



The Scottish Parliament
Pàrlamaid na h-Alba

Official Report

PUBLIC AUDIT COMMITTEE

Wednesday 21 January 2015

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PUBLIC AUDIT COMMITTEE

2nd Meeting 2015, Session 4

CONVENER

*Paul Martin (Glasgow Provan) (Lab)

DEPUTY CONVENER

*Mary Scanlon (Highlands and Islands) (Con)

COMMITTEE MEMBERS

*Colin Beattie (Midlothian North and Musselburgh) (SNP)

*Nigel Don (Angus North and Mearns) (SNP)

*Colin Keir (Edinburgh Western) (SNP)

*Stuart McMillan (West Scotland) (SNP)

*Tavish Scott (Shetland Islands) (LD)

*Drew Smith (Glasgow) (Lab)

*David Torrance (Kirkcaldy) (SNP)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Sarah Davidson (Scottish Government)

Councillor Jenny Laing (Aberdeen City Council)

Alistair McKinnon (Scottish Enterprise)

Councillor David O'Neill (Convention of Scottish Local Authorities)

Councillor David Parker (Scottish Borders Council)

John Raine (NHS Borders)

Chief Superintendent Adrian Watson (Police Scotland)

Pat Watters (National Community Planning Group)

Susan Webb (NHS Grampian)

CLERK TO THE COMMITTEE

Jane Williams

LOCATION

The Mary Fairfax Somerville Room (CR2)

Scottish Parliament

Public Audit Committee

Wednesday 21 January 2015

[The Convener opened the meeting at 09:31]

Decision on Taking Business in Private

The Convener (Paul Martin): Good morning, ladies and gentlemen. I welcome members of the press and the public to the second meeting in 2015 of the Public Audit Committee and ask all those who are present to ensure that their mobile devices are switched off or set to flight mode so that they do not affect the committee's work.

Agenda item 1 is to decide whether to take agenda item 3 in private. Is that agreed?

Members *indicated agreement.*

Section 23 Report

“Community planning: Turning ambition into action”

09:32

The Convener: Agenda item 2 is evidence from two panels on the Auditor General for Scotland's report, “Community planning: Turning ambition into action”. The committee will hear first from individuals who are involved in community planning partnerships. I am delighted to welcome Councillor Jenny Laing, leader of Aberdeen City Council; Chief Superintendent Adrian Watson, local police commander, Aberdeen city division, Police Scotland; Susan Webb, interim director of public health, NHS Grampian; Councillor David Parker, leader of Scottish Borders Council; Alistair McKinnon, regional director for the south of Scotland, Scottish Enterprise; and John Raine, chair of NHS Borders. You are all most welcome.

I will ask the first question; my colleagues will follow on with theirs. In paragraph 24 of the report, the Auditor General states:

“CPP boards are not yet fulfilling their role effectively. Strategic leadership, oversight and challenge still tend to be happening at a level, or at levels, below the CPP board. Many boards are overseeing the community planning process but are not showing leadership”.

That is a pretty robust statement. Would any members of the panel care to respond to it?

John Raine (NHS Borders): I would like to give the committee a perspective from my position as chair of NHS Borders. I preface my remarks by saying that I can speak only on behalf of the Borders; I am not familiar with the way in which community planning partnerships do their business across the rest of Scotland.

I have read the report and I have read the *Official Report* of the committee's meeting on 3 December, and they made quite depressing reading, particularly the *Official Report* of the discussion that took place in December. The overriding message was one of failure to deliver. That is not the experience in the Borders, and we would be doing the Borders a disservice if we did not draw the committee's attention to some of the progress that has been made there.

We have been helped by the fact that we were the subject of a pilot study for the Accounts Commission 18 months ago. We volunteered to have our community planning partnership work reviewed and validated, and it was a bit of a mixed report. We were told that we were good in parts—there had been a long history of joint working—but that we needed to make a number of improvements. We needed to set out an ambitious

vision and to identify priorities for community planning that could make a difference. We also needed to make sure that our partners on the strategic board and across community planning fully understood their roles and responsibilities, and to clarify ways in which partnership decisions were reflected in the formal governance arrangements of the partner bodies. That was very good; it was salutary stuff, but it led to a programme of improvements. It was a good wake-up call for the Borders.

I perceive the response to have been proactive. The operational and governance structure of the partnership has been substantially developed. A fresh impetus has been brought to bear. We have a board that functions well, a joint delivery team of chief officers and others, and programme groups for the key themes of economy and low carbon, reducing inequalities and future service reform. We have agreed a vision and an approach to performance management, which is now being piloted.

I noted that, on 3 December, Douglas Sinclair spoke to the committee about “a fallow period” in relation to the long wait to see results from community planning. I think that the fallow period has come to an end in the Borders. I do not want to weary you today with a range of initiatives and things that are going on in the Borders, but we have a lot of projects and initiatives that are relevant to community planning: they contribute to the strategic objectives of community planning and can be monitored over time to determine whether they are delivering benefit. Things are moving in the Borders. I am sure that David Parker, the chair of the board, would want to endorse that.

The Convener: Councillor Laing, do you want to say anything specifically in response to paragraph 24 of the report?

Councillor Jenny Laing (Aberdeen City Council): Yes. From our perspective, part of it is fair comment. The Borders seems to have had quite a settled period, whereas we have had changes in personnel in various partnerships. For example, the leadership of the council—its chief executive—changed in the middle of last year. The chief officer and chair of NHS Grampian have also changed. We need to reflect on such changes because they have had an impact at board level.

I took over the chairmanship of the board in the middle of last year. Since then, I think that we have been making progress. The board is working hard to identify areas in which we need to take action. That is why we decided recently to have a refresh of our single outcome agreement, because we did not think that it was helping us to achieve the outcomes that we want to achieve; it was not focused enough on outcomes. We are doing a refresh of that at the moment, with a rewrite

planned along those lines. At the end of the day, we should be working towards delivery in communities. We feel that perhaps that has not been reflected in what has gone on.

Having said that, we have good partnership working and we have good examples, which I hope we will reflect on. I am optimistic about moving forward. We have a common goal in the community planning partnership in Aberdeen to achieve better outcomes for our communities. We will be working towards that.

Colin Beattie (Midlothian North and Musselburgh) (SNP): Mr Raine touched on the fact that Audit Scotland’s reports make fairly depressing reading. CPPs have been around for 10 years or more and the progress that has been made, according to the reports, has been fairly minimal; yet, it is vital that we get CPPs working in order to have effective outcomes locally. As far as I can see from the November 2014 report and the March 2013 report, the Auditor General is telling us that progress has been fairly minimal.

One of the key areas in which CPPs seem not to be working relates to how CPP partners are engaged and how they share resources—or, more correctly, do not share resources. I am interested to hear from the panel how effectively resources are being shared and whether it is practical for them to be shared. The Auditor General used the word “trust”. Does the trust exist among the partners to enable that sharing to be done effectively?

Chief Superintendent Adrian Watson (Police Scotland): I will give a practical example. As Jenny Laing touched on, we will try to cite a few positive experiences. I take on board and respect what you are saying about the strategic overview. It is a very challenging area for us all, and there is much more still to do.

Let me delve into the realms of community safety in Aberdeen city. The trust that you speak about and the support that is required across the partners to understand what the priorities are in ensuring safety in Aberdeen are clearly demonstrated in the example of the community safety hub. We have all provided support—both financially and in relation to up-front resources, through the community safety partnership—to deal with the agreed priorities of the communities across the city. We now have a living and breathing community safety hub that involves staff from right across the partnership working on a daily basis to address the strategic priorities of community safety work, which goes right back to community planning, and to deal with the issues that really matter to folk in Aberdeen day in, day out.

There has been some evaluation of the hub by the Scottish Government and other interested parties, and we seem to be heading in the right direction. There is commitment and a will among all the partners that are represented in community planning, and I think that we can build on that pilot both locally and nationally. We are starting to see tangible benefits, and the objective evaluation suggests that the crime rate is going down, although that is only one indicator. People are feeling that bit safer—there are other positives that I could go into.

I cite that example as an approach that follows on from community planning. I needed buy-in from the partners, and without the community planning vehicle in Aberdeen we would not be where we are.

Councillor David Parker (Scottish Borders Council): There are some good examples of resource sharing, depending on how you define that. I think that it is a bit of a red herring to talk about a pooled budget that the CPP controls. We should look at whether the community planning partnerships lead to better partnership working and whether there are positive examples of areas in which we are sharing staffing and financial resources, albeit that the individual organisations may hold the budgets because of accountability and other issues.

In the Borders, we have a joint community safety team that gets its staff and resources from all the different partner agencies. It was one of the first such teams in Scotland and has done extremely well. We have a joint dementia service, a joint mental health service and a joint adults with learning disabilities service. Under the Borders guarantee, 100 apprenticeship or training places are allocated to young people and children who are coming out of care. All the partners are contributing to that. There are many examples of good-quality joint working.

We have avoided some of the governance issues. One of the big issues with pooling budgets is the debates about who is accountable for what and the arguments about which governance model should be set up to monitor the money. That is all a red herring. Community partnerships should focus on making sure that we work in partnership to deliver services together. We are certainly doing that in the Scottish Borders, and I can cite many examples of key services or very local services that we are delivering in our region.

Colin Beattie: You are talking about sharing services and resources, but there is more to it as far as CPPs are concerned. They need to shift resources towards preventative activity—that is one of the key areas. Is that happening effectively?

09:45

John Raine: I am happy to respond to that. We do not have aligned or integrated budgets for community partnerships. As David Parker says, the issue is probably a bit of a red herring, because the community planning partnership is a voluntary enterprise that relies on leadership. Audit Scotland touched on leadership in its evidence. Leadership has gone wrong in certain parts of Scotland; there was a suggestion that in one area the community planning partnership was not functioning well because of the lack of a good relationship between the local authority and the health board.

I think that we have got leadership right in the Borders, helped by the work that we have had to do over the past 12 months or so to set up a shadow health and social care integration board as we move towards the creation of the real board from April 2015. That work has brought together the local authority and the national health service board and has led to a better understanding of the issues that both bodies face and of the respective roles of non-executive members of health boards and local authority elected members and their different accountabilities.

A community planning partnership will make progress on the basis of consensus and leadership without necessarily having to identify and allocate budgets to the partnership. We need to know what the partners are spending and how, over time, that expenditure can be aligned to the partnership's specific strategic objectives. However, because of the partners' different accountabilities and governance structures, it would be extremely difficult to have integrated or closely aligned budgets.

Colin Beattie: I am astonished to hear you say that, because the whole thrust of CPPs is so that we can align key budgets.

Tavish Scott (Shetland Islands) (LD): Exactly.

Colin Beattie: I was a little alarmed when you were talking about membership being voluntary. Perhaps you can expand on that, because that is not the way that I would read CPPs.

John Raine: The CPP is a non-statutory body. The Community Empowerment (Scotland) Bill will create a duty on partners to participate. I am not aware that there is a further duty to go down the route of integrated budgets as there is—

Colin Beattie: Do you regard joining a CPP as voluntary?

John Raine: No. As partners, we know that we need to be part of the CPP. However, it is about being part of the partnership because you want to be. We are aware that we need to be part of the CPP because we recognise that, as a health

board, we have an important part to play in its objectives.

Colin Beattie: But a key part of CPP—

The Convener: Can we please focus on the contents of the report? We can elaborate on some of the points around that. Please ask your final question.

Colin Beattie: A key point of CPPs is to align budgets, so that we are all heading in the same direction. Mr Raine seems to be indicating that that is not possible. I ask him to elaborate on that.

John Raine: It is possible and practical for the partners to be transparent about their budgets. When there is still the opportunity to make a difference to the allocation of money within budgets, influence can be brought to bear within the community planning partnership for budgets to be concentrated on priority areas.

You should bear in mind that we live in financially constrained times—we all know that—and local authorities, health boards and other partners have their own mainstream services to deliver. We have our health improvement, efficiency and governance, access and treatment—HEAT—targets to deliver, and our concentration has to be on delivering health improvement and efficiency and giving patients access to quality, safe treatment.

That is not to say that there is conflict between those targets and what the CPP seeks to do. The first of the targets under the HEAT regime concerns health improvement, which very much aligns to the CPP's work. What we spend on health improvement measures and addressing inequalities is very much aligned to what the community planning partnership wants to achieve.

Colin Beattie: How do you see the—

The Convener: Colin, I will bring you back in later. I call Mary Scanlon.

Mary Scanlon (Highlands and Islands) (Con): I was on the committee, along with several colleagues, when we got the 10-year report: the legislation on community planning was passed in 2003, so we had a report from the Auditor General in 2013. That report was disappointing. It showed that CPPs were

“not able to show that they have had a significant impact in delivering improved outcomes”,

that they were

“not ... clear ... about the key priorities for improvement”

and that “As a result”, there were

“no consequences for not participating fully.”

