



Argyll and Bute Council
Comhairle Earra-Ghàidheal Agus Bhòid

Executive Director: Douglas Hendry

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10 December 2020

NOTICE OF MEETING

A meeting of the **HELENSBURGH & LOMOND AREA COMMITTEE** will be held by **SKYPE** on **THURSDAY, 17 DECEMBER 2020** at **9:30 AM**, which you are requested to attend.

Douglas Hendry
Executive Director

BUSINESS

1. **APOLOGIES**
2. **DECLARATIONS OF INTEREST**
3. **MINUTES**
 - (a) Minute of the Meeting of the Helensburgh and Lomond Area Committee held on Thursday, 17 September 2020 (Pages 3 - 10)
4. **PUBLIC QUESTION TIME**
5. **POLICE SCOTLAND UPDATE** (Pages 11 - 12)
Report by Inspector Roderick MacNeill, Police Scotland
6. **HERMITAGE ACADEMY SCHOOL REPORT** (Pages 13 - 24)
Report by Head Teacher
7. **ARGYLL & BUTE HSCP ANNUAL PERFORMANCE REPORT 2019/20** (Pages 25 - 74)
Report by Head of Strategic Planning and Performance, Argyll and Bute Health & Social Care Partnership
8. **MONITORING OF SUPPORTING COMMUNITIES FUND 2019/20** (Pages 75 - 84)
Report by Chief Executive
9. **APPOINTMENTS TO AREA COMMUNITY PLANNING GROUP** (Pages 85 - 86)

Report by Executive Director with Responsibility for Legal and Regulatory Support

10. AREA SCORECARD - FQ1 AND FQ2 2020-21 (Pages 87 - 104)

Report by Executive Director with Responsibility for Performance and Improvement

REPORTS FOR NOTING

11. HELENSBURGH AND LOMOND AREA COMMITTEE WORKPLAN (Pages 105 - 110)

ITEM FOR CONSIDERATION

12. HELENSBURGH, CARDROSS AND DUMBARTON CYCLEPATH UPDATE COVERING REPORT (Pages 111 - 116)

Report by Executive Director with Responsibility for Development and Economic Growth

(a) Helensburgh, Cardross & Dumbarton Cyclepath Programme (Pages 117 - 118)

Report by Executive Director with Responsibility for Development and Economic Growth

E1 (b) Helensburgh, Cardross and Dumbarton Cyclepath - Update on Land Negotiations (Pages 119 - 120)

Exempt Appendix by Executive Director with Responsibility for Development and Economic Growth

The Committee will be asked to pass a resolution in terms of Section 50(A)(4) of the Local Government (Scotland) Act 1973 to exclude the public for items of business with an "E" on the grounds that it is likely to involve the disclosure of exempt information as defined in the appropriate paragraph of Part I of Schedule 7a to the Local Government (Scotland) Act 1973.

The appropriate paragraph is:-

E1 – Paragraph 6 - Information relating to the financial or business affairs of any particular person (other than the authority)

Helensburgh & Lomond Area Committee

Councillor Lorna Douglas	Councillor George Freeman
Councillor Graham Hardie (Vice-Chair)	
Councillor David Kinniburgh	Councillor Barbara Morgan (Chair)
Councillor Aileen Morton	Councillor Gary Mulvaney
Councillor Iain Paterson	Councillor Richard Trail

Contact: Iona Campbell, Senior Committee Assistant - 01436 658 801

**MINUTES of MEETING of HELENSBURGH & LOMOND AREA COMMITTEE held via SKYPE
on THURSDAY, 17 SEPTEMBER 2020**

- Present:**
- | | |
|-----------------------------------|--------------------------|
| Councillor Lorna Douglas | Councillor Aileen Morton |
| Councillor George Freeman | Councillor Gary Mulvaney |
| Councillor Graham Hardie | Councillor Iain Paterson |
| Councillor David Kinniburgh | Councillor Richard Trail |
| Councillor Barbara Morgan (Chair) | |
- Attending:**
- Jim Smith, Head of Roads and Infrastructure Services, Argyll and Bute Council
 Shona Barton, Committee Manager, Argyll and Bute Council
 Stuart Watson, Assistant Network and Standards Manager, Argyll and Bute Council
 Andrew Collins, Regeneration Project Manager, Argyll and Bute Council
 Pauline Inglis, Education Officer, Argyll and Bute Council
 Colin Young, Senior Transportation Delivery Officer, Argyll and Bute Council
 Dr Nicola Schinaia, Associate Director of Public Health, Argyll and Bute Health and Social Care Partnership
 Inspector Roderick MacNeill, Police Scotland
 Cathal Heron, Regional Director, Heron Brothers
 Shauna Young, Corporate Responsibility Manager, Heron Brothers

The Chair advised that an additional report had been submitted and required to be dealt with as a matter of urgency by reason that an urgent decision is required on this matter to allow for the process to begin which will allow the Traffic Regulation Order to be made permanent. The Committee agreed to consider this as an urgent item. The Chair advised that she would consider this item following item 11 of the agenda. The minute reflects the order in which the items were discussed.

