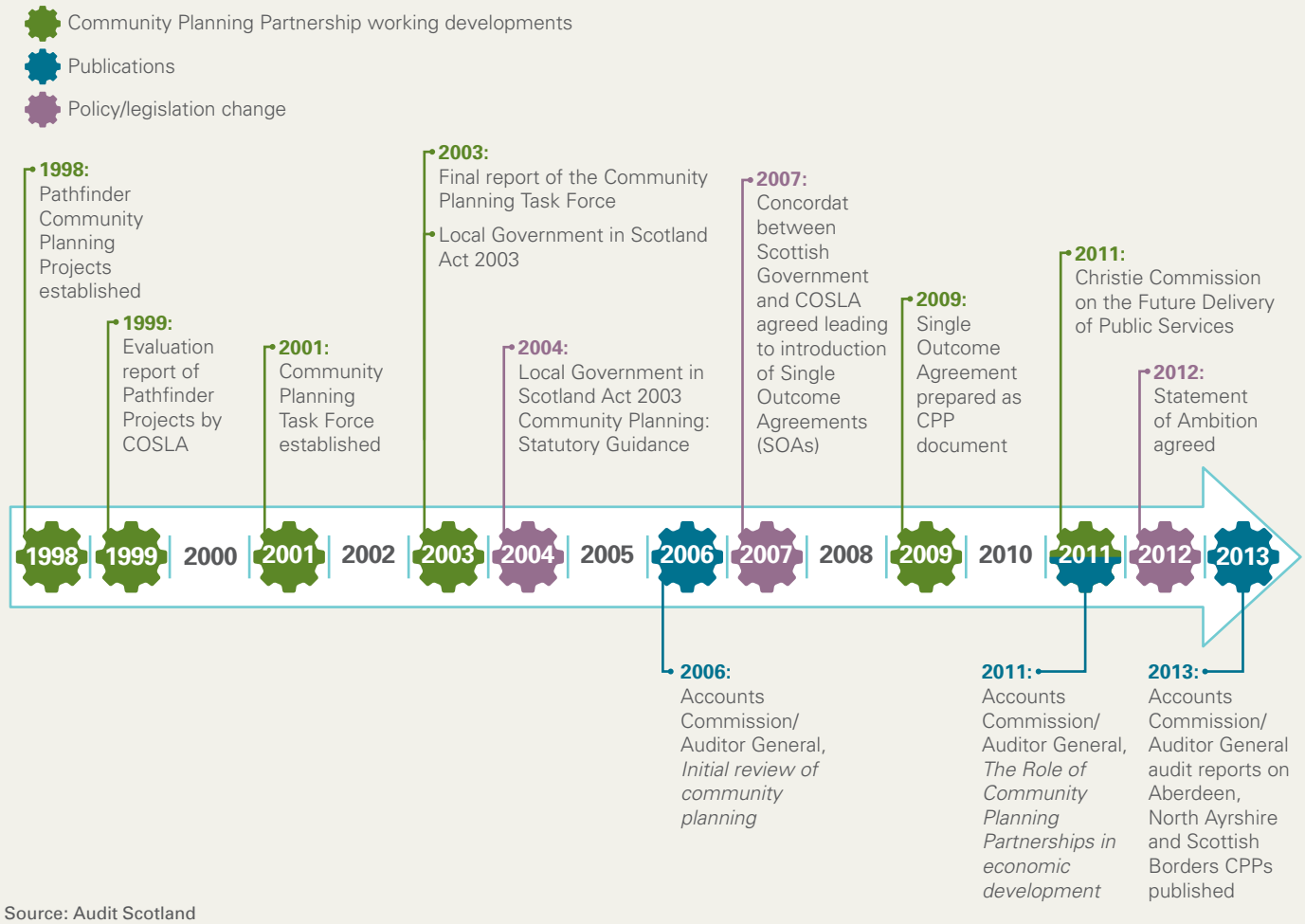
- providing a local framework for joint working
- building a culture of cooperation and trust
- improving public services
- making the best use of public money.

3. Community planning has gone through a series of changes and developments since its introduction in the late 1990s. The main developments are shown in Exhibit 1.

4. Between 2011/12 and 2014/15, the Scottish Government's spending will fall by 5.5 per cent (£1.5 billion) allowing for inflation.[2] Reductions of this scale are a significant challenge for the Scottish public sector. The Christie Commission report[3] on the future of public services highlighted the need for a new, more radical,

Exhibit 1

Main milestones in the development of community planning in Scotland



Source: Audit Scotland

1 *The Local Government in Scotland Act 2003 – Community Planning: Statutory Guidance*, Scottish Executive, Edinburgh, 2004.
2 *Scottish Spending Review 2011* and *Draft Budget 2012-13*, (Table 6.02 – Departmental Expenditure Limits, applying the following deflators: 2012/13 = 2.5 per cent; 2013/14 = 2.7 per cent; 2014/15 = 2.7 per cent), Scottish Government, September 2011.
3 *The Commission on the Future Delivery of Public Services*, Christie Commission, June 2011.

collaborative culture throughout Scotland's public service. It called for a much stronger emphasis on tackling the deep-rooted, persistent social problems in communities across the country to enable public bodies to respond effectively to these financial challenges.[4]

5. The Scottish Government and the Convention of Scottish Local Authorities (COSLA) reviewed community planning and Single Outcome Agreements (SOAs) in 2012. They then published their Statement of Ambition.[5] This sets out high expectations for community planning and puts the community planning process at the core of public service reform by:

- taking the lead role in securing integrated public services
- focusing more on potential problems and identifying ways to prevent them happening
- ensuring public bodies continue to improve the ways in which they manage and provide services
- achieving better outcomes for communities, such as better health and lower crime
- providing the foundation for effective partnership working, within which wider reform initiatives will happen.

6. The Statement of Ambition is clear that significant changes to improve community planning are needed to respond to the challenges of reducing public finances while demand for services increases. Community Planning Partnerships (CPPs) also need to be equipped to reduce the stark variations in outcomes experienced by different communities and implement a significant public service reform agenda.