Naturally, as a member of the committee that has a duty to examine how the public pound is

spent, I was excited to see the 2014 update on the 2013 report card, which was poor. I was, however, a bit more than disappointed to read that

“There is little evidence that CPP boards are ... demonstrating ... leadership”

and that

“Many CPPs are still not clear about what they are expected to achieve”.

Moreover,

“CPPs do not yet know what a strategic approach to prevention will look like ... there is no coherent national framework”

and

“Scottish Government guidance is not clear enough about the specific role that CPPs should play”.

I say to Councillor Jenny Laing that I am aware of all the changes that have taken place in Aberdeen over the past year, but we have a 10-year report and a one-year update on the 10-year report, so we are considering not only what happened in the past year but the report card for 11 years. To be honest, it is not good.

In our previous evidence-taking session with the Auditor General, I said that I was frustrated by the lack of progress, but I am just as disappointed to hear from Councillor Laing about what the Aberdeen CPP will do going forward. There are plenty excuses. In December, I asked Douglas Sinclair whether the leadership needs to come from national Government and he said yes, so why is it not happening?

I am not concerned about people working in silos; I am concerned about the benefit to the service user and the NHS patient. They do not want to be buffeted around from one organisation to another. Why do we still struggle to get public services in Scotland to work together for the benefit of the public purse and public services? Why do we have such a disappointing report?

Councillor Laing: You are right that, as community planning started in 2003, what the report shows is disappointing. The difficulty is that we concentrate a lot on the financial aspect. The focus is on saying that if we had a joint budget everything would be okay. However, it is clear from the report that buy-in from the leadership of the various organisations, and not a pot of money sitting in the middle, will move the process forward. We have seen that from measures such as the early years collaborative, with which I have been involved, and which is a similar approach. We can all see the benefits of early intervention, but the problem is in getting commitment and buy-in from people to provide not only the finance but the capacity in staff and resources to push things forward. I have seen that from being an early years champion in Aberdeen. I have seen the

frustrations of staff on the ground who feel that perhaps they have not had support and buy-in from leadership. We all have to take responsibility for that.

I cannot speak for the Borders. The reason why you have representatives from the two CPPs here is that the Borders CPP is coterminous with the NHS board area and the Aberdeen one is not. Susan Webb will perhaps want to come in on that, because it has caused NHS Grampian difficulties that it has to try to service three different community planning partnerships and get involvement and buy-in of their staff.

Because we concentrate a lot on the financial aspects, we maybe do not sell ourselves enough when we talk about our good practice. Obviously, we have heard about our community safety hub. Although it sounds like we are dealing with antisocial behaviour issues, there is a lot of preventative work going on through the co-operation of staff who sit around the table from the council, the police and fire services, the NHS and social services. We pick up very early from those discussions families that are perhaps in difficulties, so we can work with them. There is a lot of preventative work in our community planning partnership and across the country, I am sure.

It is about the outcomes and how we measure them. To be honest, we are data rich. All the organisations collect lots of data, but we must join up and share data to ensure that we improve the outcomes for people. We have not done that very well in the past, which is why we are obviously looking to make improvements and why we have brought analysts from our various partnerships to sit round the table to try to ensure that things get better. We have work to do. I cannot speak for what happened before I was part of things, but the people who sit round the table in Aberdeen now have a commitment to making improvements and to improving outcomes for the people in our community.

There must also be community buy-in, which has maybe been lacking in what has happened before. We have tried to get more of that in Aberdeen. We have community partners in our fairer Aberdeen board, which used to be the fairer Scotland board. People from our most deprived communities sit around the table and decide where money will go to.

We are also keen to get involved in the participatory budget schemes that are on the go. Obviously, we have put forward people for training in relation to that.

We have made a commitment. Progress has probably not been quick enough for our communities, but we need to deal with where we are now and how we will move forward.

The integration agenda has helped our cohesion with our NHS partners. There is now a shadow board, but we had a transitional leadership group before that. We have appointed a joint accountable officer, who will help to bring together the two organisations. That will align budgets, which we spoke about earlier.

At the end of the day, we cannot carry on doing the same as we have done before, especially in healthcare, because of our ageing population. The budgets would be a third more than we expect them to be at the moment. Therefore, we have to consider the preventative aspect, and we need to do that when we get round the table.

The Convener: Does Susan Webb want to come in on points that have been raised?

Mary Scanlon: I am sorry, convener, but I mentioned five issues that the Auditor General raised in the summary of the 2013 report. I tried to keep things as brief as possible. We have to analyse matters and see how we will take them forward. Can you address those issues? Is national leadership needed? Do you know what is expected of you? There are many criticisms, so it would be helpful if you were to tell us how you are moving forward, or what you think of the report and what needs to be done.

Susan Webb (NHS Grampian): Would you like me to give an answer?

The Convener: I am sorry. I ask Councillor Laing to come back briefly on that point and to be as succinct as possible. I will then bring in Susan Webb.

Councillor Laing: I do not think that the national Government needs to come in, because the whole point of community planning is that it is about locality and finding solutions and outcomes for the people who live in communities, which will vary across Scotland. The leadership needs to come from within the community planning partnership.

I believe that we now have a clear vision in Aberdeen, and we are working towards that. However, we need to refresh our single outcome agreement because it is not indicative of the outcomes that we need. It is demand led rather than outcome led.

Mary Scanlon: You are supposed to tie in with national priorities, as well.

Councillor Laing: Yes. I accept that, but I thought that your point was about whether the leadership should come from the national level. I do not think that it should; it should be from the local level.

10:00

Susan Webb: I am new to community planning with Aberdeen City Council, as of this year. I have read all the audit reports and it was helpful for me to get an overview, not just of where we are doing well but of where we can improve.

The NHS is very committed to community planning. The integrated joint boards have helped us because our local managers and board managers are involved. The NHS board is able to pool across three community planning partners.

I agree with Councillor Laing about data. All three of our partners have pooled their intelligence resources to undertake the joint strategic needs assessments. We are pooling our resources for evidence reviews to ensure that we focus our resources on things that will make the biggest difference. We are committed to evaluation across the region so that we can learn from different approaches.

We have touched on budgets. Again, although we have not had universal shared budgets, we have a number of projects that have been put on the table for community planning partners, with communities, to agree the best means of disbursement. We are able to identify some clear outcomes as result of that investment.

There are challenges, however. Although I am aware of a number of examples of good practice, when you speak to individuals on the ground, they may not necessarily badge those examples as "community planning"; they see it just as people working together. As we move forward, we will be clear about our priorities and the actions that are being taken. We will then be able to demonstrate that those examples are the result of community planning as opposed to partners just working together.

Mary Scanlon: Paragraph 3 of the summary says:

"Many CPPs are still not clear about what they are expected to achieve".

That was two months ago. How can you measure outcomes and achievements when you do not know what you are expected to achieve?

Susan Webb: Each partner is very clear about what we have to achieve. The process that we have outlined in Aberdeen is about working through the multiplicity of approaches to agree on the key things that we will achieve more of if we work together as partners. I have only recently joined community planning but, moving forward, it is our intention to identify how we will measure so that, a year from now, if we are called back to the committee, we will be able to demonstrate the differences that we have been able to make.

The Convener: Before I bring in Chief Superintendent Watson, I ask Councillor Parker to comment briefly on the same question.

Councillor Parker: I am happy to do so. After the audit report in 2013, we sat down as a community planning partnership and said, "Okay, we have to deliver the SOA and other issues of that nature, but what is important to us locally?" We set key priorities that we intended to deliver locally and are concentrating on four of those. A lot of our work now is around delivering on those four priorities and ensuring that the partners are doing that. We are also developing a performance framework against which to measure the priorities. In September last year, we took a pilot of that framework to our community planning partnership.

Like Jenny Laing, we have decided to tackle the problem locally and to focus locally. If we are going to achieve change and make the CPP work, it has to be driven by local commitment.

I want to be clear. There are absolutely excellent examples out there of joint working that has come about as a result of the CPP. We have a number of joint services and a number of examples in which we are working with the partners very effectively to deliver.

The Convener: Will you make just a brief remark, chief superintendent?

Chief Superintendent Watson: I will be brief; what I have to say is on both points, I suppose. I have been round the block on community safety and community planning more times than I care to remember, and I share some of the frustration that has been expressed. There can be a rather subjective approach to leadership. People are bought in but are not round the table.

On whether more could be done at national level, I think that more could be done to promulgate best practice in the 32 local authorities. We are all receptive to sharing experience. We want to hear about what is working in the Borders, whether it can be transferred to Aberdeen and so on.

On Aberdeen, having been involved in community planning for about 10 years I can say that we are in a better place than we have ever been. We have a chief executive who, like me and others here, believes passionately in community planning, so we have a structure, but it is for leadership to breathe life into the structure so that there can be the scrutiny that is expected if we are to answer the questions that we have rightly been asked.

The proof of the pudding will be in the eating, but the early indications are that we have the structure. As Jenny Laing said, we are refreshing our single outcome agreement so that it is far

more focused and so that the qualitative correlates with the quantitative. We will work through that. However, there are still challenges out there—I accept the points that were made. It is important to stress that we see those challenges day in and day out.

Tavish Scott: Audit Scotland expressed concern about priorities. Will Jenny Laing and David Parker, as the chairs of the community planning partnerships in Aberdeen and the Borders, identify the main public sector challenge for their respective community planning partnerships?

Councillor Laing: In Aberdeen, the main challenge is probably finance, to be frank. We are the lowest-funded council, as you have heard us say on a number of occasions. NHS Grampian is in a similar position. We have competing priorities, which makes things difficult. However, that should make us work harder, because we need to ensure that the finances that we have go as far as possible.

If partnership working means that we can achieve more for the money that we have, that is the road that we should be going down. That is at the heart of what we are doing in the council, and in other public sector organisations and the voluntary sector. We have not talked about the voluntary sector this morning, given that the witnesses today are from public bodies, but the sector is important in Aberdeen and is a committed partner in our community planning partnership.

We need to work closely to ensure that we deliver for our communities and close the equality gap in Aberdeen, which has areas of great wealth and areas of great poverty. That is difficult and challenging for us.

Tavish Scott: I accept that that is your analysis of your biggest challenge. Is it therefore the community planning partnership's number 1 priority in Aberdeen? Do all the agencies come together to discuss how to tackle the problem that you have identified as being the most significant challenge that you face? In other words, is the community planning partnership the forum for taking action collectively on the issue?

Councillor Laing: Yes. The community planning partnership is where we have all the partners around the table. We have partnership working with the NHS on integration, but in that context we are working with one or two partners, whereas the community planning partnership has all partners round the table. That is where we can develop and produce the plans with which we will all work to make a difference in our communities.

Tavish Scott: I apologise to David Parker, who is waiting to come in. Jenny Laing said that

finance is the biggest problem that agencies in Aberdeen face, but the current national priority is to integrate health and social care. Which of those is number 1 for your community planning partnership?

Councillor Laing: They go hand in hand, to be frank. We have not mentioned the Aberdeen community health and care village, which is an example of how we have worked well with the NHS to produce a facility in the town centre that offers not just diagnostic but preventative services. People can come in and get health and social care advice, for example.

It is about being smarter with the resource that we have, whether we are talking about staff capacity or buildings—we can co-locate services and get economies of scale—and thinking about how we best use our budgets. In my opinion, that is about preventative spend and early intervention.

Tavish Scott: Does that mean that national policy on integrating health and social care is regularly on the agenda for your community planning partnership? Do you regularly discuss how integration is progressing?

Councillor Laing: Yes. We have that discussion at board level and at management group level. We had a meeting this week to look at the draft integration scheme on which we are currently consulting.

Tavish Scott: Given Audit Scotland's worries about this, do you find that the model is pushing partners very hard on whether they are delivering on something that is, after all, a key objective of Government?

Councillor Laing: Yes. I think that it has helped to provide cohesion and to bring us together as a partnership.

Tavish Scott: Thank you. What are David Parker's views?

Councillor Parker: My views are very similar. Every local government leader would tell you that the financial challenges and the financial climate are driving all our thinking. We concentrate heavily on them. Among my CPP's key priorities are reducing inequalities and trying to make spend preventative. We are doing a lot of work with the partners. We have done a huge audit to map out all the equalities issues that we have in the Borders, and all the services that we provide, and to try to target our resources at the families and communities with whom we are all working. That has involved a huge sharing of data and a huge amount of work.

Health and social care integration is a significant priority, but I would not say that it is a challenge. We have a very good relationship with NHS

Borders and with partners in social care and health. That is coming together very well.

The big issue is that change takes a very long time. In all the years that I have done this job, I have learned that change can take quite some time. The challenge of getting joined-up services and working together just takes a while to deliver on. It is about trying to keep pace with all the changes that we need to make to deal with the financial issues at the moment. That is as much of a challenge as anything.

Tavish Scott: Do you find that when the Government decides to introduce a policy such as integrating health and social care, that goes to the top of the list over local priorities? You might have decided in conjunction with your health board colleagues in the Borders that you are going to do X, Y or Z.

