



Report To:	Inverclyde Alliance Board	Date: 15 June 2015
Report By:	John Mundell Chair of the SOA Programme Board	Report No:
Contact Officer:	Miriam McKenna Corporate Policy and Partnership Manager	Contact No: 01475 712146
Subject:	Community Planning Outcomes Profile	

1.0 PURPOSE

1.1 The purpose of this report is to provide the Alliance Board with an update on the development of Community Planning Outcome Profiles for Community Planning Partnerships.

2.0 SUMMARY

2.1 A report was considered at the last meeting of the Board advising of the development of a benchmarking programme led by the Improvement Service, known as Community Planning Outcomes Profile.

2.2 The Outcomes Profile is a set of data measures that can be applied across all community planning partnerships. The purpose of this is to help CPP boards to better understand their own performance; target improvement activity through access to consistent data and supporting mechanisms and share learning on how to achieve better outcomes.

2.3 The initial profile was made available to CPPs in April and is attached in appendix 1. Seventeen indicators have been identified across the 6 national SOA priorities categories of:

- Early years
- Older people
- Economic growth and employment
- Safer and stronger communities
- Health and wellbeing
- Environment

2.4 A seventh additional outcome has been added to the profile which is 'Added Value of CPP'. This was not proposed at the consultation events held in January / February and concern around the purpose and value of this indicator has been raised with the Improvement Service. A response indicating that CPPs at the Improvement Service workshops had suggested some measurement of the added value of CPPs was given, accepting that those suggested may not be the right measures.

2.5 The gaps and limitations to the data have been identified by the Improvement Service and are attached as appendix 2.

2.6 The timetabled development plan, which was referred to in the last report to the Board, is still being finalised and agreed with the funders. Once this has happened, it will be shared with Community Planning Partnerships.

3.0 RECOMMENDATIONS

It is recommended that:

- a. A letter is sent on behalf of the Alliance Board to both the National Community Planning Group and SOLACE to formally highlight the concerns of the Inverclyde Alliance about the added value of the Community Outcomes Profiles.

John W Mundell
Chair of the SOA Programme Board

4.0 BACKGROUND

- 4.1 The role of community planning is to improve outcomes, reduce inequalities and change lives. Against a backdrop of wider public service spending pressures, CPP's are seeking to deliver better outcomes for communities, households and individuals through improving the performance of their services, developing different service delivery models and by developing preventative and not simply reactive approaches to service delivery.
- 4.2 The Scottish Government, Local Government and the Improvement Service have agreed to jointly fund a benchmarking programme for Community Planning to support the ongoing reform of Community Planning and the delivery of improved outcomes. This benchmarking programme is referred to as the Community Planning Outcomes Profile.
- 4.3 The Profile is about better measurement of outcomes in the first instance and not benchmarking in a conventional sense. The aim is to provide CP boards with better and more consistent data that will allow them to:
- Assess if the community is improving over time
 - Interpret what is happening and why
 - Understand what they can do about it in relation to contribution not attribution
 - Prioritise what they are going to do about it

5.0 INITIAL PROFILE MEASURES

- 5.1 The initial profile measure was made available to CPPs in April and is attached in appendix 1. 17 indicators have been identified across the 6 national SOA priorities.
- Early years
 - Older people
 - Economic growth and employment
 - Safer and stronger communities
 - Health and wellbeing
 - Environment
- 5.2 A seventh additional outcome has been added to the profile which is 'Added Value of CPP'. This was not proposed at the consultation events held in January / February and concern around the purpose and value of this indicator has been raised with the Improvement Service e.g. there are a number of factors that will influence performance in the indicators which are beyond any CPP partner's control for example, Welfare Reform is actually resulting in more children in poverty, despite the best efforts of CPPs and there is very little mitigation partners can put in place that will make any significant difference to this – partners can help mitigate the negative impacts of welfare reform but will not make a large impact on child poverty as a whole; median earnings and numbers of people on out of work benefits will be influenced more by national policy and investment than the impacts that CPPs will have.
- 5.3 In addition, concern has been fed back to the Improvement Service that this measure may be used to compare CPPs against each other, which would be highly unfair given the varying socio-economic circumstances across each area and the entrenched levels of deprivation in some areas. Change will not be achievable in a number of the indicators in the short term, therefore how much the indicators have improved will be largely meaningless.
- 5.4 The Improvement Service has responded to a query from the Corporate Policy and Partnership Manager indicating that the discussions at the Improvement Service hosted events, regarding the development of the CP Outcomes, suggested some sort of indicator to measure added value would be useful. The Improvement Service indicated that *'the proposed measure is a suggestion as to how [measuring added value] might be addressed. However - it may be that this is not the most useful method of reflecting this and suggestions re other ways of assessing 'impact' would be very welcomed.'*

