



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	17 February 2016
Agenda Item	10
Title	Locality Development
<p>Summary</p> <p>This paper is to update the Integration Joint Board on work to establish locality planning and gives details of the Community Led Conversations programme.</p>	
Presented by	Frank White, Head of Health and Community Care
<p>Action required</p> <p>It is recommended that the IJB note the contents of this report and endorse the new approach.</p>	
<p>Implications checklist – check box if applicable and include detail in report</p> <p> <input checked="" type="checkbox"/> Financial <input type="checkbox"/> Policy <input type="checkbox"/> Legal <input type="checkbox"/> Equalities <input type="checkbox"/> Efficient Government <input type="checkbox"/> Staffing <input type="checkbox"/> Property <input type="checkbox"/> IT </p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

17 February 2016

Report by Chief Officer

LOCALITY DEVELOPMENT

PURPOSE OF REPORT

1. The purpose of this report is to update the Integration Joint Board on work to establish locality planning and gives details of the Community Led Conversations programme.

RECOMMENDATION

2. It is recommended that the IJB note the contents of this report and endorse the new approach.

BACKGROUND

Localities

3. All Health and Social Care Partnerships are required to establish locality planning arrangements providing a forum for professionals, communities and individuals to inform service redesign and improvement.
4. In our strategic planning conversations local people, staff and partners demonstrated a keen interest to working together in shaping health and social care in East Renfrewshire. We consulted widely on how we should develop localities and agreed up on a system which had:-
 - close alignment of health and care services with GP practices in localities based on GP practice populations,
 - a focus on the different health and wellbeing outcomes in different local areas of East Renfrewshire; and
 - strong links and engagement with different communities within East Renfrewshire.
5. Under the previous CHCP, we aligned many of our adult health and care services to locality clusters of GPs, in our Rehabilitation and Enablement teams. Link GPs from the localities were invited onto our strategic planning group and have been working with us giving their perspectives, supported by locality data and information.
6. Voluntary Action has continued to develop the work started under Reshaping Care for Older People in building the capacity of communities, and developing the local Third Sector Chief Officers meeting. The Public Partnership Forum has strengthened its representation from local areas.
7. All this work gives a solid platform of locality planning, however it has not achieved the ambition set out in our strategic plan to truly work with communities as partners in shaping the care and supports available and in providing opportunities for people to get involved in their communities.

8. Our partnership vision statement is “***Working together with the people of East Renfrewshire to improve lives***”
- Valuing what matters to people.
 - Building capacity with individuals and communities.
 - Focusing on outcomes, not services.

REPORT

9. Scottish Government and the Joint Improvement team are encouraging Health and Social Care Partnerships to consider the Community Led Conversations programme and test it in an integrated environment. Scottish Government are encouraging three partnerships to sign up to the first wave of this programme which is designed to support Health and Social Care Partnerships to put their work right at the heart of communities. The programme is about ***cultural*** and ***system*** change, transforming social work practice to be much more rooted in communities, working in collaboration with local people, other agencies and organisations.
10. The programme works on the principle that frontline community health and social care support and services can be delivered out of “Hubs” based in local communities. Experience of delivering the model in England and Wales is that this results in reduced bureaucracy, better outcomes for individuals and cost savings. Feedback from staff involved is overwhelmingly positive, with professionals talking about increased job satisfaction through getting back to “good old fashioned social work”.
11. The values driving the Community Led Conversations programme are:
- Co-production, which must underpin the process for development of the model locally from the very start, sharing power and decision making with all stakeholders as equal partners in the design and delivery of the change process. In this way, the programme aims to build resilience with local people and communities to develop their own solutions to local issues.
 - Person centred thinking and working at all levels, based on skilled conversations, a focus on outcomes and an asset based approach to finding solutions. The starting point is that we value what matters to people and are focussed on outcomes, not services.
 - Empowered staff teams, with a proactive focus on delegating responsibility and decision making as close to the individual being supported as possible.
 - Reduced bureaucracy and simplified processes, which must be integral to the new model and which in turn contribute to the overall savings which working in a community led way have been seen to achieve.

FINANCE AND EFFICIENCY

12. The cost of the programme is a one off charge of £85k. This funds 85 site days, national and cross partner events over an 18 month period. Areas which have implemented this approach have delivered real efficiencies through improved management of demand.

CONSULTATION

13. The next step of the process will be to work with the Public Partnership Forum and Voluntary Action to plan a locality engagement process. We want to start a new conversation with local communities and professionals about this proposed new way of

working and plan with them how and where we should develop local community hubs. Over the next four months with programme support we will aim to gain local 'buy in', generate enthusiasm for change and develop plan for scope, methodology and key milestones and agree local priorities.

PARTNERSHIP WORKING

14. A significant feature of the programme is co-production and co-design of community led conversations. We will work in full partnership with Voluntary Action and NDTi (National Development Team for inclusion) in developing that aspect of the programme. The second stage of the programme will support local implementation, training, cultural and process change in partnership with communities and the third sector.

IMPLICATIONS OF THE PROPOSALS

Policy

15. None

Staffing

16. None

Property

17. None

Legal

18. None

IT

19. None

Equalities

20. None

CONCLUSIONS

21. In summary, the Community Led Conversations Programme seeks to change the culture and practice of community health and social work delivery so that it becomes more clearly values driven, community focused in achieving outcomes, empowering of staff and a true partnership with local people. The HSCP considers that undertaking this programme will enable us to truly work with communities as partners in shaping the care and supports available and in providing opportunities for people to get involved in their communities. We have volunteered to be one of the first three partnerships to test the Community Led Conversations programme.

RECOMMENDATIONS

22. It is recommended that the IJB note the contents of this report and endorse the new approach.

REPORT AUTHOR AND PERSON TO CONTACT

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BACKGROUND PAPERS

None

KEY WORDS

Localities, Community, NDTi, Community Led Conversations