

LOCAL GOVERNMENT AND REGENERATION COMMITTEE
PUBLIC SECTOR REFORM AND LOCAL GOVERNMENT
SUBMISSION FROM WEST DUNBARTONSHIRE COUNCIL

This response should be considered alongside the response from SOLACE, which focuses on wider strategic issues and is endorsed by West Dunbartonshire Council. This response will be informed by local examples of progress towards partnerships and outcomes, and new ways of delivering services. The Council is committed to working through, and providing leadership for, its local Community Planning Partnership. We welcome the opportunity to contribute to this inquiry and based on our experiences and reflections, summarise the key overall messages for how the approach could be strengthened at a national level. This Council would welcome:

- Joined-up thinking across Scottish Government departments to ensure that new guidance on Community Planning helps streamline and de-clutter the partnership landscape.
- Reduction of numbers of indicators and budgetary fences
- Flexibility in public sector planning and delivery
- Aligning performance regimes to improve collaboration, and overcoming unnecessary institutional barriers to data sharing.
- Working with Community Planning Partnerships to develop operating and financial models that support new investment in prevention.
- Fund activity in mapping out the totality of public spending in each community planning partnership area to move to a 'whole area' approach to the management of public sector assets.
- Clear guidance that sets out how
 - CPP structures and groups can sign off on activities and financial commitments on behalf of their constituent public bodies, addressing a fundamental challenge in public sector partnership activity
 - The potential conflicts that may arise due to the participation of unelected community activists on CPP or CHCP structures alongside elected members or accountable senior officers can be resolved.

Strand 1-Partnership and outcomes:

To examine the ongoing development of community planning partnerships and the community planning process and assess how these could be built upon to support outcome-based approaches to service planning and delivery in local areas.

West Dunbartonshire has reformed and refined the work of its CPP to focus more on outcome based approaches to service planning and delivery, and to place greater emphasis on preventative approaches.

Following a consultative process in developing our 2011-14 SOA, the CPP reduced and realigned its key community planning priorities to focus on three main areas:

- *Work and Benefits*
- *Supporting Children and Families*
- *Safe, Strong and Involved Communities*

These three priorities are framed within the three key policy frameworks of *Achieving our Potential; Early Years Framework; Equally Well*; which are each underpinned by the principles of early intervention and prevention.

This work was preceded by a strategic shift from a “project to programme” model of CPP investment, which also supports our preventative approach. As a result, initiatives only benefit from CPP investment if they are clearly linked to SOA outcomes; are match funded; and form part of a wider community planning programme to work in partnership with relevant stakeholders on these shared outcomes.

Our CPP has invested significantly in preventative services through a range of multi agency programmes of work. The relevant programmes that are explicitly preventative are:-

- Supporting Children and Families
- More Choices More Chances (MCMC)
- “Reduce Abuse” school-based initiative within the Reducing Violence Against Women programme
- Public Reassurance Initiative
- Waste Fires Initiatives (an award-winning partnership between the Council and Fire & Rescue Services)
- Open Space, Connectivity and Use/Community involvement in Neighbourhoods (helping to prevent the potential “spiral of decline” within specific neighbourhoods through community engagement in environmental improvements and working in partnership with youth providers and the Public Reassurance Initiative.)

In relation to the first bullet point above, the following update gives more detailed information about how an effective, collaborative, outcome-based approach to integrated service planning and delivery in West Dunbartonshire is being implemented.

Supporting Children and Families Programme (within Education and Lifelong Learning Theme): The key strategic purpose of the programme is to deliver improved outcomes for vulnerable children, young people and families (between

birth and 19 years old) through early intervention and more effective, integrated service delivery. The programme aims to improve access to educational, social and employment opportunities in order to increase positive life chances. It also has a long term preventative aim in terms of supporting children to achieve their potential as adults, reducing future dependency on public services.