7. The conclusions in this report draw on the three recent audits of CPPs in Aberdeen, North Ayrshire and Scottish Borders. The report is also based on our wider audit work on partnerships over a number of years. These range from our initial review of community planning in 2006[6] and our *Review of Community Health Partnerships* in 2011,[7] to the most recent audit of the role of CPPs in economic development.[8]

8. This report is designed to make a constructive contribution to the debate about how community planning in Scotland can, and should, be improved. It does not seek to provide 'the answer' to resolving all of the challenges that community planning in Scotland faces. Rather, it uses our collective experience of auditing community planning and partnership working to contribute towards how community planning in Scotland can be improved.

4 Ibid.
5 *Review of Community Planning and Single Outcome Agreements: Statement of Ambition*, Scottish Government and COSLA, March 2012.
6 *Community planning: an initial review*, Accounts Commission and the Auditor General for Scotland, 2006.
7 *Review of Community Health Partnerships*, Accounts Commission and the Auditor General for Scotland, June 2011.
8 *The role of Community Planning Partnerships in economic development*, Accounts Commission and the Auditor General for Scotland, 2011.

Summary

Summary

There is now a renewed focus on community planning which provides a clear opportunity to deliver a step change in performance. This will require strong and sustained shared leadership

9. Partnership working is now generally well established and many examples of joint working are making a difference for specific communities and groups across Scotland. But overall, and ten years after community planning was given a statutory basis, CPPs are not able to show that they have had a significant impact in delivering improved outcomes across Scotland.

10. Our audit work in recent years has found shortcomings in how CPPs have performed. These are widespread and go beyond individual CPPs. Community planning was intended as an effective vehicle for public bodies to work together to improve local services and make best use of scarce public money and other resources. Barriers have stood in the way of this happening. All community planning partners needs to work together to overcome the barriers that have stood in the way of this happening. For example, shifting the perception that community planning is a council-driven exercise, and not a core part of the day job for other partners.

11. The need for change has been recognised and there is now a renewed focus on community planning nationally and locally. The Scottish Government and COSLA's Statement of Ambition sets out an ambitious and challenging improvement agenda for community planning. The Scottish Government and CPP partners must show strong and sustained shared leadership to deliver these improvements. If CPPs are to be at the core of public service reform then the Scottish Government will need to align its resources and policy and performance frameworks in ways that reflect that ambition. This means ensuring that health boards and other public bodies are held to account for their contribution to CPPs and for the development and delivery of new SOAs.

12. CPPs have not been clear enough about the key priorities for improvement in their area. SOAs have tended to be summaries of existing planned actions, covering all national outcomes, without clearly focusing on things that matter most for the local area. Too often, everything has seemed to be a priority, meaning that nothing has been a priority. CPPs have not clearly set out how local partnership working is making a distinctive and additional contr bution to improving public services and improving outcomes for local people.

13. Community planning has had little influence over how the significant sums of public money available, for example to councils and the NHS, are used. Governance and accountability arrangements for community planning have been weak. Much work is needed to improve planning and performance management by CPPs. Individual partner organisations have not been routinely or robustly held to account for their performance as a member of the CPP. As a result, there are no consequences for not participating fully. Nor are the incentives sufficient to change behaviours. Resolving this accountability deficit is one of the keys to improving how CPPs perform and ensuring better outcomes for local communities.

14. One of the aims of community planning was to help reduce social inequality. However, stark differences in outcomes for different groups still persist in Scotland. The reasons for many of these inequalities are complex and deep rooted, affected by many social, economic and environmental factors. It is in these complex areas that CPPs can make a real difference if they focus their efforts and bring to bear the full weight of their combined resources, skills and expertise.

15. There is an increasing emphasis on CPPs planning and delivering services in preventative ways: that is, to prevent problems from arising. This is a long term and challenging process. The new SOA guidance to CPPs[9] requires all new SOAs to include a specific plan for prevention that details what partners are collectively doing and spending on prevention and how the partnership will evidence its progress in:

- making a decisive shift to prevention
- improving outcomes
- reducing future need
- controlling costs and releasing savings.

16. The guidance also highlights national outcomes that have significant scope to reduce inequalities. Together these should help progress to be made in the area of prevention.

17. There is a risk that wide-ranging reforms of public services in Scotland creates tensions between national and local priorities for change. Significant changes are under way aimed at integrating health and social care services, creating national police and fire services and regionalising colleges, all of which are important community planning partners. It is essential that those who lead and manage local public services work together to ensure that they are providing public services in ways that make sense locally, while delivering the stated intention of the reforms. Equally, the Scottish Government has a key role to play by:

9 *Single Outcome Agreements – Guidance to Community Planning Partnerships*, Scottish Government and COSLA, December 2012.

- ensuring 'joined-up' approaches to reform across government
- clearly and consistently setting out how it expects services to be provided in an integrated way
- streamlining policy guidance and arrangements for measuring performance across different parts of the public sector, and making sure they are consistent with each other.

18. At present, it is not clear how important aspects of the community planning review and health and social care integration developments are being integrated. For example, how policy guidance on governance and accountability arrangements is being coordinated and how performance reporting requirements will be aligned.

19. The Statement of Ambition sets out high expectations and a challenging programme of improvements for CPPs. It is clear that there is an appetite among CPPs for progressing this agenda. To implement the Statement of Ambition effectively, several important conditions for success will be needed.

- CPPs need to focus more clearly on where they can make the greatest difference in meeting the complex challenges facing their communities. They need to make their SOAs a true plan for the areas and communities that they serve. They also need to show clearly how they are using the significant public money and other resources available to CPP partners to target inequalities and improve outcomes. SOAs need to specify what will improve, how it will be done, by whom, and when.
- CPPs need to ensure that all partners align their service and financial planning arrangements with community planning priorities. This means ensuring that budget setting and business planning decisions by CPP partners, such as councils and NHS boards, take full account of community planning priorities and SOA commitments.
- CPPs need to significantly improve their governance and accountability, and planning and performance management arrangements by:
  - successfully mobilising resources towards agreed goals and ensuring best use of public resources
  - showing that partnership working is making a significant difference in improving services, driving the move towards prevention, and delivering better outcomes for communities
  - clarifying roles and responsibilities for elected members, non-executives and officers
  - ensuring that CPP decision-making is reflected fully within the governance structures of all partners.
- The Scottish Government should ensure that the links between the various strands of its public service reform agenda are clearly articulated and well understood by all parts of Government and public services. For example, how the strategic oversight relationship between CPPs and Health and Social Care Partnerships, as set out in the Statement of Ambition, should operate in practice. This is key to supporting CPPs deliver on the Statement of Ambition expectation that they should have strategic oversight of, and be at the centre of, all public service reform.
- The National Community Planning Group has an important role in providing vis ble leadership and support for community planning in Scotland. That will mean:
  - maintaining the pace of change in community planning reform
  - ensuring that CPPs are provided with appropriate training and support to enable them to deliver on the ambitious changes expected of them
  - promoting the effective sharing of good practice. For example, in relation to partnership governance.