1. APOLOGIES

The Chair welcomed everyone to the meeting.

There were apologies for absence intimated on behalf of Councillor Ellen Morton.

2. DECLARATIONS OF INTEREST

There were no declarations of interest.

3. MINUTES

(a) Minute of the Meeting of the Helensburgh and Lomond Area Committee held on Thursday, 19 March 2020

The Minute of the Meeting of the Helensburgh and Lomond Area Committee, held on Thursday, 19 March 2020 was approved as a true record.

(b) **Minute of the Special Meeting of the Helensburgh and Lomond Area Committee held on Wednesday, 24 June 2020**

The Minute of the Special Meeting of the Helensburgh and Lomond Area Committee, held on Wednesday, 24 June 2020 was approved as a true record.

4. PUBLIC QUESTION TIME

Chris Smith asked the Committee if they had an opinion on the recent planning application for Portincaple and if there were plans in place for further development at Portincaple as it appeared from the planning departments actions that assumptions had been made that Portincaple was available for development. It was noted that the Area Committee do not have a role in planning and a number of the Members of the Area Committee were Members of the Planning, Protective Services and Licencing Committee and could not make any comment in relation to the application. There were no further comments made by the Committee.

5. HELENSBURGH WATERFRONT DEVELOPMENT PRESENTATION

The Committee gave consideration to a presentation from the Contracts Manager and Community Benefits Manager, Heron Brothers, in relation to the Helensburgh Waterfront Development.

Decision

The Helensburgh and Lomond Area Committee noted the contents of the presentation and information provided.

(Reference: Presentation by Contracts Manager and Community Benefits Manager, Heron Brothers, submitted)

6. POLICE SCOTLAND UPDATE

The Committee gave consideration to a report and verbal update from Inspector Roderick MacNeill updating Members on current issues being dealt with by Police Scotland in the Helensburgh and Lomond area.

Decision

The Helensburgh and Lomond Area Committee noted the contents of the report and information provided.

(Reference: Report by Inspector Roderick MacNeill, Police Scotland, submitted)

Councillor Paterson left the meeting at this point.

7. HSCP - PERFORMANCE REPORT FOR FQ4 (2019/20) & COVID PUBLIC HEALTH UPDATE

The Committee gave consideration to reports summarising performance data for the Argyll & Bute Health and Social Care Partnership during Financial Quarter 4 of the 2019-2020 reporting period and providing an update on Covid-19 public health.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. to note the FQ4 report performance data National Health and Well Being scorecard performance for the FQ4 (19/20) reporting period;
2. to note the considerable impact COVID-19 restriction had with regards to available data;
3. to note the COVID-19 reflection on performance for FQ1 and 2 of 2020; and
4. to note the Public Health Update.

(Reference: Reports by Head of Strategic Planning and Performance, Health and Social Care Partnership and Associate Director of Public Health, Health and Social Care Partnership, dated 17 September 2020, submitted)

8. PRIMARY SCHOOL REPORT 2019/20 - HELENSBURGH AND LOMOND

The Committee gave consideration to a report detailing key information in relation to primary schools in the Helensburgh and Lomond area and highlighting activities undertaken during the session 2019-20.

Decision

The Helensburgh and Lomond Area Committee agreed to note the contents of the report.

(Reference: Report by Executive Director with Responsibility for Education, dated 17 September 2020, submitted)

*** 9. LUSS CAR PARK - TEMPORARY PORTALOO FACILITIES**

The Committee gave consideration to a report detailing income lost due to the temporary siting of portaloos at Luss car park.

Decision

The Helensburgh and Lomond Area Committee noted that the National Park intends to remove the temporary toilet facilities by the End of October 2020. Therefore, the Committee recommends to Council that the charges for the parking bays continue to be waived until the toilets are removed but not beyond 31st October 2020.