Councillor Parker: Absolutely. National policies from Government can mean that we have to shift resources. The integration of social care and healthcare is a great example of that. A significant amount of work has been done in that area. We have been waiting for the legislation to move on and we have been waiting for guidance to be given on different aspects of that. National policies can certainly impact on what we all do; there are only so many people and so many hours in the day. The NHS and housing associations still have their core services to deliver, plus all the local priorities that the community planning partnership might agree, as well as what the Government is seeking to deliver.

Tavish Scott: Are we asking you to do too many things?

Councillor Parker: I have always felt that we have an awful lot of legislation in this country, which comes along quite quickly. There are times when some breathing space in the agenda would be appreciated.

Tavish Scott: Thank you very much for that candour.

David Torrance (Kirkcaldy) (SNP): Good morning, everybody. How much engagement have community planning partnerships had with local communities and local stakeholders to ensure that they are delivering for local needs?

The Convener: Mr Raine, you indicated that you wanted to come in before David Torrance asked his question. Perhaps you can capture both points at the same time.

10:15

John Raine: Okay. First of all, I will revert to the earlier question, which was on the pressures that we are facing. Of course, in the NHS, it is funding;

in the Borders, it is also demographics. The fact that we have an older population, with higher demands on the health service, pushes us to look at redesigning services and using our money in better ways, and the benefit of community planning partnerships lies in how we can use resources, perhaps in relatively small ways, to better effect.

One small example of that, which is on the table at the moment and is likely to be funded by small amounts of money from health, the police and the council, is a project under the community planning partnership that is all about considering how we deal more cost effectively with problem families—those very few families who create a lot of demand on public services, not just health, but police, education, care, maternity services and so on. The aim of the project is to identify those particular families in conjunction with the police, and it is a case of stopping and considering what is going into supporting those families and finding out whether we can do it in a better way to reduce the impact on the public purse. We are simply trying to co-ordinate the amount of effort that is going in to improving the lives of those families. This tailored project, which will focus on one large family, will address overcrowded housing and all the social issues that we would expect in that environment. The amounts of money that all the partnership bodies need to contribute in order to provide a co-ordinated resource and social work co-ordination are relatively small but, personally, I think that it is money well spent.

That is a small example of our using our resources more effectively. Of course, it all depends on the outcome, and once the project is under way, it will have to be measured to see what it is delivering. It is a small imaginative scheme. It is not unique—it happens in one other area in Scotland and in England—but it is a way of bringing our collective strengths, skills, experience, professionalism and resource to bear on a particular circumstance. It is a small example of being more creative in how we spend our money.

The Convener: I brought you in on that point, but you also have the opportunity to respond to David Torrance's original question.

John Raine: David Parker will say more about community councils and area forums, but I should point out that area forums have been established across the Borders and I have given a commitment that the NHS will be part of them. Non-executive board members will attend the forum meetings to ensure that we have that dialogue.

In a way, communication starts at the top. We have recently initiated a process in which the NHS comes to the full council to make a presentation

on some of the issues that we face. Our medical director and I were in the council chamber just a few weeks ago, speaking to the whole council about our current issues and the need to redesign our clinical services. That is the engagement that we are having at that level. We have done that before, and it had the clear benefit of improving dialogue with the council—with its consent, of course, because it has a very busy and full agenda. That kind of communication from the top needs to be reflected down among the communities in the Borders, but you should not underestimate the difficulty of doing that.

The Convener: Thank you, Mr Raine. Councillor Parker and Councillor Laing, do you want to respond to David Torrance's question?

Councillor Parker: We have had engagement with some communities around the community planning partnership table. In some, such as Langlee in Galashiels or Burnfoot in Hawick, a significant amount of work is going on to tackle inequalities—that is one of the priorities—and the community planning partnership has been very active and is delivering joint work.

There has not been the degree of engagement with the wider Borders public that people might be seeking, but as far as the area forum network is concerned, we are currently developing a new approach in which we will have local community planning plans that will link to our community planning partnership. We are beginning to develop that, and it will be rolled out later in the year across the five area forum areas in the Scottish Borders.

Councillor Laing: We have various approaches. First of all, there was an initiative that was introduced by Aberdeen City Council to address our budgetary issues. For the past five years, we have had priority-based budgeting and we have undertaken a great deal of engagement not just with local communities but with key stakeholders to shape the budget. There are other things that we do that are based on that. Aberdeen city voice is a panel that we go to three times a year with questions on various community planning issues; we support the work of the civic forum, which is a member of the community planning partnership and which represents community councils and other community groups; and we also engage with regeneration matters, which is a group of community representatives from our regeneration areas. We want to continue to use and build on our various means of community engagement as we go forward.

Stuart McMillan (West Scotland) (SNP): My questions focus on the Audit Scotland report. However, as the witnesses will be aware, the Local Government and Regeneration Committee has undertaken a tremendous amount of work on

public services reform, and some of my questions also emanate from the report that it produced in June 2012.

Paragraph 25 of the Audit Scotland report says:

"Partners need to create a more effective leadership, challenge and scrutiny role in CPP boards ... Support is required for CPPs to develop the skills and culture that are needed to create effective challenge within CPP boards".

What support is required to assist with that recommendation?

The Convener: Are you directing that question to anyone in particular?

Stuart McMillan: It is to anyone on the panel.

The Convener: Does anyone want to respond?

Councillor Parker: I am happy to have a shot. Our community planning partnership works by our deciding on our priorities. Underneath that, different groups of officers across all the organisations deliver on those priorities and do the day-to-day work. They report back to the CPP board on the progress of the work that we have asked them to do; we monitor that progress, and the board challenges it when appropriate.

We have good working relationships. The partner organisations are clear about delivering the priorities that we have set and about what needs to be done, and good progress in that respect has been made, certainly since 2013. The board also asks questions about priorities and bits of work that are not going to timescale.

I do not recognise any difficulty with the boards scrutinising the CPP's work. They do that and are very interested in it, and we have been careful to develop a new performance framework with clear indicators of how we are delivering against our priorities. That is something that the board wanted to do.

Alistair McKinnon (Scottish Enterprise): I will elaborate on that a little.

Scottish Enterprise is involved in 27 of the community planning partnerships across lowland Scotland; 18 of our most senior staff are involved, and I personally am involved with four of them. It might sound strange, but I do not know that much about health and social care. It is just not my background. However, that liberates me and allows me to ask the community planning partnership boards the stupid questions and to bring a different perspective to the thinking that is being done around the table.

For example, a lot of the conversation in the Borders community planning partnership is about health and social care in relation to demographics and the increasing demand on public services. In that environment, I have found myself asking about the opportunities for the local community

and ageing population. What opportunities are there for businesses to provide services to the local community? What opportunities are there for the whole area from those people who are choosing to come or retire to the Borders?

Similar conversations are being held in Dumfries and Galloway. For example, members probably know that a new hospital is about to be built in Dumfries. The community planning partnership board has been involved in conversations about that, and the contract has been let to Laing O'Rourke, which is going to use a completely innovative construction method involving off-site construction. The knock-on effect is that the local construction industry has discovered that it does not have the appropriate skills to deal with that technology, so the board has had a conversation with the NHS, the council and Dumfries and Galloway College that has resulted in the college developing new courses in technician skills to allow people to take on employment in the construction project. That would not have come about if it had not been discussed with the community planning partnership; to be honest, it came out of the blue. An important aspect to community planning is the conversations that happen in the round, and people looking at things from a non-conventional angle.

Chief Superintendent Watson: Our experience in Aberdeen is very similar to that in the Borders. Particularly in the last year, I have seen a real step change in the leadership of the Aberdeen community planning partnership. That scrutiny is reflected in the minutes. There is an evidence base to show that we are turning the corner in many respects and that the partners are rising to the challenge, and a foundation is being built that will allow us to collaborate on reaching outcomes. There are local courses for all our leaders and potential leaders that engender trust, build on it and nurture it across the partners. For once, we are coming around the table and learning together about the strategic issues and the shared priorities that matter to local communities.

It is the strategic, tactical, middle-management level that has been quite interesting, because that is where we are starting to see the fruit of our labours as people come through. Trust has been built and although the transition is not seamless, folk are coming around the table and speaking as one. It is all part of the team Aberdeen ethos, which sits under the 2022 vision for the city.

A lot of that is just management speak, but we are starting to see some of this play into our work on single outcome agreements. Some very good initiatives are focusing on what is happening upstream and on playing out the Christie commission recommendations on preventative spend in relation to, for example, community

safety. We talk about the hub and the work that we are doing in Torry on domestic abuse, and all the partners are rallying to the cause. Two or three years back, I would not necessarily have seen that kind of enthusiasm and vigour. We are going in the right direction, and what will take us on that course is having the right people in community planning in Aberdeen and their being underpinned by training.

Stuart McMillan: An issue highlighted in the report is the better use of data. I accept that different organisations operate under different systems and that there might well be challenges as a result, but has there been any work on trying to make better use of the data that the organisations have? Have any technical solutions or software been considered in that respect?

Susan Webb: We have undertaken several actions. In the first place, we have a memorandum of understanding that allows us to share data. We are trying to take what we call a tiered intelligence approach, in which we not only make sure that our front-line staff have the information that they need to manage their services on a day-to-day basis, but reduce the amount of data that we look at to ensure that we focus on the indicators that will give us a sense of whether we are moving towards our strategic outcomes.

As for what we can do to facilitate data sharing, we are working with some national bodies on the matter, and we are currently in discussion about what we need to put in place to enable us to link data where appropriate. We are also working with our local university colleagues on safe havens to allow us to carry out surveillance and to link a number of big data sets across several partners. We also have some local examples, particularly in relation to the community safety agenda, where pulling data together has enabled us to shape some domestic violence projects to allow us to take more of a partnership approach. As we pool intelligence, we are getting a better insight into what we need to tackle.

John Raine: Data sharing is so important. The NHS and local authorities all hold data, and there is a lot of data sharing across the community planning partners.

We have a joint director of public health who works between the health board and the local authority. Public health has been working very closely with community planning partners on a local reducing inequalities strategy, and the partnership has been able to use data from a range of sources across the partners, as well as national and local surveys, to try to understand the characteristics of inequalities in the Borders as they relate to health and wellbeing and the partnership's other key strategic aims around economic growth, education and community

safety. A lot of data sharing has gone into the production or development of a reducing inequalities strategy.

The partnership or the joint delivery team needs to consider how all the shared data on inequalities can best be used to inform the delivery of services, working closely with local communities. That is a good example of data being used to produce a strategy, particularly on health inequalities. Having got the data, we need to move to the next step of delivering our objectives.

10:30

Chief Superintendent Watson: I will be brief, convener.

If we are to be informed, we need the data. I am no technocrat, but I have a chief executive in Aberdeen City Council who has far more knowledge than I do. She is very keen to extract all the data from all the organisations; she has the names of all the hardware and software, which I do not have; and she has an idea of where we need to get to.

The challenge and main frustration over the years has been that, although Police Scotland—and before that Grampian Police—has been keen to share data, the process is, in some respects, very sensitive. Other partners have come round and rallied to the cause, but there are one or two notable ones that still find it a challenge and there are cultural and leadership issues that we need to work through in certain areas.

We now have data sets that we did not have a few years ago. That helps to inform a strategic assessment, which gives us an objective view on our priorities for the city, but there is more that could be done around the edges to give us a richer picture.

Stuart McMillan: Earlier we touched on the issue of sharing best practice between the CPPs. Recently, the Convention of Scottish Local Authorities produced the benchmarking tool, which I warmly welcome; I know that it will help in the future. Would a similar tool be useful for the CPPs? Will the local authorities' utilisation of the benchmarking tool assist the CPPs?

Councillor Parker: The benchmarking data is very helpful and the work that has been done is useful. The sharing of best practice, whatever field one is in, is very welcome. Any advice that Audit Scotland—or anyone else—has to give us regarding best practice in CPPs across the country is very useful. Best practice is something that we all learn from and look to replicate. That would be very welcome.

Drew Smith (Glasgow) (Lab): Mary Scanlon referred to the report cards that we have had over

time. The latest report card continues to show that we are not making the progress in community planning that we would like to be making. Can the panel give us some insight into the examples of that lack of progress? Understandably, and I know the reasons why, people have given us the examples that show that it is not as bad as all that. We have been given good examples: Chief Superintendent Watson referred to the community hub and Mr McKinnon gave an interesting example of some of the innovative things that are being done. From your experience of being involved in community planning, what are the practical consequences—we probably understand those—and what are the factors that lead to us not being able to achieve things? Can you give us specific examples?

I cannot square the fact that we keep getting reports from the Auditor General saying that the boards are not performing as well as they should be and do not have a clear enough sense of what they should be doing, and, as Mary Scanlon said, that the overall report card is not improving fast enough, with the positive examples that the people in leadership positions on the community planning partnership are pointing to. Those examples undoubtedly exist, but so they should. Is anyone willing to share where it goes wrong?