Part 1. How well are Community Planning Partnerships doing?

How well are Community Planning Partnerships doing?

There are many examples of good joint working, with evidence of some of these delivering improvements at a local level

20. An important emphasis of the Statement of Ambition is for CPPs to strengthen joint working between partners. CPPs have a role to promote and share good practice, for example, about local initiatives, preventative services, and pooling resources.

21. There are many examples of good partnership working across Scotland, often with a strong preventative focus. These include:

- Economic development: The Glasgow Works Partnership Group aims to reduce the number of residents in Glasgow who are not in work. It was established in 2006 and between 2008 and 2011, received around £23.5 million of funding to deliver its employability programme which supported over 21,000 individuals. Almost 4,500 people gained full-time employment, 2,000 gained a qualification and 1,500 entered further or higher education.[10]

- Health Inequalities: The Mobile Alcohol Intervention Team aims to reduce alcohol misuse among under-16s in Fife. It increases awareness of the consequences of alcohol misuse and provides guidance on responsible drinking. The police, NHS Fife and Clued Up (a voluntary substance misuse organisation) worked in partnership, each having a clearly defined role and respons bilities. Between April 2011 and March 2012, the programme worked with 94 young people who were misusing alcohol, 64 took part in follow-up assessments and of these 41 per cent reported that they had reduced their alcohol use.[11]

- Community Health Partnerships (CHPs): NHS Forth Valley and Clackmannanshire Council established an integrated mental health service in 2003 before the Community Health Partnership was established. Having a pooled budget has helped the partners to radically change how they provide services by creating a single referral process for people to access the service. They have also been able to reshape their workforce by changing the skill mix of staff.[12]

- Improving public services: The Marr Community Planning Group brings together representatives from the community and from Aberdeenshire community planning partners. The group aims to identify communities' needs in the Marr area and work together to address these, or to help support people deal with them. Over 50 per cent of the members are community representatives. Achievements include a new dental facility in Huntly and the community management of Braemar Castle.[13]

- Health and social care: The Cheviot programme in the Scottish Borders aims to ensure individuals can live safely in the community for longer, reducing the need for hospital or residential care. Scottish Borders Council and NHS Borders are reshaping health and care services. The day service has been redesigned with the voluntary sector funded to provide three rural social centres. Joint working means a new day service for people with learning disabilities is now being provided at Kelso Hospital.[14]

- Community healthcare: Aberdeen partners have secured £24 million capital funding to develop a community healthcare village. This will accommodate a range of diagnostic and treatment services within a single location. This is to enable people to receive care in a community setting rather than in the city's main hospital complex. Health, social work and police will be based in the new centre providing a range of services.[15]

- Community safety: The Multi-Agency Problem Solving Group in North Ayrshire works closely with local people to identify areas for preventative action. Partners can then target problem issues to improve local outcomes. Areas for potential joint action are identified through the Safer North Ayrshire Partnership. Partners summarise their views and knowledge about the area and contribute to developing a plan for action. Action plans are structured in phases. These include an intensive week of enforcement activity and a visual audit to identify environmental issues such as graffiti, vandalism and fly-tipping. Partners then develop a local plan to address these. The group has used mobile youth centres and portable sports facilities as diversionary activities and youth workers have worked with young people to encourage them to take part in local activities. Residents say the group's work has made a noticeable difference in local communities.[16]

10 *The role of Community Planning Partnerships in economic development*, Accounts Commission and the Auditor General for Scotland, 2011.
11 *Health inequalities in Scotland*, Accounts Commission and the Auditor General for Scotland, December 2012.
12 *Review of Community Health Partnerships*, Accounts Commission and the Auditor General for Scotland, June 2011.
13 *The Commission on the Future Delivery of Public Services*, Christie Commission, June 2011.
14 *Community planning in Scottish Borders*, Accounts Commission and the Auditor General for Scotland, March 2013.
15 *Community planning in Aberdeen*, Accounts Commission and the Auditor General for Scotland, March 2013.
16 *Community planning in North Ayrshire*, Accounts Commission and the Auditor General for Scotland, March 2013.

22. One of the challenges facing CPPs will be finding ways of translating effective local initiatives into new ways of working that can be delivered at scale across Scotland. Much of this joint working has been in response to specific funding opportunities, such as change funds,[17] or has occurred through one or more partners identifying opportunities for improvement. Other important partnership developments, such as the introduction of Community Health and Care Partnerships (CHCPs), have come about because of legislative change.[18]

23. The introduction of community planning has helped to create a culture that now supports joint working. But, we have found that much of the local joint working that takes place is not being led by CPPs and its links with local improvement priorities set out in SOAs are not always clear. This means that CPPs are unable to demonstrate that they are learning the lessons from what worked well locally and applying them to their future partnership working.

CPPs cannot show clearly that they have made a sustained and significant difference in improving outcomes for their communities

24. Many factors that affect performance and outcomes are beyond the control or influence of CPPs. In addition, changing behaviours within communities is complex and takes time. For these reasons it is not straightforward to attr bute either improved, static or deteriorating outcomes to the actions of CPPs. It is important that CPPs are clear about their key improvement priorities, direct resources to them, and gather the right information to assess whether their actions are making a difference in improving services and delivering better outcomes for local people.

25. Since their creation most CPPs have tended to focus on the same broad themes:

- Economy and employment – working to promote economic growth, deal with the impact of the global downturn, create jobs and provide local people with employment opportunities.
- Education and life-long learning – trying to ensure that young people get the best possible education to allow them to access the job market and fulfil their potential, and working to ensure that adults and older people are able to access appropriate training opportunities.
- Health and social care – improving the overall health of the local population and trying to ensure that health and social care services work well together to support people in their homes.
- Community safety – supporting local efforts to deal with issues such as antisocial behaviour.
- Environmental sustainability – working together to improve and protect the environment.