The programme supports the delivery of key national and local outcomes related to vulnerable children, young people and families. The delivery model is based on highly effective integrated working, shared budgets and a single referral pathway that overcomes normal barriers to successful multi-agency working. It is delivered through an Integrated Children's Service, involving Health, Social Work and Education, and also focuses support on parenting skills. In line with the Scottish Government's Early Years Framework, the emphasis is on giving all children the best start in life through support for parenting, early intervention, and addressing barriers to learning and health.

The key outcomes of the programme are:

- Improved attainment in all sectors including early years attainment
- Parental support to help parents to give their child the best start in life
- Opportunities to enable children and young people 'at risk' to have positive chances and make positive choices in their lives

This Council welcomes the recently announced Early Years Change Fund, and the anticipated location of the governance responsibility for that within Community Planning. Early Years Strategic Planning arrangements have been streamlined within the CPP in this area through the merging of the Joint Strategy Group for Children's Services with CPP Education and Lifelong Learning thematic group. This should assist in taking forward a coherent and joined up response to the opportunities presented by the Early Years Change Fund.

A further example of this Council's move towards integrated working was the decision to align a range of West Dunbartonshire services that contribute to the Work and Benefits SOA priority area, under a single management structure within community planning. The overarching aim is to create new service delivery models that support more people into sustainable employment, reducing dependency on public services and benefits and promoting wealthier, more independent and dynamic communities.

The service areas affected are Employability; Financial Advice Services; Community Learning and Development (CL&D); and Community Work. They are subject to enhanced performance management, financial controls, and partnership approaches developed through the CPP.

The initiative to align CL&D and advice services to employability introduces new preventative and early intervention elements to this work, focusing on purposeful activity for young people, ensuring that all adult learning is targeted on improving residents' employability, and preventing the worst impacts of poverty. It provides a powerful link between job seeking, adult learning and benefits and debt support, with

a single referral pathway being developed to access services across the three service areas

This initiative is consistent with the outcome-based “Total Place” model, where services are built around people not agencies and where cross-sector efficiencies can be realised through better alignment of strategies, performance management and financial controls. This initiative has for example yielded 12% efficiencies with no reduction in overall outputs and no negative impact on jobs. These services are undergoing further review in a wider corporate examination of delivery and management models.

In its budget for 2012/13, the Council has also invested an additional £2.8M in job creation programmes based around significant increases in youth apprenticeships, and an employer incentive scheme.

Although progress is being made to drive forward integration and preventative models, these initiatives would be more likely to fully succeed if all public sector partners had an equal duty to participate in, and financially contribute to community planning, reflected in their respective business plans. There remains a disproportionate pressure on Councils to ensure that community planning delivers innovative joined up responses, and delivers successful outcomes.

The key findings and recommendations from the recently published, “*Outcome budgeting in the Scottish Public Sector – Final Summary Report*” would be a good starting point for exploring how to take forward the outcome approach within CPPs.

The Outcome Budgeting pilot project involved the Improvement Service working closely with two volunteer CPPs and examining three themes – namely, *health and social care for older people; community safety; early years, education and employability*.

In the report, it is suggested that an *outcome planning framework*, consistently applied and mainstreamed, could help to address some of the barriers and challenges of fully implementing an outcomes approach and more effectively involving all partners.

However, it is argued in that report that radical reform is possible as part of a long term project that would need to be supported by a comprehensive change management and stakeholder engagement strategy. It would be worthwhile for Scottish Government to look at the feasibility of taking forward some of the key recommendations outlined in the Final Summary Report, “*Section 6 – Conclusions and next steps*”.

This could be fed into the current preparatory work connected with the proposal for a review of Community Planning being carried out in partnership with COSLA, Scottish Government, SOLACE and the Improvement Service, along with Audit Scotland and the Accounts Commission. This may help all Community Planning partners to have a clearer understanding of what is expected of them in relation to their involvement, identification of priorities and the achievement of better outcomes for communities.