Chief Superintendent Watson: I would like to give a general overview from my perspective over the years. The CPPs have to be daily business—they are not a bolt-on, although one or two people at strategic level see it that way. The priorities have to be reflected in the business plans of our respective organisations, day in, day out. That must be felt by staff, in a very positive sense, because that is what the organisations across the public sector, third sector and business sector in Scotland are about—encouraging and empowering. Currently, I am not sure that it is felt that way; rather it is seen as additional work.

The situation is getting better and in many respects we are maturing. However, we have not reached the stage at which community planning is reflected in all organisations. In my organisation, it is reflected through the Aberdeen city policing plan—it is tangible and it is there. People are striving, day in and day out, and, dare I say it, are being appraised on that. We have the city vision and the single outcome agreement and we set out where the bobby on the street in Aberdeen city fits in. Until people actually feel that, we will not achieve what you, and all of us, are looking for.

Councillor Parker: I agree. One big issue is genuinely having capacity in all the organisations to deliver everything that they have to do. We all have core functions to deliver, then there are Government priorities, then our priorities and all the strands of work that we are working on at any

one time. Capacity is an issue. Sometimes, progress is slower than we would like because we just do not have the capacity to do everything that is being asked of us across all the things that we deliver.

John Raine: I was struck by Douglas Sinclair's comment to the committee that we need to get out of the mindset that community planning is the Saturday job. Obviously, I do not see it as that and I do not think that that is the way that we operate in the Borders but, as David Parker says, we have many day-to-day pressures in delivering on our key targets for mainstream services. We will not change that overnight.

Until now, there has been an overreliance on the local authority. Certainly in my area, in health, we have tended to rely on the council, perhaps to an unfair extent, to provide the administrative structure and organisation and to keep the machinery going. I look hopefully to the Community Empowerment (Scotland) Bill to shift that axis somewhat, as it will give statutory authority to all the partners to contribute to community planning. Although the council will always have a pivotal role, we have to be careful that the other partners do not see community planning as solely the council's job.

Alistair McKinnon: I mentioned that Scottish Enterprise is involved in 27 community planning partnerships. When I talk to my colleagues about their experience in community planning partnerships, what pops out is that there is a common thread running through those partnerships where things are working well. That is not about the structures, the governance of the partnership, the SOA or the bureaucracy of community planning, of which there is quite a bit; the common thread is that the partners in those areas have reached a common understanding of a particular issue. We have to bear in mind that many of them come from completely different perspectives. When they reach a common understanding of an issue, they then coalesce around a series of actions on it.

As has been mentioned, that does not necessarily mean joint budgets or joint activities; it can involve aligned resources. That means that partner A does one bit and partner B does another bit, but it is all part of a greater whole in relation to the thing that is being done. There are many successes across Scotland, some of them big and some of them small. That is what my colleagues tell me.

Drew Smith: That is interesting, and I wonder whether the other panel members will reflect on it. The panel members are all in leadership positions in the delivery of our public services. Your communities will look to people such as you to be the key decision makers and to be ultimately

responsible and, to a greater or lesser extent, accountable for the decisions.

When people tell me that an elderly relative has been delayed in getting out of hospital or that they are having difficulty dealing with an issue of antisocial behaviour because the council tells them to speak to the police and the police tell them to speak to the housing provider, those are examples of a failure of community planning.

If I respond by saying that the problem is that there is no buy-in at the appropriate level of leadership in the public services, or no significant enthusiasm for collective working at strategic level, people will not be very satisfied with those answers. That goes back to Mary Scanlon's point that the process is not new. I understand that these things take time and that we will seek to get better over time but, after 10 years, is it good enough to say that the issue is about culture and whether the individuals in the room happen to get on or whether they have a similar and shared understanding of the challenges that they face in local communities?

Chief Superintendent Watson: You asked for the challenges and I gave you an example. That is my experience to an extent, although we have moved considerably over the 10 or 12 years. If I may throw this back, you gave the example of antisocial behaviour and the council telling people to speak to the police, who tell them to speak to the council. That was my experience in Aberdeen, and I dare say that the situation was replicated across the 32 local authorities. We worked in silos. However, you have given me the opportunity to speak about a living, breathing example of where community planning has worked in Aberdeen, which is the community safety hub. Employees of the council, the police, the third sector, the fire service and the health service sit round a table daily to play through all the community safety issues that folk have phoned in about or complained about in the past 24 hours, and to look into the future.

That is a tangible success of community planning that involves trust and commitment by the partners, mainly through resource rather than any financial outlay. The only financial outlay is on the computers and the place, which have been kindly given by Aberdeen City Council. That is modest, but we have had to come round the table. The approach has been nurtured through community planning down through community safety, and governance has been given. We have made significant improvements, not just in the figures but in the quality of feedback on safety across the city. That should make us all rather enthused and proud of what we have.

A slight frustration for me is about finding out how things have played out nationally. How can

we share our experience and look elsewhere to take other living, breathing positive experiences up to Aberdeen? There is a dearth of success stories in the landscape. Many things are happening, but we are perhaps not sharing them. Naturally, in the north-east, we are quite reticent in sharing our positive experiences, but there is much happening in Aberdeen that we are very proud of.

It is not a bleak picture, therefore. I gave a generalisation. At times, there is still a feeling that community planning is an add-on to the day job. I was trying to signpost the fact that, if we are serious about it—we all are—we need to come round the table and see it as daily business. I am passionate about community planning and Aberdeen city certainly is. The individual organisations' business plans need to set it out that we are as one. What are the priorities? The SOA is the priority for Police Scotland in Aberdeen city. We need to ensure that the 2022 vision plays through right down to the bobby on the street, so that they understand what they are doing in terms of the collective effort to make the place a bit safer.

10:45

Nigel Don (Angus North and Mearns) (SNP): I was a bit concerned when we started that the session was going to be very defensive, so I am grateful that, in many ways, it has not been. From my notes, I could write a pretty good résumé of what you need to do to get the planning partnerships to work well, so that is on the record.

However, I will carry on from Drew Smith's questions. I do not want to put words into people's mouths, but it was nearly said that there is a duty to be part of community planning but no duty to do anything. The counter to that has been about passionate leadership and recognising that the approach must not be an add-on to the day job, which I think is absolutely fair.

I wonder whether you could reflect on the structural position that you are in. People move on and changes happen, and although we hope that not-so-good leaders will leave, we also recognise that good leaders may move on. Your structural position cannot be based around the people with whom you are working currently, because in a couple of years' time some of them will have gone. It cannot be based on agreements drawn up on the back of a fag packet that say, "You and I agree that we're going to do this and that."

The structure has to be in place, and I would like to go right back to absolute basics. As I understand it, you have a facility to work and a desire to work, and you are asked to work together, but if, at the end of the day, a council leader or an NHS leader or a local police chief

wants to get in the way, there is nothing to force them to co-operate. First, is my analysis correct? If I am right, is there anything that we should be doing in the Parliament to ensure that those things get better and become embedded, and are not stopped by individual people not playing ball?

Councillor Laing: From what we have heard round the table today, your analysis is correct. That has been a stumbling block in the past. As Adrian Watson said, it is about ownership within the different partner organisations, and it is a matter of embedding that in our own strategic plans. That is where we will see the continuity, no matter who is in the leadership role. If it is embedded in the plan as we move forward, I would expect it to be fulfilled by whoever comes into that role.

The other problem that we have is around the data and whether we gather the information. We live in an immediate world and we want to see results right away. People want to see that the actions that we are taking are having an effect, and we are always under pressure to satisfy them about how we are spending money and whether it is making a difference to people's lives. We need that buy-in from people, because a lot of preventative spend will take some years to filter through before we see the full benefits. We need to have faith and that needs to be embedded in people's long-term strategic plans if we are to continue on that journey and not just say, "Well, we haven't got the results after a year, so we're going to stop."

We have seen that with some of the pilot funding, because it has been spent on a yearly basis and the results at the end of the pilot may not substantiate continuing. If that happens, it is difficult for the partners to agree to mainstream the finance in order to continue. We need to have faith, but people out there must also have a bit of patience, so that we can demonstrate that the changes that we have made have had a positive impact on communities.

The Convener: Could you elaborate on that point slightly? The question focused on personalities and on the processes working because of the people involved. Can you focus on the question that Nigel Don asked, which was whether the process continues if the personalities move on?

Councillor Laing: If it is embedded properly in the strategic plans and it feeds in from community planning to the plans of the individual partnership organisations, it should continue, because people should continue with those long-term plans. We have seen that happen in the council. I mentioned our priority-based budgeting. We have seen a change in the political complexion of the council,

but that budgeting process continues because there was buy-in for it at an early stage.

In our community planning partnership, we have people of all political persuasions sitting round the table; that helps us as we go forward, because we are the ones who change most as we are elected from year to year. If something is within the organisations' strategic plans, there is a better chance of it continuing even though the personalities may change.

Nigel Don: Yes, there is a better chance. I take your point and I thank you for your answer, but I do not want to see a better chance. Our job as MSPs is to set up a structure that will work.

Councillor Laing: I accept that. However, what I am saying is that we carry out programmes and have preventative spend, and that we then have to look at the outcomes and decide whether those programmes have achieved what we wanted them to achieve. When we do that, perhaps we will think that different decisions might have given us better outcomes. People will always need the flexibility—

Nigel Don: Forgive me for interrupting you. I entirely recognise that you will do your level best and sometimes that will not work, but that is not what worries me. What concerns me is that, at the parliamentary level, we should set up structures in national legislation whose effectiveness will not be significantly determined by the individual who is in place, whether that is a council leader, an NHS chief executive or whatever.

I repeat my basic thesis. Currently, there is a duty to be involved, but there is not a duty to do anything. Should we change the legislation? Do not ask me about the words—I do not quite know what we should do—but should we set up a structure in legislation that would require organisations to achieve something?

Councillor Parker: Our experience in the Scottish Borders is that we have never had any difficulty in bringing the partners around the table, and we have never had any deliberate obstruction or anybody saying, "I don't want to play" or "I don't want to do this." Organisations may have taken longer to do a piece of work than we would have liked, as a result of capacity issues, but we have never had any difficulty in bringing together the partnership and having a good relationship.

We have always had quite a lot of self-evaluation built in, so we were keen to be a pathfinder authority and to be audited for the 2013 report. We regularly evaluate ourselves, and we are currently doing an evaluation. We are asking ourselves whether the current structure is working, whether the current leadership is right, and whether we should change anything. That evaluation will come back to our partnership later this year, and we will probably make changes.

We have always had very good engagement around the table, and I have never come across obstruction at all from any of the partners. We have also had a very stable environment in the Scottish Borders. Fortunately, for whatever reason, we have not had the political changes that some authorities have gone through. I have been the leader of the council for 12 years. We have had a stable environment in that period and there has been a stable environment in our partners. The collaboration, coming together and working together have worked very well. I have never found that a partner has said, "I don't want to be here."

John Raine: A very good point has been made. It is about future proofing the performance of community planning partnerships. Although David Parker and I will tell members how good things are in the Borders and that that relies on leadership and others in the partnership board who sit round the table, we will not be there for ever and a day. Perhaps we have to look at better scrutiny arrangements.

In health, we are held to account annually through our local delivery plan. There is now a section that requires us to report on our performance and our contribution to community planning. Members may not see that as sufficient scrutiny or accountability. Because of the nature of community planning partnerships, which are local and should be allowed to determine their own local priorities, maybe that scrutiny would best come from the locality. If other people from the community whose role is very much to hold to account and scrutinise sit around the table, that might be one way of doing things. Another way might be through scrutiny committees in local government. Perhaps there is scope to think of imaginative ways in which community planning delivery and those who deliver can be held to account for achieving what they set out to achieve.

Nigel Don: As far as I am concerned, the questioning stops there. I simply observe that two areas are clearly able to defend what they are doing, for better or worse, but I suspect that the Auditor General's report implies that there are other areas where that is not so good. However, I can hardly expect those who are here to defend others who are not here.

Colin Keir (Edinburgh Western) (SNP): Some of my questions have been answered, but a few things still sit with me.

The recommendations on page 6 of the report say that CPPs should

"strengthen the effectiveness of the leadership, challenge and scrutiny role at CPP board level".

Some of that issue has been dealt with, but the report also says that CPPs should streamline the

local working arrangements that come in underneath.

That reminds me of a problem that I came across in my time as a councillor in Edinburgh. Underneath the CPP, we set up a neighbourhood partnership system that operated in various areas. I remember that, at least initially—my knowledge of this is now about five years old—we had difficulty with getting partners clued up about how to take part in the management of the partnerships. It seemed that, although an awful lot of people sat around talking about what they were doing, only a limited amount of integrated partnership work was actually happening on the ground. There have been a number of difficulties. I am not just talking about the community partnerships' problems, but about the overall problems of integrated working in comparison with working within silos.

