AGENDA ITEM No.2

East Renfrewshire Community Planning Partnership Board

Tuesday 14 January 2014

Present:

Cllr Fletcher Leader of East Renfrewshire Council and Chair of the Community

Planning Partnership

Angiolina Foster Director of Health and Social Care Integration, Scottish Government

Anne Marie Kennedy Chairperson, Voluntary Action East Renfrewshire

Cllr Buchanan

Deputy Leader of East Renfrewshire Council and Convener for

Infrastructure and Sustainable Growth

Cllr Lafferty Convener for Social Work and Health

Cllr Wallace Conservative Group Leader

Jane Martin Senior Director for Marketing and Communications, Scottish

Enterprise

Lorraine McMillan Chief Executive, East Renfrewshire Council

Paul Tanzilli Local Senior Officer, Scottish Fire and Rescue Service Rosslyn Crocket Director of Nursing, NHS Greater Glasgow and Clyde

Wayne Mawson Assistant Chief Constable, Police Scotland

Attending:

Jamie Reid Community Resources Manager Alasdair Martin Community Planning Officer

Apologies:

Robert Calderwood Chief Executive, NHS Greater Glasgow and Clyde

David Boyle Assistant Chief Officer, Scottish Fire and Rescue Service

1. Overview of Community Planning Arrangements

Jamie Reid presented this overview. The key objectives of East Renfrewshire's Community Planning Partnership (CPP) are to deliver upon local outcomes and meet national expectations around community planning. Leadership priorities have been focussed upon;

Place: a detailed socio-economic analysis has been undertaken which profiles the

people and communities within East Renfrewshire, this is used to set the

strategic context for all other activities.

Prevention: utilising the CPPs evidence based framework for identifying, prioritising and

addressing the key drivers of social issues within East Renfrewshire.

Partnership: delivering an integrated public sector response to the key issues and

opportunities identified through the CPPs understanding of place and

delivering closer joint working on identified preventative priorities.

Performance: data and information has been used to drive service improvement and

ensure the CPPs strategic objectives are met.

Jamie Reid outlined the revised structure. This highlighted:

• the creation of the CPP Board to provide strategic leadership and democratic accountability:

- Performance and Accountability Reviews, sitting directly beneath the CPP Board, which focus on the partnership's performance and direct the focus of SOA workstreams; and
- 5 SOA outcomes, each of which will have a delivery team working with the Plan Do Study Act (PDSA) improvement methodology.

The PDSA methodology is a data-driven outcome focussed approach which contrasts from the traditional top down approaches to service design and delivery. PDSA is used to test small scale adjustments to service delivery, which can then be scaled up where successful. In this approach those in front line delivery are empowered to deliver service improvements. Crucial to the success of this model are; will among senior management and the CPP board; alongside staff and champions having the freedom to execute ideas to deliver improvement.

The key points to consider in implementing PDSA are:

- Staff time, levels of commitment across all levels of the CPP and skills development;
- Change to frontline services, staff roles and responsibilities and how workloads are allocated; and
- Scaling up new modes of working whilst meeting reactive service demand

An open discussion followed.

<u>Wayne Mawson</u>, supported the idea of a streamlined bottom up approach, noting the inclusive nature of the proposals for the revised working arrangements for the CPP. Wayne sought clarification on performance monitoring and accountability within the PDSA approach, proposing that the CPP board should consider meeting more than once a year to assess CPP performance.

<u>Jamie Reid and Lorraine McMillan</u> advised that the PDSA model is data driven, and relies on locally collected service information to implement changes. As a result performance can be accounted for over a short period of time. In contrast the Single Outcome Agreement has a long term focus of driving change in communities over a period of years, much performance

information is acquired from nationally produced datasets which can be subject to, upwards of, a two year time lag.

Broadly, there are differing performance reporting arrangements in different circumstances; the SOA is subject to twice yearly performance meetings, whilst operational committees, such as the Child and Adult Protection Committee in the Early Years collaborative get regular updates as issues are reported. The role of the CPP Board is to drive the ambition of stretch aims whilst giving staff the freedom to deliver change within the PDSA model, and therefore rigid reporting and monitoring would not be appropriate.

Rosslyn Crocket welcomed the implementation of the PDSA improvement model, referencing the successes it has already achieved within the NHS. Rosslyn underlined the importance of data, and how the PDSA model allows staff to take ownership of their data and the changes they implement. Rosslyn underlined;

- PDSA models take a while to set up;
- The importance of staff training and development at an early stage;
- Patience in the beginning will reap rewards in the long term; and
- The importance of strong leadership

Leader walkabouts have proven successful in NHS and helped drive integration and acceptance. Rosslyn also underlined the need to include all levels of staff, including middle management. In the NHS issues arose through not including middle managers and the differing management prerogatives that occurred as a result.

Angiolina Foster agreed with the model and how the timing of its implementation was very well placed. Separating and focussing on democratic accountability and operational developments is crucial; the role of the CPP Board is to allow colleagues to deliver change whilst being supported by management and elected representatives.

Angiolina referenced some challenges with delivering on the PDSA model within the context of Health and Social Care Integration.

<u>Paul Tanzilli</u> supported the model, stating the need for consensus from across the Board participants. Paul also emphasised the role of the CPP Board was clear, with an expressed role to facilitate budget sharing, strategic oversight and strong leadership.

<u>Anne Marie Kennedy</u> agreed with the approach and underlined the need to include and support the third sector in this new framework.