Strand 1: Some points for consideration in relation to challenges/barriers and potential ways of addressing these:

It is important to recognise that a comprehensive shift towards preventative work poses risks to the substantive existing needs of local communities in the short to medium term *unless* some form of bridging funding is available over and above existing core budgets. This is a prerequisite to create the head room necessary to maintain critical services supporting vulnerable individuals and families, whilst at the same time developing new preventative models, some of which have yet to fully demonstrate that they will systematically deliver sustained improvements in practice. However recent announcements on the Scottish Government's Change Funds are a step in the right direction in this regard.

Preventative health work is a good case in point. Significant parts of NHS/health budgets are legitimately focused on the costs of treating people with illnesses and conditions connected to their lifestyle or demographic profile. To deliver these services (particularly given the immanent spike in the population aged 85 years and over), as well as developing the long term preventative services needed, poses technical and fiscal challenges that much of current policy has yet to consider fully.

In many cases budgets are provided for specific activity or programmes and the funder (or regulations) determines inputs and outcomes. A lack of a strategic approach in some areas can act as a barrier as there is an emphasis around the delivery rather than design of intervention which can be joined up to contribute to local pathways which can yield preventative results.

Another barrier is the ability for attribution of the cost/resource savings from preventative activity and the scope to value savings to the public purse. It is important to acknowledge that the savings from a preventative approach may not be accrued by the intervening agency.

There is a need to align partner outcomes at a *national level* and develop new approaches to outcome measurement and the funding structure to support this. A collaborative approach to measuring impact by Scottish Government of national organisations could assist in overcoming this.

There is still a lack of synergy in public sector agency planning cycles and alignment of these would facilitate better joint planning. Developing a holistic approach to performance measures at a national level would enhance the approach.

Other barriers like separate policy and strategic development, accountability and governance arrangements, community concerns, prioritising spend, are arguably barriers that could be addressed, if adequate long term funding is in place to develop effective outcome-based models of preventative spend.

Within West Dunbartonshire, consideration of the above has shaped the local approach to focusing priorities within the current West Dunbartonshire SOA.

It is well established that the primary determinants of health are economic, social and environmental (as well versed within Ashton & Seymour's classic text, *The New Public Health OUP 1988*). This is illustrated effectively by the Dahlgren and

Whitehead "rainbow" of health determinants. As such, our CPP approach to population health improvement is entirely in keeping with this: i.e. its priorities on economic regeneration, education (particularly within, but not exclusive to, early years) and community safety all has a well recognised reciprocal relationship with health status.

Specifying that "health and wellbeing" has to be an explicit element within the CPP work programmes that deliver those priorities reflects a progressive approach to addressing that agenda in a streamlined and integrated manner (reinforced by the fact that the CHCP is represented on the thematic groups primarily responsible for leading each of those work programmes).

The recent announcement on new health and social care partnerships and also the developing governance of the Older People's Change Fund (not least as the latter's indicators will progressively more strongly feature within all SOAs alongside their being increasingly reinforced as core to the business of CHCPs) brings some of these issues into sharp relief.

Within West Dunbartonshire, the Community Planning approach towards improving health and well-being - in terms of both prevention/early intervention - is addressed two-fold.

Firstly, the integrated Community Health and Care Partnership (CHCP) as a *joint vehicle* for the planning, allocation and management of WDC and NHSGGC health and social care resources (both strategically and operationally) is a clear manifestation of *community planning in practice* (not least because of the community engagement mechanisms and elected member representation hardwired into its formal governance).

One option for streamlining and clarifying the governance arrangements in place then would be for existing CHCPs (and certainly the new Health and Social Care Partnerships) to be formally entrusted with the overall responsibility for leading the "health inequality" agenda on behalf of and within the Community Planning Partnership. So rather than develop separate CPP health partnerships and work programmes, the CHCP Committee (as the local "Board" for the CHCP on behalf of the local authority and NHS system) would ensure that sustainable and affordable long-term action on key local health priorities were being attended to. Within this model, an annual paper reporting activities, progress and concerns provided to the Community Planning Partnership Board (possibly by a lead elected member who sits on both) to stimulate discussion and transparent information sharing but making it clear that decision-making and formal scrutiny functions reside within the CHCP Committee and not confused by being, even partially duplicated by, the Community Planning Partnership Board.