(Reference: Report by Executive Director with Responsibility for Roads and Infrastructure Services, dated 17 September 2020, submitted)

10. ROADS AND AMENITIES REVENUE AND CAPITAL UPDATE

The Committee gave consideration to a report providing a summary of activity carried out by the Roads and Infrastructure Services' operations team across the Helensburgh and Lomond area.

Decision

The Helensburgh and Lomond Area Committee agreed to note the contents of the report.

(Reference: Report by Executive Director with Responsibility for Roads and Infrastructure Services, dated 17 September 2020, submitted)

11. RECYCLING PERFORMANCE

The Committee gave consideration to a report detailing the council's recycling and landfill diversion performance and providing information around national policy, targets and regulations which are likely to impact on future performance.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. to note the contents of the report; and
2. to note the national policy drivers that will likely impact over the next few years.

(Reference: Report by Executive Director with Responsibility for Roads and Infrastructure Services, dated 17 September 2020, submitted)

12. PROPOSED LUSS TRAFFIC REGULATION ORDER

The Committee gave consideration to a report providing an update on the development of new proposals for the traffic issues in Luss and proposing to Members two draft Orders, one covering traffic management and one on speed restrictions, to go forward into the formal TRO process.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. to note the complexities of the issue and endorse the work to reach this point;
2. to note the success of the recent changes taken forward in response to Covid-19 in the Temporary Traffic Regulation Order;
3. that both of the draft Orders produced by the Community Council appended to the report should be the basis on which the proposed TRO is taken forward via the formal Traffic Regulation Order process, a key part of which involves community consultation, with the following amendments:
 - (i) Permit charges to be adjusted in line with the Council's current scheme of fees and charges
 - (ii) Reference to PCNs removed;
4. to delegate authority to the Head of Roads and Infrastructure Services to, prior to advertising, make any such technical changes to the forms of control in the draft Orders as he considers would be appropriate and competent, while retaining the principles contained within the current draft;
5. to note that officers will engage with ACHA in respect of the adopted car parking area within Murray Place, which is not under the Council's ownership or control;
6. to note that advertising the draft Orders is the start of the process and that final proposals will come back to the Area Committee for approval; and

7. that officers should consider restricting street traders from operating within the proposed TRO area at Luss.

(Reference: Report by Executive Director with Responsibility for Roads and Infrastructure Services, dated 17 September 2020, submitted)

13. CHARITABLE TRUSTS, BEQUESTS AND TRUST FUNDS

The Committee gave consideration to a report detailing proposals in relation to the ongoing management of the 8 Charitable Trusts, Bequests and Trust Funds for which the Helensburgh and Lomond Area Committee are Trustees and seeking agreement on distribution proposals.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. that the charities and trust funds are awarded on the basis outlined in paragraph 7.1 of the report;
2. the distribution of the Charitable Trusts, Bequests and Trust Funds outlined within Appendix 1 of the report; and
3. to note that proposals for the remaining Bequests and Trust Funds with no defined distribution will be brought to a future meeting of the Area Committee.

(Reference: Report by Executive Director with Responsibility for Legal and Regulatory Support, dated 17 September 2020, submitted)

14. REQUEST FOR FINANCIAL ASSISTANCE - HELENSBURGH AND DISTRICT TWINNING ASSOCIATION

The Committee gave consideration to a report outlining a request for financial assistance from the Helensburgh and Lomond Area Committee Twinning Budget 2020/21 from the Helensburgh and District Twinning Association which would assist with the costs of a visit from residents of Thouars to Helensburgh scheduled to take place in 2021.

Decision

The Helensburgh and Lomond Area Committee agreed to grant the sum of £833 from the Twinning Budget for 2020/21 towards the costs of the visit.

Having moved an Amendment, which failed to find a seconder, Councillor George Freeman asked for his dissent from the foregoing decision to be recorded.

(Reference: Report by Executive Director with Responsibility for Legal and Regulatory Support, dated 17 September 2020, submitted)

15. AREA SCORECARD FQ4 2019/20

The Committee gave consideration to a report presenting the Area Report and Scorecard for Financial Quarter 4 2019/20 (January-March 2020) and illustrating the agreed performance measures.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. to note the performance presented on the Scorecard and supporting commentary;
2. that upon receipt of the Quarterly Performance Report the Area Committee contact either the Responsible Named Officer or Sonya Thomas with any queries; and
3. to note that work is ongoing and to respond to Sonya Thomas with requests or comments regarding the layout and format of the Report and Scorecard.