There has been one question in the back of my mind: we all know that there is a community planning partnership board, but do the people who work underneath the board level, at council and local partner level, actually understand what the CPP is? I am talking about people who do not sit on the board—people who are area officers or who have a particular interest.

Councillor Parker: I can identify with some of what you say. In the early days, when we had an independent chair, our structures were quite cumbersome. We created a structural bureaucracy that some people had difficulty with.

As I said in a previous answer, we are keen to review what we do and to self-evaluate our work. We recently changed our structure to streamline it and make it more effective, to reduce the number of meetings that people have to attend and to pull in people with the capacity to do the work that we are asking them to do. Our current structure is very different from the one that we set out with; it is certainly much more streamlined. Council officer colleagues and those in the partner agencies that are involved are now absolutely aware of what the board does, and they know what the different groups that deliver the day-to-day work do. Our current structure is a very good one, although I accept that we possibly did not get it right in the beginning.

Chief Superintendent Watson: That basically reflects our position in Aberdeen: we are far leaner and, dare I say it, a bit more agile now with the structure that we are building on. The question is whether all our staff across the respective organisations need to know the finer detail of everything that is being achieved or worked on by the CPP.

I go back to my organisation's experience, which the fire service and the council are going

through as well. It is a matter of having an understanding of collective responsibility around Aberdeen City Council's 2022 vision and how that plays through the single outcome agreement. The important thing is to make that real for staff so they can see how it fits with their day-to-day priorities and their expectations in delivering a service for the public, whatever organisation they happen to be in.

Colin Keir: I am really looking for the NHS angle here. The NHS was one of the more problematic areas initially when it came to getting involved in local partnerships and creating an understanding. The attitude was that certain areas were NHS work and that was what the NHS did—there were very few grey areas.

Susan Webb: As I said earlier, sometimes staff on the ground very much work in partnership, because they believe that that will deliver better services for their patients or clients. However, they perhaps do not associate that with community planning and its structures.

From an NHS perspective, as we move forward with health and social care integration and integrated joint boards, we will need to be very clear about the role of the integrated joint board in community planning, so that staff become aware of the contribution of the board and of the wider partnership. It will take a bit of time to raise awareness among staff of that change.

The Convener: Could we drill down to levels of awareness? Would nurses in your organisation know who is the chair of the community planning partnership? Would they receive minutes from the community planning partnership? Would they receive its objectives and strategic aims? What information would they receive?

11:00

Susan Webb: I suppose that it would depend on where in the organisation the nurses worked. If they were based in Aberdeen city, they would not necessarily be aware of the whole community planning structure, but they might be aware of some of the programmes that the community planning partnership is involved with. As we discussed earlier, we need to link our activities through the community planning partnership and badge them so that people know how to engage and what the structures are. We have further work to do on that, but I do not think that that means that people are not participating in activities; it is just that they might not recognise them as community planning activities.

Colin Keir: I accept that a nurse, who is right at the front end, is not likely to know what the CPP is, but I would expect anyone who is involved in determining the strategic direction of a partner

organisation at least to have an idea of how the CPP came about, why it was set up and why, rather than being an addition to the existing bureaucracy, it should be part of that bureaucracy. There should be real partnership working.

My concern comes through in the background to much of what the Auditor General said. If we were to ask people on the street what a CPP is, we would find that nobody knows. I am absolutely certain of that, because when I have asked people whether they know what a CPP is, they say that they do not—they say, “That’s the council”, “That’s the NHS”, or “That’s the police”. In fact, the partnership with the police has been one of the biggest successes in Edinburgh—I think that it has been great.

The difficulty arises when we get to the level below the director or management stratum. The people who are supposed to implement the work of the CPPs do not know why they are implementing it or at what point it comes through into the system. That is the difficulty that Nigel Don picked up on. The structure of service provision development in an area needs to be clearer in every partnership organisation so that people understand that they are not on their own but are acting in a particular way for a specific reason. I think that that is why people say, “We can’t do that, because we have always done it this way.” We have all heard that.

How do you explain to your organisations why you are taking part in the CPP? How do you get across to people that CPPs, rather than being an addition to the bureaucracy, are a way of bodies working together in partnership and merging responsibilities? How do you explain CPPs’ purpose to people in middle management so that they know to what end they are managing?

John Raine: There is a challenge in there for all of us. If I were to ask staff in middle management what the community planning partnership was about, I would probably be met with a blank stare. Many of our staff know about joint working and working in partnership because that is what they do, but they are probably not so aware of the strategic approach that the CPP is trying to grapple with.

There is also an issue to do with how we might better link the work of the partnership to our work in health, and to our governance and management structures. We do little more than provide minutes of community planning partnership meetings—that is a weakness at my end—when we should be providing much more explanatory information to encourage staff to put forward ideas and so on. There is quite a job to be done in selling the role and achievements of community planning partnerships. The *Official Report* of the discussion that the committee had in December gave the

impression that next to nothing is happening, but we know that progress is being made in the Borders.

We are probably deficient in our promotion of the concept of community planning and of the benefits that will accrue to people in the Scottish Borders if we get it right. We need to do more, both internally and externally, to talk up and talk about the work of community planning.

The Convener: I will take Chief Superintendent Watson briefly and then move on the next question.

Chief Superintendent Watson: I promise that I will be brief, convener.

I will give the Police Scotland perspective. I have said that, in Aberdeen city, the work of the CPP filters down into our day job through the single outcome agreement. It also plays through in staff appraisals. We are perhaps seen as being fairly hierarchical, but I try to be as organic as I can be with my resource in the city. There is a good fit there.

At staff meetings with the inspectors and the chief inspectors—the middle management level—we encourage people to talk about what the CPP actually means for them. They do not need to know every word of every minute of the community planning partnership board, but they need to know that there are community planning services in the city, that there is a single outcome agreement and that there are priorities—the things that matter. We encourage them to think about where we can play a part, not only in terms of community safety, but in the other five thematic groups.

My staff at middle management level have a reasonable enough understanding of that. It plays through into their staff appraisals, and they have to feel positive about what their contribution will be through the partnerships. The objectives in their staff appraisals will reflect the community safety partnership’s objectives, which in turn will reflect the community planning objectives. That ought to play through to the teams as well. We knowledge check, if you will allow the phrase, right down to the constable level by asking, “Where do you fit in in all of this?”

I am reasonably comfortable that we triangulate as much as can, although it is still work in progress. We are certainly going in the right direction.

Mary Scanlon: I want to put this into context. The committee’s role is to scrutinise value for money and effective spend, but I do not think that word “money” has been mentioned this morning. I heard on the radio this morning that another parliamentary committee is looking at Creative

Scotland and Scottish Enterprise, which allegedly do not work together, to the detriment of our film industry. The Christie commission, which we all signed up to, was about working together. We have been forced to bring in legislation on health and social care integration in order to make people in those areas work together.

In my time on the committee, almost every report—well, maybe not every report from the Auditor General, but a high percentage of them—is about people not working together or not sharing data. We are a country of 5.25 million people, and the Scottish Parliament has been reconvened for 16 years, so why is it that we still have to sit here for three hours asking why our public services cannot talk to one other? What is that about? I just do not understand it. Can someone explain it to me? I know that you have very good plans going forward, but, to be fair, we heard that there were very good plans going forward after the 10-year report card. I just do not understand it. I have been an MSP for 16 years, and the issue has been brought up in almost every committee that I have been on, including the Health and Sport Committee, which was the committee that considered the Public Bodies (Joint Working) (Scotland) Bill. Why do people in public services in Scotland not talk to one another? Why are we wasting three hours today asking you why you cannot work together?

The Convener: Can I ask one member of the panel to answer that? We have other questions, and we must conclude.

John Raine: If that is the impression that we have conveyed—that the parties cannot work together—we have failed this morning. I had hoped that we were getting across the message that we are the living proof of joint working—of working together—that we are good at data sharing, and that data sharing is producing some good outcomes. I am somewhat disappointed to hear that that is the impression that we might have conveyed. I cannot speak for any part of Scotland other than the Borders, but I hoped to give you the message that we speak to one another. David Parker and I even travelled up together. There is a strong measure of co-operation across all the partners on our board.

Councillor Parker: Scottish Borders Council has not submitted written evidence to the committee but I will definitely submit written evidence after the meeting on behalf of the partnership, particularly on the issue of joint working, because there is a story to tell that we are obviously not conveying. There is a significant amount of joint working and work with partner organisations going on.

Stuart McMillan: Councillor Parker touched on the previous format of a CPP with an independent

chair. Do panel members think that, as well as placing CPPs on a statutory footing, as per the Community Empowerment (Scotland) Bill, having an independent chair would make CPPs more effective?

Councillor Parker: We went for an independent chair in the Scottish Borders in the early days. We did that because there was quite a lot of turmoil and change going on in some of the partner organisations. I would not say that people in the council were at odds, but we were campaigning to keep certain services and some quite complex arguments were going on. For example, at the time, I was fighting to save the university, and had to go to community planning partnership meetings with university representatives and try to be nice to them. In the early days, there were political reasons why we felt that an independent chair was a good idea. It worked okay, but we concluded that it did not add significant value, and the independent chair found the situation quite frustrating, too. That is why we moved to a new arrangement, which is that the CPP is a formal committee of the council, and I chair it.

We are going through an evaluation of that arrangement and we will see where we get to with that. Although things are working better now than they were, I imagine that, as a result of our review, the chairmanship will be rotated or some other arrangement will be put in place so that the council does not chair the CPP all the time. I am very relaxed about that—I would welcome it.

Colin Beattie: I have some very quick questions. First, I have heard people make some quite positive statements about the sharing of resources, services and so on in individual cases. Would that have happened anyway or did the existence of the CPP act as a facilitator?

Councillor Parker: I would say that it is a bit of both. Some of it may have happened anyway but, because of the CPP, the pace has increased, certainly in the Borders. Because we are doing it so frequently now, when people look at designing new services they think about where the partners can add value. At the moment, Mr Raine is looking at a new children's service at the Borders general hospital. I know, from early discussions in the council, that our partners will be heavily involved in issues such as having a co-located facility, and that joint funding will go into the service from the partners.

Colin Beattie: Page 5 of the Auditor General's report says:

"The current pace and scale of activity is ... unlikely to deliver the radical change in the design and delivery of public services called for by the Christie Commission."

Does the panel have a view on that?

Councillor Laing: It is difficult. I hope that the positive moves that we are making mean that we will be able to pick up the pace and deliver. However, as I said, we will have to wait and see what the outcomes are, and we will have to be judged on them.

Chief Superintendent Watson: I echo Jenny Laing's sentiment. I am pretty bullish about the current structure and, to be slightly subjective, I think that we will make significant progress in Aberdeen, given the people who are round the table.

To go back to the element that Mr Don picked up, people move on, and this is about achieving sustainability, which needs to be driven through the respective organisations' business plans. Everybody needs to understand that this is the legitimate way of going about our business in Aberdeen, the Borders and the other 30 local authorities in the country. It should be right up there as the day job.

The Convener: I thank panel members for their time this morning. There is one follow-up piece of correspondence, because Councillor Parker has kindly agreed to send us examples of good practice.

11:14

Meeting suspended.

11:20

On resuming—

The Convener: We welcome our second panel of witnesses: Sarah Davidson, director general of communities at the Scottish Government; Councillor David O'Neill, president of COSLA; and Pat Watters, chair of the national community planning group. I understand that Sarah Davidson and Pat Watters would like to make brief opening statements. We will start with Pat Watters.

Pat Watters (National Community Planning Group): The national community planning group welcomes the report. Unlike some of the witnesses I have heard at the committee today, we do not think that it is an entirely negative report. It is a good report with a lot of positive aspects.

The reason why there is scrutiny of community planning is because community planning itself tried to insist on, and worked with Audit Scotland to reach, a position in which we could evaluate what organisations are doing on the ground. It is not that community planning, neither under the 32 groups nor on the national stage, wants to hide what we are doing. We welcome the opportunity for scrutiny. I remind the committee that scrutiny is

about trying to help and assist improvement. It is not just about criticism.

Sarah Davidson (Scottish Government): I, too, start by welcoming the report. As Pat Watters has just said, the auditing of partnership activity in this way is something of an innovation, and I am grateful to the Auditor General and the Accounts Commission for working together in a way that is designed to support improvement in community planning.

I also want to be clear at the outset that the Scottish Government welcomes and accepts all the findings and recommendations of the report. I was personally involved in that area a few years ago, and coming back to it again I recognise the renewed sense of energy and more active participation that the report describes. It is good to see what the Auditor General described as the "beacons of good practice" being recognised. However, we also recognise that there is a long way to go before community planning fulfils all the potential that those who signed up to the statement of ambition believe that it has.

I welcome the fact that the recommendations have been pitched as constructive aids to improvement. The Scottish Government, COSLA and the Society of Local Authority Chief Executives and Senior Managers, working with the national group, have already started to act on all the recommendations in the report. I will be happy to talk more about that.