26. Despite their efforts and activity, many CPPs are unable to demonstrate:

- how local partnership working is being targeted to key local improvement priorities
- how community planning is adding value to existing public service delivery arrangements
- whether local partnership working is making best use of public resources
- if local partnership working is leading to significant and lasting improvements in outcomes for communities.

27. Our three local CPP audit reports found that gaps in data prevented a full assessment of the effectiveness of community planning in securing improved outcomes for local communities. The available local and national data indicated mixed performance across a wide range of outcomes such as the economy, health, and community safety.

28. CPPs need to get better at directing their efforts to reducing the gap between the life experiences and outcomes of those living in the most and least deprived areas of Scotland. Stark differences in outcomes for different groups still persist in Scotland. The reasons for many of these inequalities are complex and deep rooted, affected by many social, economic and environmental factors. It is in these complex areas that CPPs can make a significant and lasting difference if they focus their efforts and make effective use of their combined resources, skills and expertise.

29. There is an increasing emphasis on preventative approaches to planning and delivering services within CPPs. The new SOA guidance to CPPs requires all new SOAs to include a specific plan for prevention that details what partners are collectively doing and spending on prevention, and how the partnership will evidence its progress in:

- making a decisive shift to prevention
- improving outcomes
- reducing future need
- controlling costs and releasing savings.

17 Change Funds are specific funding streams created by the Scottish Government to support innovation and improvement in public services, such as early years services, reducing reoffending, and improving older people's services.
18 The NHS Reform (Scotland) Act 2004 and The Community Health Partnerships (Scotland) Regulations and Statutory Guidance, Scottish Executive, 2004.

30. The guidance also highlights national outcomes that have significant scope to reduce inequalities. Together these should help progress to be made in the area of prevention.

Stronger shared leadership is key to delivering improved community planning and it needs to be supported by effective governance and accountability arrangements

31. The Local Government in Scotland Act 2003 clearly sets out the importance of shared leadership in community planning. It states that leadership should be carried out by the organisation best placed to perform this role and that partners should be encouraged to lead on appropriate themes.[19] The Scottish Government and COSLA's joint Statement of Ambition for community planning reinforces the importance of shared leadership. It emphasises that: 'CPPs should be genuine boards, with all the associated authority, behaviours and roles that this implies, for both them and constituent partners.'

32. We found inconsistent leadership across the three early CPP audits. We had particular concerns about the level and range of NHS and other national bodies' engagement with the CPP process. The Scottish Government is seeking to deal with this and has set out more clearly its expectations of how those national bodies should be involved in community planning. It also needs to take action, working with CPPs, to remove the barriers that are preventing community planning acting as a key driver of public service reform. Those barriers include complex and differing accountability arrangements for partners and tensions between a focus on local areas, that is at the core of community planning, and national policy and performance priorities with their much broader focus.

33. Further work is needed to develop the ability of CPP boards to take on their strategic leadership role. We found that, within CPP boards or executive groups, there is little challenge by partners of each other's performance even when there is clear evidence of underperformance and a failure to achieve targets. This may reflect the way in which community planning has evolved. Typically, it starts with building relationships, understanding and trust before developing a culture based on effective challenge and performance management. It means, though, that CPP boards need to develop a much stronger culture of collective challenge if they are to truly lead strategic change.

34. Greater clarity is needed about the roles that local elected politicians, non-executive board members, and officers are expected to take on as part of the community planning process. Many councillors and non-executive representatives from the NHS are unclear about their role in the CPP process. This lack of clarity is a barrier to providing effective leadership and challenge, weakening CPP governance.

35. The Statement of Ambition states that 'the unique responsibilities of CPPs require strong governance and accountability arrangements, which must complement other arrangements such as the accountability of NHS boards to ministers'. Our audit work has found that governance arrangements for CPPs are weak and there is little evidence that community planning is effectively integrated within the formal governance structures of CPP partners. This means that CPP boards have no real authority to make decisions that commit partners to action. This contributes to a more general picture of CPPs being places where issues are discussed but no real decisions are made. CPPs will only be able to make real and significant changes to public services and ensure best value for public money if the representatives sitting on boards are able to commit their organisations to the decisions that boards make.

36. The lack of a clear accountability framework for CPPs continues to be a barrier to more effective partnership working. Individual partner organisations have not been routinely or firmly enough held to account for their performance as a member of the CPP. As a result, they face no consequences for not participating fully. Nor are the incentives sufficient to change behaviours. Resolving this accountability deficit is one of the keys to improving the performance of CPPs and ensuring better outcomes for local communities. More clarity is needed within CPPs about who is accountable to whom, for what, and by when.

37. Many CPPs are reviewing their governance structures in response to the clearer expectation that the Statement of Ambition sets of effective shared leadership. Various governance models are being established. While governance structures need to reflect local circumstances it may be useful for key principles of good governance for CPPs to be identified and published as most of the current good practice guidance focuses on single entities/ bodies, rather than partnerships. Over time any good practice that emerges in this area should also be made available to CPPs. This is a task that the national community planning group may wish to pursue.

19 *The Local Government in Scotland Act 2003 – Community Planning: Statutory Guidance*, Scottish Executive, Edinburgh, 2004.

Community planning has been seen as a council-driven exercise in which partners participate but do not lead or drive change

38. Community planning has tended to be seen as a council-led exercise. This reflects both the legal position of councils as the bodies with the statutory duty to initiate, facilitate and maintain community planning, and the democratic nature of councils which carries with it an important community leadership role. The fact that only councils were formally held to account for their role in community planning through the Best Value audit also helped reinforce the perception that councils were responsible for community planning.

39. Furthermore, bodies such as the NHS and Scottish Enterprise have different accountability arrangements. Together, these meant that other statutory partners have participated with varying degrees of commitment to community planning. They have not seen it as a core part of the day job.

40. The position is changing. We have found evidence of community planning becoming more of a shared enterprise due to the clearer and more explicit expectations from the Scottish Government in the Statement of Ambition and through the National Community Planning Group. This now needs to be reinforced by establishing a clear set of expectations for how the NHS and other national bodies should take part in community planning that can be underpinned by statutory duties as part of the Community Empowerment and Renewal Bill.

41. Changing legislation does not necessarily change behaviours, so further work will be needed across government to send consistent messages to public sector leaders in the NHS, non-departmental public bodies (NDPBs) and agencies. These messages should describe the important role that they must play in supporting community planning, making it clear that it should be part of their core approach to leading and managing their businesses.

