

COHI (Autumn) 2014 Public Sector Reform Questionnaire

Question	Answer
1. How has your Community Planning Partnership progressed since the last CoHI? What examples of new or improved partnership working can you give	The CPP is working to refresh and streamline its SOA delivery plans. In addition the CPP has identified additional and new priorities to address together. These are: prevention and joint resourcing; workforce planning and skills development; community empowerment, dialogue and participation; and jointly tackling rural poverty/fragility. A 3 rd change from the last COHI is that the CPP Board and Chief Officers Group has undertaken a self-evaluation of its partnership working.
2. What are the barriers to new or improved partnership working/service redesign within your CPP?	Budget restraint and: <ul style="list-style-type: none"> • shifting resources to prevention when demand for reactive services remains high. • sustainable models of rural service delivery. • persistent health inequalities including negative welfare reform impacts.
3. What are the top three challenges and opportunities for your CPP over next 12 months?	There are four agreed for the CPP involving jointly working on: prevention and joint resourcing; workforce planning and skills development; community empowerment, dialogue and participation; and jointly tackling rural poverty/fragility.
4. What successes has your CPP had in relation to community engagement and co-production? How will you build on this? Will the Community Empowerment Bill help	To work jointly on community engagement and co-production we are developing assets based approaches, piloting arrangements in four areas of deprivation and in four account managed rural communities. A strategic approach to community development is being developed by a new CPP officer group. The CEB will help, particularly around the right to participate in improving

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	outcomes and in supporting more transfers of assets into community ownership.
5. What steps have the CPP taken to joint resource planning?	No change from last COHI report, other than identifying the lead officers from partners to review progress. The submission to the NCPG on this matter is attached for information.
6. What focus does your CPP have, and how does it resource, employability work and economic development?	The Highland CPP has a strong focus on employability and economic development. Two of the main themes in the Highland Single Outcome Agreement are an Economic Recovery Action Plan and Employability with working groups chaired respectively by HIE and the Highland Council meeting regularly to ensure progress. The employability theme is funded through the Council and has a focus on youth employment whilst HIE is the main player on economic recovery and growth supported by the Council through Business Gateway. There are ambitious targets for economic recovery including the creation or retention of 5000 jobs over period from 2012-17. The Council-led Create and Employ project which supports small businesses to recruit staff recently won a Cosla Gold Award. A monitoring framework for the economic recovery plan is in place developed through Glasgow University's Training and Employment Research Unit.
7. Has your CPP considered the implications of Our Islands our Future?	No

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**The actions being taken to implement the Agreement on Joint Working on
Community Planning and Resourcing: Up-date from the Highland CPP
November 2013**

Prior to the current SOA, the Highland CPP Board has considered joint resourcing in terms of:

- Highland Council budget consultations (in 2009 and 2012);
- Highland Public Sector Property Group (annual report) and the NESH Capital Plan for 2013/14; and
- The business plan for the Highland Third Sector Interface.

Out with the CPP Board other partnership forums included discussion on joint, shared and integrated resources and the partnership achievements from these discussions are included below. Although not part of the formal CPP Board process, and because of the limitations on Board governance of resources, these achievements are seen as community planning achievements because they are about partnership working and engagement with communities.

In the new Highland SOA information is included on the totality of public funding quantified to date for each of the 6 national policy priorities and in the partnership prevention plan. The SOA also includes a chapter on the review of structures and joint working arrangements in the CPP and that includes a role for the new policy theme groups to develop 'an understanding of the total public resources available for the theme and a willingness to use that collectively (align and/or integrate resources) to meet the agreed outcomes of the joint plan.' (p.170). It also details the role of the Chief Officers Group in removing barriers to reform (including those arising from current partnership arrangements, resources and behaviours) and a role for the CPP Board in providing political leadership and expertise to drive and enable public service reform. This briefing note shows that while there are achievements in joint resourcing to date, there is still much to do to fulfil the Statement of Ambition, and that the new CPP structure and SOA will enable this to happen.

Achievements to date

Integrated resources

The integration of health and social care in Highland uses the single lead agency model. Integration was implemented in April 2012, but considerable time prior to that, and with Government support, was needed to identify and quantify the total resources for integration to enable resources to shift between the Council and NHS Highland and be managed through a Partnership Agreement. Resources relate to budgets, staff and assets.