The Convener: You will have heard some of the frustration about the timescales involved in making improvements. Legislation has been in place since 2003 and we are still talking about how to make improvements and take community planning forward. Are there any timescales in place in relation to implementing some of the changes that have been recommended in the report?

Pat Watters: I accept that the legislation has been in place since 2003. There were hints earlier about how it was approached by the public service at the time. Although the legislation was in place, the only partner with legal responsibility was local government, and others could dip in if and when they wanted. The Government recognised that, which is why new legislation has been proposed.

The renewal of the statement of ambition has made a sea change in the way in which we look at community planning and take it forward. Having the whole of the public sector signed up to that statement of ambition—which is not an end in itself—has renewed how we take forward community planning and inject it with energy at local level to ensure that we are adding value and changing the outcomes for local people.

The Convener: We have been here before, though. There have probably been many committee meetings similar to this one in which people have said, “Yeah, we can do this, we can take it forward”. Is it beyond repair? Can we do something with community planning? What is different now from what has been proposed in the past?

Pat Watters: The commitment and buy-in from the public sector to deliver is what has changed. At the last meeting of the national group, I asked officers to look at how we reshape the statement of ambition to drive it forward even further so that we can go back out to community planning and say how we want to take it forward.

There is much good practice on the ground now at local community level because of community planning and partnership working that would not have happened if community planning had not been there. Yes, it took a long time to get off the ground. Is there still work to be done? Yes, there is still work to be done. Can we improve? Yes, we can improve. But do not tell me that that work would have happened if community planning had not been there—it would not.

The Convener: Finally, before I bring in my colleagues, can you give me three examples of the good work that is happening now as a result of community planning?

Pat Watters: I will go to somewhere that is very close to your heart, convener, and look at how Glasgow is tackling community planning in a basic but practical way and making improvements in delivery.

Glasgow Housing Association has been working with the police and fire services, the city council and voluntary organisations and, in the past three and a half years, there has been one fire death in the city’s housing stock. The housing association believes that, in the first two years of partnership working, it saved £22 million as a result of not having to decant tenants or refurbish properties because of fires. That work was about prevention and early intervention—practical ways of working together within the public sector to ensure that we are not only delivering a change but improving people’s lives.

During those first two years, the Scottish Fire and Rescue Service reckons that we would have seen seven deaths a year in Glasgow, so 14 deaths have been prevented as a result of partnership working, not to mention the financial benefits to the housing association and the health and public authorities. Those are practical examples of that work.

Last week, I was in East Renfrewshire for a meeting with the council. When I walked through the door of the partnership office, I could not tell—

and neither could the public—whether the member of staff who dealt with me was council staff or NHS staff. That would not have happened if we had not had partnership working.

There are many examples. West Lothian and how its partnership has developed over the years is a shining example of how we can learn from each other and take areas forward. There are many examples that we can cite that show that we are delivering and making a difference to people’s lives within local communities.

Sarah Davidson: If it would be helpful, I can add some more examples to that. It was interesting to hear what Councillor Parker said earlier about the CPP setting the context locally for good partnership working. In other words, the working does not have to take place at only the community partnership level; it can set the local context, too.

I used to sit as a non-executive member on Dumfries and Galloway and Edinburgh CPPs. I saw practical examples of the type of joining up that we heard about earlier, when issues that had previously not been well understood by all the partners were discussed at the table, enabling the partner organisations to bring their own resources to bear in addressing them. I heard that happen in relation to demographics and to preparing young people in the area with skills to meet the challenges of the area.

In Edinburgh, good working was done at the local level where some people were not necessarily confident that they had support from their collective leadership for what they were doing. The community planning partnership was a place where that support could be made explicit and where the senior leaders could think about ways in which they could make sure that people who were delivering in the neighbourhood partnerships had all the back-up and support that they needed.

Colin Beattie: The previous panel highlighted a number of areas that showed good practice in the sharing of resources and services and so on. When I asked them whether that would have happened in any case, regardless of whether there was a CPP, the answer was a bit of both. What is your comment on that?

Pat Watters: It could possibly have happened. In areas where there is a real willingness to work together, that work would have happened anyway, but there are areas where it would not have happened. The push for better partnership working has been there for a long time, but the buy-in to get all the parties involved in it has not been. The community planning partnerships, particularly in the past two years, have seen a vast improvement. I accept that some things might

have happened, but the majority would not because, prior to CPPs, people were still very much in their silos.

11:30

Sarah Davidson: What is significant about the community planning partnership is that it is the one place that brings together formally all of the strategic leaders who are responsible for services in an area, and that it does so along with the third sector and, in many places, local business. Whatever partnership working is happening between two or three other organisations, there is one place where decisions are taken about the strategic priorities for the whole area and about the alignment of resources. It would not surprise me if there was a correlation between places where there is good partnership working happening anyway and really good, effective leadership around that shared table. It probably always has to be a bit of both, as we heard earlier.

Colin Beattie: Taking that a step further, one of the key areas where CPPs can make an impact is the alignment of budgets and the shifting of resources into more preventative activity, but the indications are that that is not really happening. CPPs obviously do not have a budget or direct control of anybody's budget, but I would have thought that they would have a role in influencing the alignment of budgets towards the outcomes that everybody wants—and that is not happening.

Councillor David O'Neill (Convention of Scottish Local Authorities): I am not sure that that is the case. Public agencies are now required to share their budget information with one another, so the local authority will share with the health board and the health board will share with others. That means that we are all aware and it gives us a better opportunity to align what we are actually doing.

Going back a wee bit, it would be fair to say that anyone who was involved with community planning at the beginning, all those years ago, would find it very different if they were to come into it today. It is a vastly different beast and it has changed dramatically since the start. When community planning was initially established, there was not really an understanding of what it was. Some folk thought that it was a geographic community and others that it was a community of service delivery organisations. In actual fact, it is a bit of both and much more, and that is now recognised. It is now about delivering for our communities.

In the past two or three years, we have seen community planning take on a new role and get a bit of pace. I am conscious that I might get invited back here next year and pulled up for saying this,

but I am confident that we will start to see the pace of change increase.

Colin Beattie: I welcome the optimism, but I am looking at the Auditor General's reports of November 2014 and March 2013 and they both tell a fairly negative story. There seem to be a lot of concerns, and one of the key areas of concern is about the fact that the shifting of resources is not taking place. Let us face it: everything follows money these days.

Councillor O'Neill: We did not ask the Auditor General to write a report that we would like, but to look at the situation and tell us what the auditors saw. That informs us and helps the decision-making process, and it allows us to take the right decisions and to move forward.

The report is a fair report—it has good bits in it as well. Quite a few people sitting round the table today have been picking out parts of the report. I do not want to do an awful lot of that, but I will quote from the report's key messages, where it states:

"Since the publication of the Statement of Ambition, there is a strong sense of renewed energy nationally and locally to improving community planning. Community planning continues to become more of a shared enterprise, with more active participation by partners and evidence of more shared ownership of the priorities in Single Outcome Agreements".

As the report goes on, it highlights many other positive aspects. I fully accept that there are negative aspects as well, but we asked for a report that was warts and all and that is what we got.

Colin Beattie: If we look at the Auditor General's report again, we see that it states:

"The current pace and scale of activity ... is unlikely to deliver the radical change ... called for by the Christie Commission."

Councillor O'Neill: That is a strong message from the Auditor General that we need to up the pace of change. That is accepted.

Colin Beattie: We have had 10 years. How many more years before CPPs are fully effective?

Councillor O'Neill: CPPs will continue to evolve. It is not something that will ever be fixed; it will never be a case of job done.

I want to pose a question: if it is not going to be community planning, what will it be? Will it be a wholesale reorganisation of public services in the near future? I do not think so. Let us make community planning work.

Colin Beattie: The very basic function that the CPP should be carrying out is encouraging—and, we hope, guiding and agreeing—the shifting of resources towards preventative activity and aligned budgets. That is not happening.

Pat Watters: When we first envisaged community planning, we were looking for everyone to put their budget on the table and to discuss what the priorities were and how we would allocate that budget to those priorities. That is not practical and cannot be done. Health still has to deliver health in Scotland and its budget is probably dictated by that. Local authorities still have to deliver education and they have budgets dedicated to that.

What community planning has done is to get jointly agreed priorities. I gave an early example of that from Glasgow, where it was kept very simple. The community planning partners around the table agreed on the priorities in Glasgow and then went on to look at how their input could deliver outcomes for those priorities. That input could be working jointly or something that they were doing as individual organisations with the support of others. It is not about aligning budgets; it is about setting agreed priorities and working out how to deliver on them.

We have raised the point about early intervention and prevention and, as a national group, we have asked for local community planning partners to identify where they are doing that work and to show us evidence that it is happening. It is happening, and they are beginning to show us the evidence.

Some of the changes that we are talking about, as the committee heard earlier, are generational changes. They are not changes that we are going to see next week, or even next year. We are talking about influencing people's lives into the future. It is a generational change to tackle the inequalities in, for example, health. We will not see a change next week or next year, nor even in 10 years, but we will see a generational change in the impact on communities and the lives of the people who live in those communities. We cannot see an overnight change in what is happening.

We need to take those first steps to ensure that we start that work so that in the future we will see a change to the impact on people's lives and how they live in their community.

Tavish Scott: Audit Scotland observes that some community planning partnerships are not clear about their specific role in public service reform. Why is that?

Pat Watters: I do not think that it was as long as nine months ago that, as the chair of the national community planning group, I wrote to every chair of the community planning partnerships. CPPs should be very clear about what their objectives are, what their aim is and how they should be able to go about delivering that. I do not accept that, at that level, community planning partners do not know what their goal is.

Tavish Scott: That was Audit Scotland's finding, Mr Watters. We know about your letter of July 2014 and we also have Audit Scotland's advice that it is not clear what difference that letter has made, so I will repeat the question: why do CPPs not know what their role in major public service reform is?

Pat Watters: I am sorry, but I cannot answer why they do not know, because it is very clear to me what the aims and objectives are and I have tried to put that across to community planning partners. I know many of them personally, and I know that they know what the aims and ambitions are.

Tavish Scott: Let me try it the other way round. Is integrating health and social care the number 1 priority for community planning partnerships?

Pat Watters: No, it is the number 1 aim for Government.

Tavish Scott: It is the biggest reform going on across all the sectors.

Pat Watters: That does not diminish the role of community planning partners. As a matter of fact, that sits alongside community planning partnerships and how they can change and deliver for their community. It is not a hindrance.

Tavish Scott: I did not suggest that it was a hindrance; I am suggesting, as David Parker said in his evidence earlier, that when health and social care integration comes up on the front page of his inbox everything else gets pushed down. Do you accept that?

Pat Watters: No. Integration is something that works alongside what is happening with community planning partners. It does not override what is happening with community planning partners; it is an aid to delivering and changing communities.

Tavish Scott: I thought that David Parker was being very fair. He was pointing out that when another national initiative happens—apart from police reform, health and social care integration is the biggest imaginable, with a huge role and requirements placed on local government and the NHS—then local priorities slip. We cannot do everything. David Parker said it very clearly: we are asking the public sector to do too much. We have put in place some very big reforms and other things will have to go. They have to slide down the inbox—they cannot be done at the same time.

Councillor O'Neill: We must appreciate that the integration of health and social care did not happen overnight. Five pilots were set up seven or eight years ago. They ran for about five years before we started to go through the process of rolling out the integration of health and social care throughout Scotland.

David Parker was absolutely right—there will always be things that will come into a council leader's inbox or land on their desk that have to be dealt with straight away. His point was that we could perhaps do with a bit of a breathing space to allow us to develop aspects of the work of the CPPs. That point was well made—we need to get those things right before we start new initiatives.

Tavish Scott: What are you looking for from national Government to allow CPPs to develop and to make sure that they can address the criticisms that were made in the Audit Scotland report? What do you need to ensure that we do not end up taking the same evidence in another year's time?

The Convener: I want to bring in Sarah Davidson; I will bring Councillor O'Neill back in later.

Sarah Davidson: I would expect health and social care integration to be very high up on, if not at the top of, the agendas of the health board and the local authority that participate in community planning in an area. Different community planning partnerships will have engaged with that in different ways but, as entities, I would expect them to be most focused on how, from the coming spring, they will involve the new statutory partner around the table of community planning and how they will ensure that they take all the opportunities that they get to learn from what will be an embedded example of effective partnership working in a partnership context.

There is a distinction to be made between things that are priorities for the constituent partners in community planning and things that are priorities for the partnership. Those things are not necessarily always one and the same.

Tavish Scott: Audit Scotland has observed that "there is no coherent national framework for assessing the performance and pace of improvement of CPPs."

Would you care to comment on that?

Sarah Davidson: We recognise that. At the most recent meeting of the national community planning group, at which the group discussed the Auditor General's report, it asked for advice from the senior officers group about how we could make further progress towards such a framework. That will be supported by the work on benchmarking across CPPs that has been going on for some time, which will be shared with CPPs in the spring and will be developed over the coming year. We fully recognise that criticism and the national group is keen that we address it.