Single Outcome Agreements have not been clear enough about the key improvements that community planning aims to deliver for the area. They have tended to act as a summary of existing planned actions covering all national outcomes rather than setting out a clear plan for the communities that each CPP serves

42. The development of SOAs since 2009/10 has improved the range and quality of information gathered to support the community planning process. However, we found that SOAs do not clearly set out the key improvements that community planning is seeking to deliver for the area. In many cases, because everything has been a priority, nothing has been a priority. SOAs tend to act as a summary of existing planned actions covering all national outcomes rather than setting out a clear plan for improving the local area. In addition, national priorities in areas such as NHS performance (and HEAT[20] targets) have diluted the extent to which SOAs have truly focused on things that matter for the local area.

43. SOAs have generally lacked a clear focus on the added value of CPPs and partnership working and tend to focus on process and inputs. They do not explain clearly enough the improvements in outcomes that community planning, and partnership working more generally, is seeking to achieve.

44. CPPs have recognised these difficulties and over time have been refining and streamlining their SOAs. While some have reduced the number of priorities, many partners still believe that there are still too many and that partnership working is spread too thinly across too many fronts. Priorities still do not reflect the key issues and challenges that partnership working needs to addressed locally. Performance measures and targets are clearer and more specific in different parts of the country. More effective arrangements need to be established to ensure that all CPPs can learn from each other and share best practice.

45. Since they were introduced in 2008 SOAs have been reviewed by the Improvement Service, COSLA and the Scottish Government.[21, 22, 23] These reviews highlighted several challenges in improving the local outcomes approach, including the need for better information about performance.

46. Revised SOA guidance was issued jointly by COSLA and the Scottish Government in 2012. It was based on the expectations of community planning that the Statement of Ambition set out.[24] CPPs are currently drafting their new SOAs. They are due to be submitted as draft documents to the Scottish Government by 1 April 2013 with a deadline for the SOAs to be agreed with the Scottish Government by 28 June 2013.

Community planning has had little influence over how mainstream public sector budgets and other resources are used to date

47. The 2003 Act was clear that, to take part effectively in community planning, partners had to identify and allocate the funding and other resources necessary to achieve agreed outcomes. More recently,

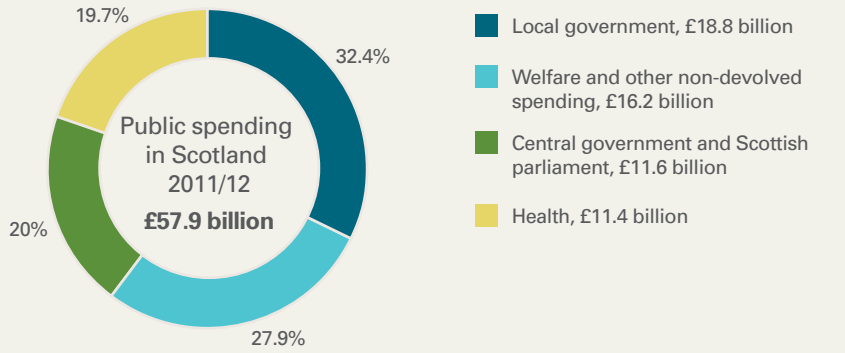
20 HEAT: (H)ealth improvement, (E)fficiency and governance improvement, (A)ccess to services, (T)reatment appropriate to individuals.
21 Interim report from local government on the first phase Single Outcome Agreements in 2008-09, prepared by the Improvement Service on behalf of COSLA and SOLACE.
22 *Single Outcome Agreement Overview Commentary – Progress in 2008-09*, Scottish Government, February 2010.
23 *Local Matters: Delivering the Local Outcomes Approach*, Scottish Government and COSLA, 2011.
24 *Single Outcome Agreements – Guidance to Community Planning Partnerships*, Scottish Government and COSLA, December 2012.

the Statement of Ambition stated that CPPs 'must have a clear understanding of respective partner contributions, how total resources will be targeted to deliver the priorities and how partners will be held to account for delivery'.

48. The pressures on Scotland's public finances are the greatest in living memory, but overall resources remain significant. The total devolved public sector in Scotland employs over 400,000 staff (full-time-equivalents)[25] and the main community planning partners in Scotland (councils, NHS boards, police and fire and rescue) have a significant combined annual budget. The Department for Work and Pensions (DWP) also contributes significantly to public spending, including income support, housing benefit, council tax benefit and state pension. Total public spending in Scotland (including DWP spending) is almost £60 billion (Exhibit 2). If CPPs effectively targeted these resources towards agreed improvement priorities, as the Statement of Ambition anticipates, then over time they should make progress in dealing with the complex challenges facing Scottish society.

49. Our audit work has found many examples of local, jointly funded projects. These projects are important. But, they are at the margins of public services and the short-term nature of the funding can create difficulties when thinking about applying change over much wider services. There is little evidence of CPPs using mainstream resources including money, people and buildings to support the agreed outcome priorities that are set out in SOAs. Barriers to sharing resources and integrating service can exist. For example, often changes that would require investment by one organisation can benefit other public bodies. But, there is little incentive for them to make those changes at a time of increasing budgetary pressures. Improving public services therefore needs to have a 'whole-system' approach where costs and benefits are shared between partners. But, organisational boundaries and financial regulations can get in the way of making change of that kind.

Exhibit 2
Total public spending in Scotland



Source: Audit Scotland

50. If CPPs are to achieve the aspirations set out in the Statement of Ambition, a significant change is needed in their influence over how public resources are used. We have found that CPP partners are only in the very early stages of developing shared asset plans. We also found there is little evidence of the development of shared staff development strategies.

CPPs need to get better at managing performance

51. Strongly and effectively managing the performance of partnership working and the contribution of individual partners is an essential component of an effective community planning process. The 2003 Act sets out the need for CPPs to:

- monitor progress against agreed outcomes
- use that monitoring to improve local arrangements for planning and providing services to deliver better outcomes.

52. The Statement of Ambition strongly emphasises the importance of CPPs monitoring performance over time to ensure public services continuously improve and better outcomes are achieved for local communities.