<u>Jane Martin</u> stated her support, liking the simplicity of the outcome and aim structure in the model, particularly how greater visibility is placed upon the primary aims and drivers within SOA outcome teams / collaboratives. This will help identify where partners should be involved and how they can best contribute.

<u>Cllr Tony Buchanan</u> agreed with the principles behind the model. He also made some cautionary points. Initially agreed objectives can be distorted, which can in turn lead to major distortions in quality and performance. Cllr Buchanan questioned whether the imperative of staff driven improvement can be reconciled with the imperative to reduce costs. Cllr Buchanan noted tensions between achieving outcomes and reducing costs.

Cllr Fletcher -

Drew the discussion to a close, taking note of the broad agreement among participants in

regard of adopting a PDSA change model within the CPP.

The Board agreed the recommendations in the report as follows:

- the revised community planning arrangements for East Renfrewshire;
- the adoption of the PDSA work stream model by the Partnership; and
- that all Board members will provide the relevant leadership, scrutiny and support within their own organisation to help enable the new working arrangements to succeed.

2. Terms of Reference

Lorraine McMillan explained that the CPP board will take an overall view of SOA delivery and development. This separates oversight from operational delivery. In regards of themes, PDSA stretch aims will become the primary focus. These must be refined and crucial to operational delivery.

The upcoming meeting in June will be a reflection on previous year, and the timing of the June meeting will give the Board an opportunity to reflect upon performance.

Emails will be used to maintain contact and keep Board members up to date with developments.

Lorraine McMillan asked if the Board members were happy with the terms of reference.

Anne Marie Kennedy agreed with the proposals, and stated additional support would be required to allow volunteers to contribute effectively, Anne Marie made reference to the Public Partnership Forum (PPF) that exists between the third sector and CHCP, emphasising that all papers must be circulated in good time and across all members. Adequate briefing materials should also be supplied to allow all partners to contribute effectively.

Assurances were given that all relevant Council and CPP papers would be provided with adequate briefing materials.

<u>Wayne Mawson</u> accepted the oversight role of the CPP Board contained in the terms of reference. In the context of an audit and the CPP were to under perform, how could the oversight proposals contained in the CPP Board be explained as adequate to an auditor? The wording of the terms of reference implies significant responsibility for the CPP Board, and the operation of the Board should reflect this.

<u>Lorraine McMillan</u> agreed that the wording of meeting frequencies in the terms of reference would reflect the ability of the Board to meet as and when required. The CPP Board will meet at the very minimum of once per year and additional meetings would be conducted as and when required.

<u>Cllr Fletcher</u> noted the agreement upon accepting the terms of reference among the Board, and that the issue of meeting frequency can be finalised at the upcoming meeting in June.

The Board agreed the Terms of Reference with the appropriate revisions as discussed.

3. Key Areas of Focus

Jamie Reid provided a socio-economic summary of place and some activities taking place around East Renfrewshire's Single Outcome Agreement.

<u>SOA1.</u> Assessing developmental milestones as part of the Early Years Collaborative is establishing the CPPs focus on early intervention and prevention for pre-school children. The Early Years Collaborative is currently focused on an area of Barrhead called Auchenback, where teams are testing interventions under the PDSA improvement method.

<u>SOA2.</u> Excellent attainment in schools across the local authority. In less affluent catchments, Barrhead and St. Luke's, schools outperform their comparators by a broad margin. 95.8% of school leavers in 2012-2013 term went into a positive destination, up 0.5% upon the previous school year.

In respect of employment, activity surrounds the implementation of welfare reform. To date resources have largely been directed toward the youth employability market from national and local government agencies, as well as the private contractors of the Welfare to Work Programme. 5.5% of 16-24 year olds claim job seekers as at August 2013, the partnership have been working well to reduce this to 3.7% in November 2013. On the basis that the largest number of claimants are over 25 and claim health related benefits, the CPP are considering how to resource activities to support this large client group.

<u>SOA3.</u> Employability, advice and business services from across the CPP are going to be colocated within the Barrhead Foundry. A Place to Grow is delivering a comprehensive plan for the local economy, businesses, residents and tourism. The Barrhead Regeneration Programme has received national recognition as an exemplar town plan.

<u>SOA4.</u> East Renfrewshire is a very safe place to live and experiences some of the lowest levels of crime in Scotland. Jamie highlighted the Greater Results In Partnership (GRIP) approach to community safety; this coordinates activities between emergency, health and community safety services.

<u>SOA5.</u> There was a large increase in care home places in 2012 / 2013, which can partially be attributed to an increasing level of those aged over 85 in East Renfrewshire's population. This growing demographic group is also expected to create greater demand for care at home services over the coming decade. Locality based teams have been established for health and care, centred upon GP practises. Challenges and opportunities remain in the implementation of self directed support.

<u>Angiolina Foster</u> was pleased to see that staff development had been identified as a priority for the coming year, and how this has a major relationship to how services can be redesigned.

<u>Cllr Fletcher</u> seconded this, recognising the role of staff in achieving excellence.

The Board agreed the recommendations in the report and agreed to explore the following topics at the next meeting in June:

SOA 1: Involving communities in the Early Years Collaborative.

SOA2: General population health and looked after and accommodated children.

SOA4: Domestic violence and abuse, creating an approach to tackle this.

Cllr Fletcher drew the meeting to a close, stating the first annual meeting of East Renfrewshire's CPP board will take place in the first two weeks in June and the potential for 6 monthly meetings will be explored then.

Meeting closed.