It is also worth noting that the more issues that different Scottish Government departments stipulate have to be addressed through SOAs as a matter of routine, the less locally specific or determined those documents will be - all SOAs will end up looking pretty much the same context-wise from area to area. It would be more sensible to select a very small number of areas for routine inclusion (e.g. anticipated Early Years Change Fund indicators) reflective of key priorities for collective action;

and to then specify that the SOA should be completed with the same number of locally determined/negotiated issues (unless of course local concerns exactly marry up with the nationally directed ones).

This would be greatly aided by better joined-up working between and within Government departments to reduce the very unhelpful and counter-productive tendency for them all to advocate separately for their individual areas of interest/portfolio to be reflected within all SOAs.

Strand 2-Benchmarking and performance measurement

To examine the development of work that has taken place over the last two years in relation to the development of benchmarking and comparative performance data and cost measurement and assess how it can contribute to the performance of local authorities in Scotland.

This Council fully supports the comments provided by SOLACE in relation to this strand. However we would add the following specific points:-

- Any initiatives that assist in de-cluttering the landscape regarding performance/benchmarking would be welcome
- Further clarification of the role for inspection/audit agencies & the burdens associated with that experienced by public bodies
- Further clarification on the alignment of performance & planning regimes with CPP partners, including reference to the implications of the structural reform of Police and Fire services
- Recognition of the pragmatic challenges of moving to outcome based performance measurement for medium/long term outcomes

Strand 3-Developing new ways of delivering services

To examine progress in relation to the development of shared services and other innovative ways of achieving economies of scale and harnessing the strengths and skills of key public sector partners to deliver the best possible quality services in local areas.

Across Scottish Local Authorities, there is a range of different models for aligning and grouping services in order to harness the strengths and skills of key public sector partners to improve services that meets the needs of local communities. Cultural and organisational change is important for taking this forward effectively.

One new integrated model currently being implemented in West Dunbartonshire is the One Stop Shop initiative, designed to rationalise and improve customers' experiences of our services. Similar to initiatives developed in other local authorities across Scotland, One Stop Shops will provide joined up customer-centred services in the 3 main settlement areas within West Dunbartonshire. It will ensure streamlined and effective access to the range of Council services in one location, including new ways of requesting, booking and paying for services.

The first of the three One Stop Shops is on schedule to open in Alexandria town centre at the end of March 2012, as part of the Council's investment to improve customer services.

As this service progresses, and subject to appropriate evaluation, there is scope to consider the role of CPP partners in developing a shared services partnership based model. This has the potential to improve delivery of integrated CPP services at a very local level, consistent with the needs and aspirations of residents.

Linked to our One Stop Shop initiative is the development, of joined up Employability, Financial Advice and Community Learning and Development under a single entry service delivery model, referred to in strand one above.

In relation to the question, "*what can be learned from elsewhere for developing new ways of delivering services?*" (such as, Nottingham Early Intervention, Birmingham Total Place Pilot, Community Budgeting pilots), this would be dependent upon a rigorous examination of how relevant and transferable the models/pilots in England are to the Scottish context, recognising the different needs/characteristics of urban, town and rural areas and the concentrations of disadvantage within these.

Generally, the model would involve all public sector bodies looking at developing a joint approach to outcome planning and budgeting, based on a detailed analysis of problems, priorities and finances at a very local level to accelerate reform and re-alignment of *neighbourhood services* that coherently address residents' issues. The next SOA would then be constructed as collaborative vehicle for transformational change with a focus on a limited number of key shared outcomes, with all public sector partners sharing responsibility and accountability for delivery. As noted earlier in this written response, however, putting the model into practice is not without real challenges and barriers.

Recent research (*Making Better Places: Making Places Better* IS 2011) points to a need to move away from universal service provision 'one size fits all' approach to targeted services using the SIMD, and a sound understanding of local need. This report suggests that arrangements built around local communities are the critical factor, so the key task is to build upon the increasingly strong partnership arrangements built cross the last four years and drive localisation and integration around vulnerable communities.