53. Weaknesses in performance management arrangements within CPPs have been a regular finding in our previous audits of community planning. It remained a common feature in our three recent CPP audit reports. Even those CPPs that have established a performance management framework are not yet using it to drive improvement. SOA targets are often focused on processes not outcomes and effective performance management is also hindered by inconsistencies in the data that are available locally and nationally.

54. Public performance reporting (PPR) is an important aspect of public accountability. PPR by CPPs is improving, but remains very underdeveloped. Improving how

25 Quarter 3 figures, 2012 (local government: 410,500, NHS: 131,800, total central government: 35,400, FE colleges: 10,600). *Quarterly Public Sector Employment Series*, Scottish Government, Office for National Statistics.

CPPs communicate with, involve, and are accountable to local communities will be one of the ways of making community planning more relevant to the communities it is designed to serve. As part of that process, CPPs will need to significantly improve their performance management arrangements. This means gathering and reporting clear and consistent performance data that describes how outcomes have improved due to their actions.

Community planning takes account of a wide range of consultation activity, but there is a long way to go before services are truly designed around communities and the potential of local people to participate in, shape and improve local services is realised

55. We found a strong commitment by CPPs to engage with and involve communities and there are many examples of individual CPP partners consulting communities. This reflects the broadly positive findings of our initial community planning audit in 2006. In some CPPs, consultation also takes place through the CPP itself.

56. But CPPs need to do further work to show more consistently how their consultation activity is influencing community planning priorities and leading to better outcomes for local people.

57. The Community Empowerment and Renewal Bill anticipates more participation by citizens in line with the expectations of the Statement of Ambition. This includes identifying solutions to local problems, and being involved in taking decisions about investing in services or local facilities, or withdrawing from them. CPPs may consider buying or commissioning local services rather than providing them directly themselves. In doing this CPPs should take account of the ability of local communities and the third sector groups such as voluntary organisations and charities to provide the service.

58. Many CPPs are rethinking how they consult with local communities through neighbourhood planning structures or area forums. The aim of this is to tailor services around a clear understanding of local issues by involving local communities in identifying local issues and deciding how best to respond to them. However, much of the focus is still on consultation and getting people involved. There is a long way to go before services are truly designed around communities and the potential of local people to participate in, shape and improve local services is realised.

The Scottish Government has re-emphasised the central role that community planning should play in driving the reform of public services. But the broader public service reform agenda does not appear to be well 'joined up' when viewed from a local perspective

59. Scottish ministers have a statutory duty to promote and encourage community planning when discharging any of their functions. This includes promoting and encouraging the process of community planning as the over-arching framework for improving how public services are planned and provided (Appendix 2).[26]

60. Our initial review of community planning in 2006 found that CPPs were finding it difficult to achieve their potential in meeting local needs. This was due to the wide range of national policy initiatives and because these were not integrated and lacked prioritisation. The fragmented nature of Scottish Executive funding streams was also creating an administrative burden for CPPs.[27] Our more recent audit of the role of CPPs in economic development found that five years on many of the problems identified in 2006 persisted.[28]

61. The Scottish Government is making efforts to raise the profile of community planning across its various departments and agencies. It has asked NHS boards to consider the new guidance on SOAs alongside the guidance on NHS local delivery plans and has set a corporate expectation for all public bodies to engage with CPPs and deliver SOAs.[29]

62. When SOAs were introduced, the Scottish Government assigned responsibility for liaising with individual CPPs to a number of its most senior managers. This 'location director' role was intended to provide a direct link between each CPP and the Scottish Government to:

- build and maintain strong links with local partners
- challenge Scottish Government's partners on their delivery.

63. CPPs found the location director role helpful during the early stages of implementing the SOA process. However, we found that the extent to which they were challenging CPPs varied. We also found that the turnover of staff in those roles had affected the opportunity for CPPs and location directors to establish effective working relationships.[30] More generally, there was a lack of clarity about the role.

64. The Scottish Government is committed to raising the profile and clarifying what it expects of the location director role. The Minister for Local Government and Planning has emphasised to location directors

26 Section 16(8) of the Local Government in Scotland Act 2003.
27 *Community planning: an initial review*, Accounts Commission and the Auditor General for Scotland, 2006.
28 *The role of Community Planning Partnerships in economic development*, Accounts Commission and the Auditor General for Scotland, 2011.
29 Paul Gray. Director-General Governance and Communities, letter to all Local Authority Chief Executives, NHS Chief Executives, Chief Executives of Public Bodies, the Chief Constable and Chief Fire Officer, University and College Principals, Third Sector Interfaces, 11 February 2013.
30 *The role of Community Planning Partnerships in economic development,* Accounts Commission and the Auditor General for Scotland, November 2011.

their important role in building strong relations and acting as an important conduit between CPPs and the Government. This is in light of the expectations that the Statement of Ambition places on both CPPs and the Scottish Government. He has asked location directors to provide strong but constructive challenge to CPPs throughout the development of the new SOAs and in their continuing engagement with local partners.[31]

65. The Scottish Government is currently involved in a wide-ranging programme of public service reform. This includes reviewing community planning, integrating health and social care services, establishing national police and fire services, college regionalisation, and community empowerment. Several of these developments, such as health and social care integration and the review of community care planning, share a common focus on partnerships, place and integrating services. Others, such as police and fire reform have a significant national dimension. Others still, such as college regionalisation, have a regional focus. This complex network of reforms may present challenges in establishing local community planning arrangements that are the foundation within which wider reform initiatives will happen in line with the expectations of the Statement of Ambition. Overall, Scottish Government public service reform developments do not appear to be well 'joined up' when viewed from a local perspective.

66. The Statement of Ambition states that CPPs do not have to take direct responsibility for the delivery of outcomes or integration of services where specific fit-for-purpose arrangements are already in place or are being developed. The proposals to integrate health and social care services are cited as a particular case in point. CPPs need though to have a strategic overview of any such arrangements and assure themselves that they are robust and appropriately joined-up, based on the principle that community planning and SOAs must be core to the implementation of proposals for the integration of health and adult social care services. These principles provide a framework within which local CPP and H&SCP governance arrangements can be established.

67. Aligning community planning and health and social care integration is essential if public resources are to be used to best effect and appropriate links made with the broader community planning service integration and improvement agenda. It is important that each CPP assures itself that the proposed arrangements for health and social care integration in their area:

- reflect local circumstances and priorities
- are clear about the respective roles and responsibilities of the CPP and H&SCP
- will improve the quality of care and outcomes for older people
- will deliver improved value for money.