Tavish Scott: So, in other words, we can all make assertions, but we do not know how to monitor the effectiveness of CPPs.

Sarah Davidson: Monitoring is taking place of the effectiveness of individual activities, but there is a gap as far as the collective picture and how individual CPPs compare with one another are concerned.

Tavish Scott: From the committee's point of view, we cannot measure the effectiveness of CPPs at the moment.

Sarah Davidson: We cannot do that to as great an extent as we would like to.

Tavish Scott: When will we be able to do that?

Sarah Davidson: As I said, the benchmarking framework will be shared with CPPs this spring, and it will be populated with data over the coming year, so by the time the committee considers the issue again, there should be benchmarking data to share.

Tavish Scott: Forgive me, but when will that be? Will that happen by December of this year or some time next year?

Sarah Davidson: The expectation is that we will start benchmarking in the spring, so a full year's data should be ready in spring 2016.

Tavish Scott: So it will be 2016 at the earliest. That is fine—thank you.

Colin Keir: I am having to think on my feet a bit, because some of the questions that I had intended to ask have already been asked. Do you feel that the information that goes out to community planning partnerships and the various individual partners allows them to understand the way forward as you envisage it, as those who are implementing it nationally? Do you feel that that information is clear?

As I mentioned to the first panel, people have little knowledge of CPPs. Even some councillors are not clear what CPPs are—I know that because I used to be a councillor. Is the information that is provided centrally to people clear enough? They are given enough leeway to deal with their local problems while also dealing with national initiatives, but have things now become rather grey, with everybody starting to do their own things and with expectations raised to a point where they are obviously not being met? Various members have mentioned situations where the question arises how to audit the success of the set-up.

Is there anything else that you can do—the Government as well as COSLA and your group, Pat—to make things a little bit simpler, so that people can actually understand what CPPs are and what they are meant to do? It was pointed out to me today by a councillor who will remain nameless that there is a fear among some that the arrangements could start to dig into the

democratic rights of councillors to make decisions at council level.

11:45

Pat Watters: I do not think that the national group is there to tell or dictate to CPPs what to do. They are democratically elected, and the elected members on them are accountable in their own areas. The other members in the partnerships are accountable elsewhere.

Could the central group be clearer about how it deals with the advice that goes out? Yes. At the most recent meeting, I indicated that we were going to consider reshaping the national group. The national community planning group consists of about 22 people, and it has the leaders of the whole of the public sector on it. As you will remember, we have discussions at the group, and those are taken back to the various organisations concerned by the people who they have delegated to be there—our discussions within the national community planning group are filtered down.

I am conscious that it is extremely difficult to reach conclusions in a group of 22, so we have decided to have a smaller group, which will consider how we drive forward community planning in the future. It will then report back to the larger group. The smaller group will include ministers, local government representatives, health board representatives and representatives from the voluntary sector. We are trying to reshape things and to get better at getting the information out.

Remember, however, that people round the table have been delegated to be there by their organisations so that they can feed back the information that they discuss at the national table.

Sarah Davidson: You make a very fair point, Mr Keir. When preparing for today's meeting, I reflected on and looked again at the guidance and the various exhortations that have been developed over the years. We are often very good at describing things and writing them down. There is an exhibit in the section 23 report that beautifully draws what things are meant to be like. It is important that we at the centre understand how that lands in local places. One of the great benefits that Government has derived through the system of location directors, with a senior member of staff attached to each community planning partnership, is that we get feedback about what actually happens when the guidance sits on the table. When partners look at it, does it make the same sense there that it does when it leaves Government and COSLA?

Part of the evolution that has been described involves our recognising that it is important to be very clear. I hope that one of the benefits of the

Community Empowerment (Scotland) Bill will be to give added point to what community planning partnerships are supposed to do. The guidance and letters that have come from the national group over the past year or so have sought to do that, too.

Councillor O'Neill: Mr Keir, you also posed the question whether the arrangements are damaging democratic accountability and whether people see some of their power disappearing. Inevitably, if there are going to be shared priorities, that criticism could be made, but it is better to have a shared priority than a local authority priority, a health service priority and an enterprise network priority. Let us get the priorities agreed and work together. That does have an impact on democratic accountability, but there is still a better outcome for communities.

Mary Scanlon: You said that you think that the report is fair. Ms Davidson, you said that you accept all the recommendations.

The report is critical. In particular, it is very critical of the tasks of the three of you, rather than of what has been happening at a local level.

I will give examples. The report says:

"the Scottish Government needs to demonstrate a more systematic approach to implementing its outcomes approach".

It says:

"CPPs are still not clear about what they are expected to achieve".

That has to come from you. The report says:

"CPPs do not yet know what a strategic approach to prevention will look like".

That has to come from you. Tavish Scott mentioned—this is good and worth repeating—that the report says:

"there is no coherent national framework for assessing the performance and pace of improvement of CPPs."

That also has to come from you. Finally, the report says:

"Scottish Government guidance is not clear enough about the specific role that CPPs should play in the implementation of public service reforms."

We had a very good evidence session with Borders and Aberdeen representatives. It seems that they have made some progress and that their plans are positive.

I have read from only pages 4 and 5 of the summary—I have not picked out a little phrase in paragraph 57—and those are the key messages. The key messages are that you have not stepped up to the mark to provide the leadership, advice, support, co-ordination and teamwork that are required to make community planning a success.

That is the case 10 years after the legislation and it was in the follow-up report only two months ago. You all accept that it is true and fair. Do you accept that you have taken your eye off the ball and that you have not stepped up to the mark to give local CPPs the support that they need?

Pat Watters: No.

Mary Scanlon: The report says:

“CPPs do not yet know what a strategic approach to prevention will look like”,

that

“Government guidance is not clear”

and that CPPs do not know

“what they are expected to achieve”.

Can you explain that?

Councillor O'Neill: You are being selective in what you are picking from the report. Let me be equally selective.

Mary Scanlon: Those key messages are in six paragraphs.

The Convener: To be fair to Mary Scanlon, she is asking questions about the report. Can you respond to them? I will give you an opportunity to elaborate on other points in it, but I ask all members of the panel to respond to those specific points.

Sarah Davidson: One hallmark of the way in which the national bodies that have been mentioned have worked together since the statement of ambition and through the implementation of the new SOAs in the past 18 months to two years has been the adoption of a very supportive approach to CPPs. We worked very closely with CPPs as they developed their SOAs. A scrutiny and improvement panel did quality assurance and worked very closely with each community planning partnership up to the point at which their SOAs were signed off.

Each community planning partnership now has an improvement plan in place, and they give feedback on progress on that to the national group through its senior officers group.

That is not to say that more could not be done, but I would not want the committee to inadvertently get the impression that we have not worked together very closely and with a shared ambition. As I said at the outset, the Government recognises the work that still requires to be done and the criticisms that have been made.

On the specifics that Mary Scanlon identified, I have already spoken about the benchmarking work. On the more systematic approach to outcomes, we recognise that there are places where some of the local performance

management arrangements and shared partnership performance management arrangements are not as neat a fit as they ought to be and as we would like them to be in order to drive outcomes. Work has been going on for a while—I hope that it will come to fruition soon—involving the Improvement Service, the Society of Local Authority Chief Executives and Senior Managers and the Scottish Government to look at the overall performance management of the individual entities and CPPs and how they fit together.

Finally, on the point about the role of community planning partnerships in public service reform programmes, we accept the feedback from CPPs that they have not always been as clear as they ought to have been or that they would like to have been about the way in which they fit. We will certainly think about that and ensure that, when the Scottish Government speaks about public service reform, whether that affects one organisation or the way in which organisations come together, we are scrupulously careful to enunciate the role of community planning partnerships.

However, I think that the evidence also shows that, even if community planning partnerships do not always identify something as part of public service reform, they have been very involved in thinking about, for example, the role of Police Scotland in its new shape in playing into community planning partnerships. We have already spoken about health and social care integration and the extent to which that will become a very important part of partnerships in the future.

Prevention is one of the priorities identified by the national group, and we are thinking carefully in discussions with CPPs about what support they would like from the Improvement Service, from us and from others in order to turn something theoretical into something real in terms of making decisions about local priorities.

Pat Watters: I find it difficult to say that the national group has not stepped up to the mark, because I do not believe that that is the case. Can we do better? Yes, we can. I have tried to describe how we are going to reshape the organisation to ensure that we get the message out properly. We will look at the statement of ambition to ensure that it is still relevant to what we are trying to achieve through national community planning. I believe that the message does actually get out.

As I tried to explain, the national community planning group is made up of senior people in the public sector, and their responsibility is to take that message back to their organisations. Is that happening? Yes, it is. Is it happening as well as it should? Probably not, from what has been said.

We accept the report and the criticism that it contains, and we will strive to do better as a result of that criticism. The way to help is to ask how we can assist the organisations to do better, not to continue criticising them.

Councillor O'Neill: Again, I offer a selective reading from the report. It states:

"The Scottish Government and the National Community Planning Group (NCPG) have taken steps to promote the importance of community planning across government and in partner organisations. The National Community Planning Group is now starting to focus its activity on the areas where national leadership is most needed."

There are many positives in the report. We accept the negatives and the positives.

Mary Scanlon: Sarah Davidson was the only one who mentioned prevention, which is a huge part of the Government agenda—and, if I may say so, also of the Opposition's agenda. We all want to look at prevention, but the CPPs do not know what a strategic approach to prevention looks like.

You said that you were talking with CPPs and thinking about prevention. Do you know what a strategic approach to prevention looks like? Is it coming from Government through yourselves to the CPPs? Is there a strategic approach? If there is, why do CPPs not know what it looks like?

Sarah Davidson: One of the issues may be about the language that is used and the extent to which CPPs always badge what they are doing in prevention. Some of the work that is being done across Scotland in relation to the early years collaborative, which was mentioned earlier, is an example of investing in the early years in order to prevent significant problems happening later on. That is being done with the active participation of all community planning partners across Scotland.

Mary Scanlon: I have to interrupt you there. Paragraph 6 of the report's summary states that "the Early Years Collaborative, remains underdeveloped."

Perhaps that is not the best example to use.

Sarah Davidson: It is at an early stage. I agree that we should not ask those examples to bear more weight than they are capable of doing at the moment, but it is a good example of focused attention across public services on an issue that everybody understands in terms of its importance for costs to the public service and, more important, outcomes for people later in life. We should not pretend that we have made more progress than we have, but there is discussion about prevention that is both strategic and practical at local level.

When I was on the community planning partnership in Edinburgh, I saw good examples, in neighbourhoods where there were deeply ingrained problems that no individual service was capable of solving, of people talking about how

aligning activities and resources could make a difference. For me, that is a strategic approach to prevention, whether they called it that or not. We heard about the importance of good practice, and I see that as one of the core roles for both the Scottish Government and the national group, so that we can learn from places where things are happening and can support people in being effective, and so that we can share examples and allow them to be picked up more widely. If there is more that we can do to help people to understand why some things work and some do not, we would be keen to do that.

Mary Scanlon: I do not have any other questions, but it is important to point out that the Audit Scotland report is all that we have. I have not brought anything to the table other than what is in the report, and I would be failing in my duty and responsibilities if I did not hold you to account for what is in it.

The Convener: Before I bring in Nigel Don, I want to clarify that the committee's role today is to take evidence on the information that we have received. If that sounds like criticism, please be reassured that this is an evidence session.

12:00

Nigel Don: Good morning, colleagues—it is still morning, by a few seconds.

My first question is on the issue that was mentioned in the earlier session about the health budget addressing health issues. I need only go back to yesterday's debate in the chamber to find a recognition in some places that it is not the health budget that will solve our health problems, which are in-built in our communities and in children, almost before they are born.

This morning, we heard the NHS say frankly, "We're keeping our budget and it's not going anywhere else." Thankfully, the current witnesses were here to hear that, too. There is a recognition that 99 point something percent of the NHS budget is spent on illness response rather than on health and illness prevention. If the NHS is going to hold on to its budget and is not going to share it, there is clearly no expectation that community planning partnerships will get shared budgets. That was another thing that the earlier evidence session clearly brought out. If the NHS is going to remain as an illness response service, how on earth will community planning partnerships, or for that matter any other part of our public service, actually get us to be healthier?

Pat Watters: This is about the prevention part of the agenda. I understand the health service's attitude. When I was an elected member, I used to argue that the health service was the ill-health service and that, actually, local government was

the health service, given that our job was to improve health and prevent situations.

Working together to generate that sort of thing makes a vast difference to communities. For instance, we all know about vulnerable elderly people and that trips, spills and slips cause problems; indeed, yesterday, Shona Robison talked about people going into hospital when they did not need to. However, although we have known about all that for a long time, we are not working together to prevent it. I am not talking only about parts of local government; parts of the rest of the public sector, too, can work with local government to ensure that we know where those vulnerable elderly people are and that we take steps to assist them. That impacts on the health budget and releases money from it so that we can concentrate on prevention.