For children the total resource is up to £50m per annum which includes £7.5m for universal health services for children, £3.5m for family support and child care and £8m for early years education. It is supplemented by £2m over 2 years by new preventative funding. It involved 209 NESH staff moving to Council employment.

For older people the total annual resource is approximately £204m per annum. It is supplemented by an additional £2m over 2 years in new preventative spend. It involved over 1500 Council staff moving to employment in NHS.

Pooled budgets

Examples of pooled budgets include for drug and alcohol services (£6.76m per annum from Government, NHS and Council funding), Violence Against Women (£1.44m per annum from Government, Council, NHS and Police Scotland) and Anti-social Behaviour (£325k per annum+).

Partner contributions for projects

No comprehensive mapping of all partner funding for projects has been undertaken, but they are expected to be considerable and cover a range of policy areas.

For European Regional Programmes (ESF, ERDF and LEADER) we know that £145m of European investment was awarded in the 2007-13 programme to the Highland area with a share of £41m for Highlands and Islands projects. With EU funding providing between 20-60% intervention rates (and up to 90% for LEADER), the total resource from partners could mean over £300m of total resources over the programme period. This helped to create and safeguard 1160 jobs; create 70 new companies; support 1400 small and medium sized enterprises; support 250 social enterprises; create 1500 sq.m of new business space; and funds nine research and development facilities.

Co-location and shared buildings

Co-location examples in the partnership include police counter services and council service points on six sites, out of hours services (including one partner providing the service for another) and shared buildings (e.g. fire station and primary school).

Third sector resourcing

No mapping of resources to or by the third sector has been done; although this is expected to be considerable and supported by EU programmes, the Council (e.g. contracts and discretionary grants), NHS (contracts and Change Fund) and SNH (environmental projects). A new Council fund, the Community Challenge Fund seeks to encourage third sector groups to take over the running of council services where this means they would be provided to a higher standard or at a lower cost. Support for community capacity building to enable this shift in resource and empowerment is required.

Work currently underway

The CPP has a Partnership Property Group which aims to collaborate on asset management. A new project could involve co-location of a fire station with the new Primary School in Portree.

The Council has submitted a proposal to the SFRS Board to support co-located control rooms for police, fire and council services in Inverness with scope to extend this further with other partners.

With CPP partners new models for directing and managing European regional funding for 2014-20 are under development. This will be part of the new CPP structure.

The CPP is exploring how to enable joint and asset-based approaches to community development by mapping partnership activity and employing local co-ordinators to understand and develop community assets better. This is being tested in four urban areas and four rural areas with a view to shifting resources across partners and in support of communities' priorities.

It is difficult to quantify the total resource for some policy areas mainly because they are built into mainstream services, e.g. for reducing health inequalities and for supporting physical activity. Some specific partnership resourced activities can be identified e.g. home fire safety visits, Keep Well, and preventative spending to tackle deprivation but this is not comprehensive.

Future work planned

Total partnership resources are still to be quantified for three policy areas in the SOA: economic growth and recovery (currently seen as HIE and Highland Council resources); employability; and environment. This will be done through the new community planning structure in Highland and specifically by the partnership groups for these policy areas.

Other areas to be developed further include:

- Sharing early proposals for withdrawing or changing local services to be aware of cumulative impacts in local communities and how negative impacts might be mitigated by considering co-location or supporting community owned/managed service delivery.
- How budget setting in partnership can be enabled.
- Developing new models of funding services with partner collaboration, drawing on experience elsewhere and maximising other funding sources such as EU funding and community benefit from renewable energy developments.

Support from the Scottish Government / National Community Planning Group

In dialogue with the SAO Quality Assurance Panel, the Highland CPP identified the benefit of Government support to quantify total resources when the integration of health and social care was under development. Through the SOA panel, the request for further support in this area was made and is outstanding.

The CPP recognises that the need to make budget savings can support the move to more collaboration on joint resourcing and sharing budget planning; but it recognises too that where significant savings are required in a short timescale by one organisation that this can be an impediment to collaboration which usually requires more time. This can be hindered further where those savings are driven in national organisations, providing less opportunity for regional partners to have an influence on joint resourcing locally. A view from the national community planning group on how these tensions may be managed better would be helpful.