Whilst the move to try to address data gaps, and identify what further indicators could be drilled down to a local level is welcomed, the Improvement Service have also set out a number of areas which they think are required for embedding the profiles across CPPs, including:

- *Local community involvement*
- *Support for partnerships to interpret the profile data, identifying drill down information and developing a better understanding of drivers*
- *Support for partnerships to use the profile in decision making, building into scrutiny, self-assessment and performance management processes*
- *Agreeing an approach to reporting the profile to the public*
- *Promoting collaboration between partnerships to share learning'*

The development and performance management of SOAs have involved the interpretation and analysis of much more data than is set out in these suggested profiles, and SOA annual reports are published on the Council's website every year. Additionally the CPP managers' national network allows for collaboration and sharing of best practice across the CPPs. It is difficult to see what added value this project will bring to community planning across Scotland. It may be that there is some inconsistency across the 32 CPPs in regard to data analysis, understanding of place and performance management, but support dedicated to those who are poorly performing in these areas would be a more effective use of resource.

There appears to be a lack of understanding within the Improvement Service of how CPPs manage their SOAs and the supporting data analysis to inform priority setting.

5.5 A number of gaps and limitations to the current data profile have been identified by the Improvement Service and are attached in appendix 2.

5.6 The last report to the Alliance Board referred to the Improvement Service developing a timetabled development plan detailing timeframes and deliverables for the project. The Improvement Service advises that this is still being finalised and agreed with funders. Once this is available to CPPs it will be presented to both the Programme Board and Alliance Board.

6.0 IMPLICATIONS

6.1 Legal: None
Finance: None
Personnel: None
Equality and Diversity:

7.0 CONSULTATIONS

7.1 None

8.0 LIST OF BACKGROUND PAPERS

8.1 None

Appendix 1: Community Planning Outcomes Profile Initial Profile Measures

Life Outcome	Proposed Measures
<p>Early years Children have the best start in life, so that they have equal opportunities to succeed. Children are safe and nurtured, and have the life skills, confidence and opportunities to reach their potential. Young people are ready for life and work.</p>	<ol style="list-style-type: none"> 1. % of babies at healthy birth weight 2. Body Mass Index (BMI) of Primary 1 school children 3. Attainment measures (from Insight) 4. % school leavers in positive and sustained destinations
<p>Older People Older people are independent for longer and able to stay in their own homes as long as they wish.</p>	<ol style="list-style-type: none"> 5. Emergency hospital admissions per 100,000 population (65+)
<p>Employment & Economic Growth Employment opportunities for all People have satisfying, secure and suitable work. People live in a community with a thriving, expanding economy. People have the means to support themselves and their families with a standard of living that enables them to participate in society after paying all necessary bills.</p>	<ol style="list-style-type: none"> 6. Employment rate 7. Median earnings for residents in LA area who are employed 8. % of population (aged 16-64) in receipt of out of work benefits 9. % of Children in poverty 10. Survival of newly born enterprises (3 year survival)
<p>Safer & Stronger Communities People live in resilient, responsible and safe communities. People in vulnerable circumstances are protected. Community and public understand the role/place of public services. People feel engaged and feel they can influence their community. People do not feel isolated or lonely.</p>	<ol style="list-style-type: none"> 11. Rate of recorded crimes and offences per 10,000 population 12. Total fires per 100,000 population
<p>Health & wellbeing People live happy and healthy lives with a healthy life expectancy. People who need care are supported to live independently and confidently. Positive end of life.</p>	<ol style="list-style-type: none"> 13. Mortality rates per 100,000 for people aged under 75 in Scotland 14. Average score on the short version of the Warwick-Edinburgh Mental Wellbeing scale (SWEMWBS) 15. Unplanned Emergency Hospital attendancies
<p>Environment People live in attractive, welcoming environments. People take pride in and look after their environment.</p>	<ol style="list-style-type: none"> 16. Carbon Emissions
<p>Added value of CPP The partnership is adding value in terms of the outcomes for local communities through working effectively together</p>	<ol style="list-style-type: none"> 17. % of vulnerable communities who have improved re 50% of above outcomes, 75% above outcomes, and 100% above outcomes