68. While this is a local decision, national guidance and planned legislation will influence local approaches. But, at present, aspects of the community planning review and health and social care integration developments are not clear. For example, how, in practical terms, CPPs should exercise their strategic oversight of health and social care integration and what should happen where there is either underperformance by the H&SCP or disputes over priorities.

CPPs have not been subject to comprehensive external scrutiny to date. External scrutiny bodies are committed to taking forward developments in a 'joined-up' way, identifying opportunities for aligning and streamlining activity

69. The primary responsibility for improving services lies with the organisations that provide them. However, external scrutiny can also be a catalyst for improvement, influencing the behaviours and culture of providers and leading to improvements in how services are delivered. Audit, inspection and regulation also has an important role in providing assurance to the public, ministers, parliament and others about the quality and effectiveness of public services, and is an important element of the public sector accountability framework.

70. The Accounts Commission and the Auditor General for Scotland have audited partnerships and community planning over a number of years.[32] Until recently though, CPPs have not had comprehensive external scrutiny. Only councils were held to account for their role in community planning through the Best Value audit. The focus of that audit was largely on the management arrangements and processes that support community planning, not on the impact and effectiveness of CPPs in securing better outcomes for their communities. The absence of a comprehensive audit and inspection framework for CPPs contributed to weaknesses in the overall accountability framework for community planning.

31 Derek Mackay, MSP. Correspondence to Pat Watters, CBE, Chair of National Community Planning Group, 31 January 2013.
32 *Community planning: an initial review (2006), Review of Community Health Partnerships* (2011), *The role of Community Planning Partnerships in economic development* (2011), Accounts Commission and the Auditor General for Scotland.

71. There have been a number of recent scrutiny developments requested by Scottish ministers that have a specific focus on partnership working and outcomes:

- The request that the Accounts Commission lead development work, with the Auditor General for Scotland and other scrutiny partners, on how CPPs might be held to account for their performance and helped to deliver better outcomes. This development work led to our three early audits of CPPs in Aberdeen, North Ayrshire and Scottish Borders. These have focused on how effectively the CPPs have:
  - agreed clear improvement priorities for their area
  - established effective governance and accountability arrangements
  - shown effective shared leadership
  - delivered better outcomes for local communities.
- The Care Inspectorate's joint inspections of children's services focus on how well local public bodies are working together to deliver effective outcomes for children and young people.
- The Care Inspectorate and Healthcare Improvement Scotland's development of an approach to inspecting health and care services for older people. This will consider the effectiveness of local partnership working.

72. These developments reflect requirements from Scottish ministers about the level of independent assurance that they expect on services that protect vulnerable people, and on the effectiveness of CPPs as key drivers of public service reform. These new arrangements, have a shared interest in how CPPs are performing and in partnership working more generally. However, the scope that ministers are proposing for them creates the risk that CPPs may be subject to a complex and overlapping set of external scrutiny arrangements.

73. The scrutiny bodies that have been charged with taking forward these developments are committed to doing so in a 'joined-up' way, identifying opportunities for aligning and streamlining activity and eliminating potential duplication. That work has begun through the Strategic Scrutiny Group[33] and will need ministers' support.

33 The Local Government Scrutiny Coordination Strategic Group was established in 2008 to support the Accounts Commission in 'facilitating and coordinating… scrutiny relating to the corporate and strategic role of local government' at the request of the Cabinet Secretary for Finance and Sustainable Growth. This group includes the Accounts Commission, Audit Scotland, Education Scotland (ES), the Care Inspectorate (CI), Scottish Housing Regulator (SHR), Her Majesty's Inspectorate of Constabulary for Scotland (HMICS), Her Majesty's Fire Service Inspectorate in Scotland (HMFSI) and Healthcare Improvement Scotland (HIS). The Scottish Government, COSLA and SOLACE are also represented on the group.

Part 2. What needs to be done to improve performance?

What needs to be done to improve performance?

Community planning in Scotland stands at a crossroads. All those involved must now demonstrate shared leadership and ensure that community planning is an integral part of the day-to-day work of all CPP partners

74. The Statement of Ambition is clear that significant changes to improve community planning are needed to meet the challenges of reducing public finances at a time when:

- demands on public services are increasing
- complex public service reforms are under way.

75. The Scottish Government and COSLA have been clear that the status quo for community planning is not an option. Making the changes needed for community planning to implement the improvements set out in the Statement of Ambition will require sustained national and local leadership. Improvements need to be made quickly, but everyone involved needs to be realistic about the scale of the challenges and the long-term nature of some of the changes that are needed.

76. Community planning is at a crossroads. This offers a significant opportunity to establish a system of leadership, governance and performance that ensures continuous improvement in community planning (Exhibit 3). This will not be easy. Barriers stand in the way, and this virtuous cycle will only be

Exhibit 3
A virtuous cycle of continuous improvement in community planning

Source: Audit Scotland

achieved through a level of sustained leadership that is significantly stronger than we have seen to date.

77. The National Community Planning Group, which was established in June 2012, has a key role to play by:

- providing clear political leadership and encouraging innovation and change
- setting clear expectations for all CPPs
- ensuring that CPPs receive the support they need to improve both their skills and performance.

78. There are five areas for improvement that all parties should focus on to improve community planning in Scotland. These are:

- creating stronger shared leadership
- improving governance and accountability
- establishing clear priorities for improvement and using resources more effectively
- putting communities at the heart of community planning and public service reform
- supporting CPPs to improve their skills and performance.

79. For these improvements to happen, changes need to be made at national and local level. Here we set out a series of recommendations directed at those in a position to make these changes happen.

Strong shared leadership

- **CPPs:** Community planning needs to become a truly shared enterprise, rather than a council-led exercise. This will mean changes in behaviour and more effective engagement and participation by partners, both executive and non-executive. CPPs need to start acting as true leadership boards, setting a stretching ambitious programme for change and holding people to account for delivering them.
- **The National Community Planning Group** has an important role in providing visible leadership and support for community planning in Scotland. It needs to effectively challenge local and national politicians and public sector leaders to maintain the pace of change in community planning reform.
- **The Scottish Government** should ensure that the links between the various strands of its public service reform agenda are clearly articulated and well understood by all parts of Government and public services. In particular, how, in practical terms, the strategic oversight relationship between CPPs and Health and Social Care Partnerships should operate.