Nigel Don: I am with your logic, but with respect, I have to say that that is not what is happening. I am not suggesting that local authorities are not doing what they can for the vulnerable, but they, like health boards, will say that they have core activities. I do not need to tell anybody here that those core activities finish up being social work and then education—although usually the budget is the other way round. In the current budgeting environments, everything else is struggling, and that is not going to change.

Mr Watters talked about something releasing money in the health service for health prevention but, actually, that does not happen. Community planning partnerships try to get resources from here and there, but the principal place where they might get resources from—the NHS—is not going to give them the resources for health improvement. It is going to carry on doing its illness stuff.

Councillor O'Neill: I take the point. The difficult part about reinventing and redesigning services is not so much about agreeing that we need to invest in early intervention as about agreeing what we need to disinvest in to fund it. That is a difficulty. It is trying to get a square peg into a round hole. The body politic and the media are particularly vocal whenever any public service tries to disinvest in something, whether that be a hospital or whether that involves amalgamating schools. There is a furore whenever that happens. We need a slightly more mature attitude to disinvestment.

Nigel Don: I absolutely agree with you—and I speak as a former councillor. Is there an appraisal system to examine whether those in public service in the senior appointments in CPPs are not only delivering their core service but working across the agendas? I am picking up that issue partly because of paragraph 23, which says that

“Partners’ formal lines of accountability are not to the CPP board, but to their own organisation’s board”,

which means their responsibility and annual appraisal are based on the core functions of, say, the NHS or the council. That precisely excludes what you want community planning partnerships to do. It is almost an institutional failure to do the cross-functional working that will enable us to carry out prevention work on all the topics that I have just spoken about.

Sarah Davidson: I can comment on the appraisal system for public bodies and health boards, and my colleagues might want to answer with regard to local government.

What you say is correct, Mr Don. An important part of understanding how to make this work is understanding people’s intrinsic as well as extrinsic motivations, and the appraisal system and the process of holding people to account are very important in that.

Over the past couple of years, one of the things that the Government has been trying to do better is to make it very clear what we expect of the bodies that are accountable to government in relation to this. For example, as part of the appraisal process of public bodies with whom they have relationships, sponsor teams in the Scottish Government should be looking closely at their contribution to community planning as well as the delivery of their specific functions. We are just about to give the next round of guidance to public bodies on that, and I hope that that will make things even clearer.

Are we doing that as well as we could yet? Probably not, but we have to go on getting better at it. Earlier the police representative from Aberdeen, Chief Superintendent Watson, talked about embedding it in the police appraisal system. The police are probably better at that than some of the rest of us. Health boards will be increasingly required to do that, and I hope that the new joint boards will also be a focus for that activity. It is important that we look across the spectrum of motivations and accountabilities and hold not only elected or appointed boards but people whose jobs it is to do that to account for such activity.

Councillor O'Neill: We are seeing a step change in how we take such things forward. We acknowledge the Auditor General’s report, and what we are doing here today is all part of the process of checking and making sure that the process is doing what it is meant to do. Being held to account is part of those checks and balances. We recognise that although we are in a better place than we were, we are not in as good a place as we need to be. It is an on-going process.

Nigel Don: Given the structure of local government, you will find it difficult to hold chief

executives to account for much more than presenting a balanced budget. The practical realities might well leave you struggling to force chief executives to engage with community planning, although I am sure that they will do so.

I am much more interested in Sarah Davidson's comment that the NHS is going to move towards being appraised on this matter. What we heard very clearly this morning was the statement, "My budget is my budget to do what I have to do about my core activities—and I am keeping it." Those are not quite the words that will be in the *Official Report*, but that is what I gathered. Unless the NHS engages with the wider task of improving the whole of community life, community planning partnerships are going to struggle.

Sarah Davidson: The latest round of guidance that went to health boards on their local delivery plans is explicit about the contribution of resources to community planning. It is therefore my lively hope and expectation that at the end of this round of activity, they will be held to account for exactly that by the Cabinet Secretary for Health, Wellbeing and Sport and the director general of health.

Nigel Don: That sounds excellent.

Pat Watters: The national group includes four chief executives of health boards, all of whom have bought into our organisation. Shona Robison could not make the last meeting, but the previous three health secretaries have been committed to ensuring that kind of buy-in from health boards and those involved. I cannot fault either the Government's or the health organisations' drive to fully participate.

Is this difficult? Yes, it is difficult when they try to determine their budgets. However, when we talk about resources, we are talking not just about money but about people, buildings and other kinds of support to ensure that there is a whole package. Aligning resources is not just about aligning budgets; it might mean aligning the people, facilities and other parts of the organisation that someone is involved in.

Drew Smith: When police counters in my area were closing, I got a letter from Police Scotland to tell me about it, and when changes were made to day care services in Glasgow, I got a letter from the council to tell me about the disinvestment in those services. However, when the health board withdraws funding from a local voluntary sector organisation, we normally get a letter not from the health board but from the voluntary sector organisation. The health board rarely warns us in advance of such things.

I was interested in what David O'Neill said about this. A lot of the disinvestment decisions are taken by individual organisations while community

planning partners think about where they want to invest and innovate. How much of a problem is it if the correct balance is not struck in discussions about disinvestment and investment? Community planning structures are fairly hamstrung by the fact that the other organisations take disinvestment decisions in isolation whereas they are subject to all the usual political pressures of making difficult choices.

Councillor O'Neill: That issue is addressed in a report that came out fairly recently on the Government's town centre first principle. What economic impact is the closure of offices and counters by local authorities, health services, the police or whoever else going to have on a town centre? Let us say that a local authority office is closed and relocated to another building. There might be a saving for the local authority, but it might damage the town centre and, in the long run, the impact might be negative rather than positive. We need that type of thinking across the public services. Organisations need to think about not only how something is going to impact on their budget but how it is going to impact on the public budget—public spending—and communities. We need to be a bit smarter than we have been, stop looking just at the bottom line and think about the wider impact.

Sarah Davidson: There is an interesting issue about the culture around how organisations are held to account within partnerships. You heard a bit about that earlier, and the report talks about it. The Community Empowerment (Scotland) Bill is very clear about how community planning partnerships will be expected to work in the future. Each community planning partnership will be expected to identify the priority local outcomes for its area and what each of its partners will do to support the achievement of those outcomes. I hope that, in the context of all of that having been agreed around the table, if one partner saw one of the others disinvesting in something that it believed to be fundamental to achieving those shared outcomes, it would have the confidence, based on the relationship and the trust between the partners, to challenge that.

However, the report tells us that that culture is not yet as developed as it ought to be. We all recognise that the partnership can potentially be an uncomfortable space in which there is a mix of people from different organisations, but people need to understand why decisions are being made and have the confidence to challenge those decisions if they do not seem to fit.

Drew Smith: We talked about this at some length with the earlier panel, but whenever we discuss partnership relationships in the public services, a perennial issue is the extent to which everything appears to be dependent on fairly

intangible things such as relationships and cultures. That causes frustration among those of us who want the process to be a success and to move forward more quickly. What is the appropriate balance between partnership and leadership? The Auditor General seems to be pointing to a deficiency in leadership. Where is the accountability for that leadership?

12:15

Pat Watters: There are examples of relationships having damaged a partnership, but there are also examples of relationships having been set aside to ensure that a partnership works properly.

Glasgow, which I mentioned earlier, is a shining example of how to drive this forward. Only three years ago, Glasgow City Council and the health board were like a family at war. Now, regardless of whether that relationship has been mended, they are working together in partnership. That has been driven by the leadership of those organisations, who have ensured that the partnership is working. Are they holding hands and singing as they skip up and down Sauchiehall Street? I do not know about that, but the partnership is working, and that is because the leadership has insisted that the partnership is more important than deciding which bit was at fault.

Leadership has to drive the work and ensure that the partnership is successful, but the partnership can be successful even if the relationship is not right. You just need a driver to ensure that it happens. I am sure that the relationship between Glasgow and the health board has been repaired, because I heard evidence from Robert Calderwood and George Black, who were at the same desk, that they were working together extremely well. The relationship was extremely bad in the past, but it has been mended, and that is because the leadership insisted that that should happen and that the partnership be driven forward. A good relationship is important to the extent that it makes partnership working easier, but it is not necessary, as you can drive the partnership forward if the leadership is right.

Stuart McMillan: I asked the previous panel about benchmarking and, earlier, Sarah Davidson spoke about the introduction of benchmarking in the spring. Can you provide some information about what is going to happen?

Sarah Davidson: At the moment, the Improvement Service, SOLACE and the Scottish Government are working with partnerships to identify what you might think of as family groups of CPPs, by which I mean ones that have sufficient parts of their identities in common that it makes

sense to benchmark against them. In agreement with them, we will identify the outcomes that it will be sensible to measure, and they will be introduced and in effect tried out in CPPs from this spring. We will learn from that whether we have the indicators or the benchmarks right.

I am afraid that I do not know much more about the detail of the process, but I am happy to provide that to the committee in writing, if that would be helpful.

Stuart McMillan: It certainly would be.

Will the benchmarking be additional to or separate from the benchmarking tool that COSLA has introduced?

Sarah Davidson: It is specific benchmarking for community planning partnerships. It is in addition to that benchmarking tool, but it is very much informed by the work that has been done on benchmarking between local authorities.

Stuart McMillan: Thank you. It would be helpful if you could provide that information.

Councillor O'Neill: There is a Government health warning on benchmarking. It is a tool, and no more than that.

Stuart McMillan: Exactly—it is a tool. Indeed, I have taken part in discussions on that very issue at a previous meeting.

On the scope of the community planning partnerships, do you think that their membership is adequate? Should there be more people around the table in the 32 areas, or do you think that there are too many?

Sarah Davidson: The Community Empowerment (Scotland) Bill is addressing that issue, prompted by exactly that question and by the differing experience of those who, as we discussed earlier, have either been required to or have chosen to show up. We have deliberately included within that bodies such as Skills Development Scotland, which has an important role to play and needs to be feeding into local planning. There are some bodies, such as the national parks, that play an important role in their immediate locality but, clearly, their role goes no wider than that. We have learned a lot from the experience that we heard about earlier of Scottish Enterprise's allocation of individual staff members to support community planning bodies.

We believe that the bodies set out in schedule 1 of the Community Empowerment (Scotland) Bill adequately reflect what is currently required by community planning partnerships, subject to local discussion of roles and responsibilities. However, I am sure that, if required, the Government and the Parliament would be open to amending that in future, if it were felt that there was a gap.

I suppose that it is also important to recognise that, in addition to those formal statutory public authorities, there is a very important and growing role for the third sector, which is a critically important provider of services and whose insight into the experience of service users in local areas is important. As we know, some community planning partnerships have already done very good work on bringing that voice to the table, but others have further to go, and it is important that we think about not only the statutory partners but community groups and bodies that deliver services but which are not public agencies.

Stuart McMillan: A few moments ago, Pat Watters talked about the working arrangements between NHS Greater Glasgow and Clyde and Glasgow City Council. I asked the previous panel a question about the chairs of the CPPs. Are independent chairs beneficial for CPPs?

Pat Watters: Given the experience of having an independent chair for the national group, the answer is probably no.

In all seriousness, it is the people with buy-in who should be chairing the body, by which I mean that a member of the local CPP should be the chair. I do not think that bringing in an independent chair adds any value. It is far better to have people who have a stake in that area and in that organisation, because they will be more motivated to ensure that they are driving the body forward.

As I have said, I do not think that having an independent chair adds any value. I would probably support the idea of the local group electing its chair locally.

Stuart McMillan: Paragraph 25 of the report says that

"Partners need to create a more effective leadership, challenge and scrutiny role in CPP boards"

and that

"Support is required for CPPs to develop the skills and culture that are needed to create effective challenge within CPP boards".

What support do you think is required, and how can it be delivered?

Sarah Davidson: It is important that, to an extent, we are led by CPPs telling us what they think that they need, but it was interesting to hear the two CPPs that were represented earlier having quite good insight into the nature of partnership working and the things that they need to be able to do.

I know that the Improvement Service has, as it does with councils, offered help to CPP boards on thinking about the skills, the culture and the approaches that they need to have. My guess is that the investment is probably best spent on

helping people who, as we heard earlier, often come from quite different backgrounds and have quite different day-to-day pressures but who have to come together in a certain space to be effective partners. If I were choosing where to put my investment, that is where I would put it.

Pat Watters: It is important that the opportunity is there. If training is necessary, it should be made available. Can we insist that people take that training? Probably not, but that should not stop us from ensuring that it is available to people who need it.

Councillor O'Neill: Moreover, if people are going to be trained, one thing that they need to be trained in is not to mind it when someone stands on their toes. When I sat on a CPP board, I was quite happy to step on the toes of the health board but, equally, I had to be happy to let it step on mine. When you share priorities and projects, you need to allow that to happen.

The Convener: On that note, we will conclude. I thank the panel members for their time.

12:23

Meeting continued in private until 13:03.

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