Appendix 2: Community Planning Outcomes Profile Identified Gaps & Data Limitations

Life Outcome

KEY GAPS TO BE ADDRESSED

Early years

Children have the best start in life, so that they have equal opportunities to succeed. Children are safe and nurtured, and have the life skills, confidence and opportunities to reach their potential. Young people are ready for life and work

1. Developmental milestones for pre-school (see EYC stretch aim measures 2 & 3)
2. Development/progress measure for primary school (see ADES development and EYC stretch aim 4)

Older People

Older people are independent for longer and able to stay in their own homes as long as they wish

3. Social Inclusion/Isolation measure
4. Older people remaining active (physically, socially, mentally)

Safer & Stronger Communities

People live in resilient, responsible and safe communities

People in vulnerable circumstances are protected

People feel engaged and feel they can influence their community

People do not feel isolated or lonely

5. Impact for victims
6. Perception of safety or fear of crime (currently only SHS and not robust even at a CPP level)
7. Consistent and robust measure for stronger communities – participation/engagement/ social connectedness/community resilience/social capital

Health & wellbeing

People live happy and healthy lives (a good quality of life/life satisfaction)

People have a healthy life expectancy **and a** positive end of life

People who need care are supported to live independently and confidently

Social connectedness

8. Physical activity
9. Robust happiness/wellbeing measure

Environment

People live in attractive, welcoming environments

People take pride in and look after their environment

10. A measure of lived experience in local environments (use and perception of of publicly accessible green spaces)

Life Outcome	Proposed measures	Data Limitations to be addressed
<p>Early years</p> <p>Children have the best start in life, so that they have equal opportunities to succeed. Children are safe and nurtured, and have the life skills, confidence and opportunities to reach their potential. Young people are ready for life and work</p>	<ol style="list-style-type: none"> 1. % of babies at healthy birth weight 2. Body Mass Index (BMI) of Primary 1 school children 3. Attainment measures (from Insight) 4. % school leavers in positive and sustained destinations 	<ol style="list-style-type: none"> 1. Clarity on definition. Needs to be seen in context re smoking/drug dependency/poverty; Only useful for full term births; Needs context around multiple births; At DZ level, numbers are small. 2. Should be provided for Primary 1-Primary 7. It is not a positive measure of activity, exercise or healthy eating. Incorrectly calculated - too simplistic, should be a continuum. 3. Lag in data availability. Needs agreement re which measure from Insight to include – should reflect wider attainment. 4. Doesn't show sustainability –only a snapshot, does not capture longer-term outcomes for young people (e.g. during or after college/university - could look at drop-out rates from FE/HE) Masks outcomes for sub-groups within this population e.g. looked after children. Doesn't show if destination is desired/relevant.. Masks low paying jobs. Measure will shortly change to participation measure.
<p>Older People</p> <p>Older people are independent for longer and able to stay in their own homes as long as they wish</p>	<ol style="list-style-type: none"> 5. Emergency hospital admissions per 100,000 population (ages 65+) 	<ol style="list-style-type: none"> 5. Requires breakdown by reason for admission (e.g. unintentional injury in the home)
<p>Employment & Economic Growth</p> <p>Employment opportunities for all</p> <p>People have satisfying, secure and suitable work.</p> <p>People have the means to support themselves and their families with a standard of living that enables them to participate in society after paying all necessary bills.</p> <p>People live in a community with a thriving, expanding economy.</p>	<ol style="list-style-type: none"> 6. Employment rate 7. Median earnings for residents in LA area who are employed 8. % of population (aged 16-64) in receipt of out of work benefits 	<ol style="list-style-type: none"> 6. Not available below LA level – a better measure would be Employment Deprivation by SIMD (but not been available since 2012). Need nature of employment & quality of job. Masks underemployment – in some areas where employment is high but opportunities are limited. Masks youth employment. More information needed on sustainable outcomes, by age group, by sector, and job quality. Better to use JSA claimant rate as a proxy? 7. Not available below LA level. Doesn't reflect cost of living/housing, not household income (individual based) – better a measure which reflects under-employed and low paid, living wage, minimum wage, in work poverty (would a measure of in work poverty be better - % in work benefits). As a measure it ignores commuting patterns (e.g. people living in an area could have high earnings but work outwith the area). A better measure would be Income Deprivation by SIMD (but not been available since 2012) 8. Unstable measure – the pending change to UC will make it difficult to track over time. Hides