Governance and accountability

- **CPPs** need to significantly improve their governance and accountability, and planning and performance management arrangements by:
  - successfully mobilising resources towards agreed goals
  - showing that partnership working is making a significant difference in improving services and delivering better outcomes for communities
  - clarifying roles and responsibilities for elected members, non-executives and officers
  - ensuring that CPP decision-making is reflected fully within the governance structures of all partners.
- **CPPs** need to assure themselves that the proposed arrangements for health and social care integration in their area:
  - reflect local circumstances and priorities
  - are clear about the respective roles and responsibilities of the CPP and H&SCP
  - will improve the quality of care and outcomes for older people
  - will deliver improved value for money.
- **The Scottish Government** needs to implement effectively the ambition in the SOA guidance, to 'hold health boards and other public bodies to account for their contribution to CPPs and for the delivery and development of new SOAs'. This means using all of the levers available to it, including

aligning and streamlining national policies and performance management arrangements to focus more explicitly on local areas and outcomes. It also needs to ensure that appropriate arrangements are put in place to bind all CPP partners and their resources effectively to shared improvement priorities.

Clear priorities for improvement and use of resources

- **CPPs** need to focus more clearly on where they can make the greatest difference in meeting the complex challenges facing their communities. They need to make their SOAs a true plan for the areas and communities that they serve. They need to show how they are using the significant public money and other resources available to CPP partners to target inequalities and improve outcomes. SOAs need to specify what will improve, how it will be done, by whom, and when.

- **CPPs** need to ensure that partners align their service and financial planning arrangements with community planning priorities. This means ensuring that budget setting and business planning decisions by CPP partners such as councils and NHS boards take full account of community planning priorities and SOA commitments.

- **The Scottish Government** needs to clarify how CPPs' contributions to supporting improvements in relation to its national priorities (economic recovery and growth; employment; early years; safer and stronger communities, and reducing offending; health inequalities and physical activity; outcomes for older people) will be assessed and progress reported at national level.

Community engagement and empowerment

- **The Scottish Government** needs to clearly articulate its expectations of effective community engagement by CPPs in its forthcoming Community Empowerment and Renewal Bill legislation.

- **CPPs** need to extend and improve their approach to engaging with communities if the potential of local people to participate, shape and improve local services is to be realised.

Improvement support and capacity building

- **The Scottish Government and COSLA** need to work together to more clearly set out what successful community planning looks like, sharing good practice and supporting improvement at local level. A comprehensive programme of training and support for public sector leaders and front-line staff will be needed, drawing on the work already under way by the Improvement Service as part of the community planning reform programme.

- **The National Community Planning Group need to** ensure that CPP boards are provided with appropriate training and support to enable them to deliver on the ambitious changes expected of them. It also needs to ensure that appropriate arrangements are put in place for promoting the effective sharing of good practice. For example, in relation to partnership governance.

- **CPPs** need to establish effective self-evaluation arrangements that will allow them to target their local improvement activity (leadership, governance, service delivery, etc) appropriately and demonstrate continuous improvement in their operation. They also need to establish effective arrangements for learning and sharing good practice with each other.

- **The Improvement Service and the Scottish Government** need to work together to offer support to CPP boards to help them provide effective leadership and scrutiny of performance. This may involve offering support and guidance to public sector leaders in managing change across organisations. Support in improving the use of national and local data for both planning and performance management purposes may also be needed.

Appendix 1

Community planning in Scotland (excerpt from Local Government in Scotland Act 2003)

Community planning was given a statutory basis by the Local Government in Scotland Act 2003 (the Act). Under the Act:

- Councils have a duty to initiate, facilitate and maintain community planning.
- NHS boards, the police, the fire and rescue services, and the enterprise agencies (Scottish Enterprise and Highlands and Islands Enterprise) have a duty to participate in community planning. This duty was later extended to Regional Transport Partnerships.[1]
- CPPs are required to engage with communities, report on progress, and publish information on how they have implemented their duties and how outcomes have improved as a result.
- Scottish ministers, through the Scottish Government and its agencies, have a duty to promote and encourage community planning.
- Councils can invite other bodies such as colleges, higher education institutions, business groups, voluntary organisations and community groups to take part in community planning, although these are not statutory partners.

All councils have established a Community Planning Partnership (CPP) to lead and manage community planning in their area. CPPs are not statutory committees of a council, or public bodies in their own right. The structure of CPPs and the areas they cover vary considerably, depending on the size and geography of the council area, socio-demographic factors, the local economy and local political priorities. They do not directly employ staff or deliver public services. Under Section 19 of the Act, it is possible for the CPP to establish the partnership as a legally distinct corporate body. Some CPPs have considered this option but, to date, none has sought ministerial approval to do so.

Statutory guidance, issued in 2004, set out clear expectations of CPPs in terms of their legal duties, joint planning and performance management, resource alignment and community engagement.[2] The purpose of the guidance was to ensure that CPPs were clear about how public bodies need to work together to provide better public services and to highlight the requirement that communities are genuinely engaged in the decisions made on public services which affect them.

1 Transport (Scotland) Act 2005.
2 *The Local Government in Scotland Act 2003 – Community Planning: Statutory Guidance*, Scottish Executive, Edinburgh, 2004.

Appendix 2

The role of Scottish ministers in community planning in Scotland (excerpt from community planning statutory guidance 2004)

Scottish ministers have a duty to promote and encourage community planning when discharging any of their functions.[3] The community planning statutory guidance sets out what this duty entails. Scottish ministers will be expected to:

- promote and encourage the process of community planning as the key overarching framework to improve the planning and provision of services
- take into account the views of the collective Community Planning Partnerships in setting policy priorities, particularly on those issues requiring a joined-up approach between a number of bodies
- develop mechanisms within the Executive[4] and its agencies to ensure:
  - that they are joined-up in developing policies and performance frameworks and indicators
  - that they are joined-up in communicating to agencies and/or Community Planning Partnerships the means of delivering these policies, whether this is through strategies and plans, sponsorship of its NDPBs or specific projects, funds and initiatives.

3 Section 16(8) of the Local Government in Scotland Act 2003.
4 The Scottish Executive is now known as the Scottish Government.

Improving community planning in Scotland

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