Life Outcome	Proposed measures	Data Limitations to be addressed
	9. % Children in poverty 10. Survival of newly born enterprises (3 year survival)	differences between groups. Need breakdown to type of benefits. 9. Only available every 2 years. Measure keeps changing – need consistency. Use ‘end child poverty’ measure? Clarity on definition needed – absolute or relative. 10. Not available below LA level. Time lag (no real tracking). Masks reality – e.g. businesses with low profit with no other option). Doesn’t show why business died (e.g. bought over). Doesn’t pick up social enterprises/charities. Doesn’t give scale of businesses – how many people employed? Figure has not significantly changed over 3 decades – more reflective of personality/skills of entrepreneur.
Safer & Stronger Communities People live in resilient, responsible and safe communities People in vulnerable circumstances are protected People feel engaged and feel they can influence their community People do not feel isolated or lonely	11. Rate of recorded crimes and offences per 10,000 population 12. Total fires per 100,000	11. Needs to be a stable measure (changed in 2014). Reporting source for crimes should not just be police but should be wider to reflect reporting to other agencies, (e.g. ASB to LA) .Need breakdown by types of crimes (preferred option is violent crime) but local priorities reflect different categories. Need conviction rate. What about fear of crime? Unrecorded crime? 12. Data exists at local level but small numbers may be less meaningful and reduces ability to understand and reduce inequalities. Better to use number of dwelling fires or number of casualties/fatalities. Or needs to be broken down by type of fire.
Health & wellbeing People live happy and healthy lives (a good quality of life/life satisfaction) People have a healthy life expectancy and positive end of life. People who need care are supported to live independently and confidently Social connectedness	13. Mortality rates per 100,000 for people aged under 75 in Scotland 14. Average score on the short version of the Warwick-Edinburgh Mental Wellbeing scale (SWEMWBS) 15. Unplanned Emergency	13. Not currently available below LA level, but it can be provided. Over time with an ageing population will this measure need to be changed reducing ability to conduct time series analysis in the future? For example for those aged under 80? 14. Not available below LA level and not robust at CPP level either. Time Lag. 16+ only. But best current measure. Urgently need for something better. GP profile? What about ONS measure? 15. Need age group and type of accident/incident; affected by presence of a department in/near area? Measure of prevention or measure of lack of access to GP?

Life Outcome	Proposed measures	Data Limitations to be addressed
	Hospital attendancies	
<p>Environment</p> <p>People live in attractive, welcoming environments , and take pride in and look after their environment</p>	16. Carbon emissions	16. Measurement at this level is probably no more than tokenistic. It is difficult to identify a measure which represents what good would look like in relation to this theme.