(Reference: Report by Executive Director with Responsibility for Performance and Improvement, dated 17 September 2020, submitted)

16. HELENSBURGH, CARDROSS AND DUMBARTON CYCLEPATH UPDATE

The Committee gave consideration to a report detailing the progress made since 19 March 2020 in relation to the delivery of a dedicated, high quality walking and cycle route linking Helensburgh, Cardross and Dumbarton.

Decision

The Helensburgh and Lomond Area Committee agreed:

1. to note and welcome the progress made with construction of the 285m section of the route in Cardross Park and the Geilston Burn; and
2. to note and particularly welcome the confirmation from Sustrans of the award of 2020/21 funding to progress the design of the remainder of the route linking Colgrain to the Geilston Burn and Ferry Road, Cardross to Dumbarton.

(Reference: Report by Executive Director with Responsibility for Development and Economic Growth, dated 17 September 2020, submitted)

17. COMMERCIAL SERVICES PROPERTY UPDATE

A report providing Members with an update on the development and sale of properties in the Helensburgh and Lomond area was before the Committee for noting.

Decision

The Helensburgh and Lomond Area Committee noted the contents of the report.

(Reference: Report by Executive Director with responsibility for Commercial Services, dated 17 September 2020, submitted)

18. MARINE INFRASTRUCTURE - DUNOON AND KILCREGGAN

A report providing Members with an update on future plans for the 'Dunoon to Gourock' and 'Kilcreggan to Gourock' ferry services along with potential effects on the Council's marine infrastructure at Dunoon and Kilcreggan was before the Committee for noting.

Decision

The Helensburgh and Lomond Area Committee noted the contents of the report.

(Reference: Report by Executive Director with responsibility for Roads and Infrastructure Services, dated 17 September 2020, submitted)

19. HELENSBURGH AND LOMOND AREA COMMITTEE WORKPLAN

The Helensburgh and Lomond Area Committee Workplan as at September 2020 was before the Committee for noting.

Decision

The Helensburgh and Lomond Area Committee noted the contents of the workplan.

(Reference: Helensburgh and Lomond Area Committee Workplan, submitted)

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H&L Area Committee Meeting Police Report December 2020

Crime figures, in general, remain constant.

Increase in frauds, online, over the phone, various MO's, advice and guidance is being, and has been, advertised and given out.

National Park area has quietened down, end of season multi-agency meetings are continuing re any residual business from this season and early preparations for next year.

Police resources in H&L remain very favourable. New Divisional problem Solving Teams now in place which are a divisional resource and can be called upon when and if required.

Currently working on a licensed premise policing plan to police and monitor licensed premises during this period when A&B sits at tier 2 and WDC sits at tier 4. Working with premises to minimise and deter visitors from out with A&B as per the new legislation. Will be better placed to comment in a week or so.

Tier 4 restrictions start today at WDC, monitoring situation to ensure officers are engaging to ensure legislation is adhered to. Amount of potential displacement of persons not known at this time.

ASB group meetings and all partnership matters have continued without issue over the period of restrictions.

New CCTV camera being trialled at West Clyde Street.

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School Profile 2019/20

Hermitage Academy Area Committee Report November 2020

School Profile 2019/20

School Name Hermitage Academy
School Address Cardross Road, Helensburgh G84 7LA
Head Teacher Robert Williamson

CONTEXT OF THE SCHOOL

Hermitage Academy in Helensburgh is the largest school in Argyll and Bute and currently has 1296 pupils and is one of the largest schools in Scotland. The school serves the town of Helensburgh and the villages of Cardross, Rhu, Shandon, Garelochhead, Rosneath, Kilcreggan, Cove, Tarbet, Arrochar and Luss. It has a very large geographical catchment area and although no longer classified as a Rural School by the Scottish Government it has a substantial number of pupils who stay in rural areas. The school is a truly comprehensive school, with a very diverse catchment area. It has a town of 16,000 people, a large number of villages with sizeable populations and some more isolated settlements. It also has a considerable number of pupils who stay on farms and other rural dwellings. The school has pupils in every decile of the Scottish Index of Multiple Deprivation (SIMD).

Due to the Royal Navy Base at Faslane on the Gare Loch there is a considerable number of pupils who are from an Armed Forces background. There have also been a number of movements of pupils due to redeployment of the submarine fleet from the south of England to Faslane.

Curricular Vision

Hermitage Academy aims to provide an education for all of our young people which will enable them to:
Achieve their potential, experience success and be well prepared for life beyond school.

Values are enshrined in our **SHARE IT** strategy: Support, Hard Work, Ambition, Respect, Excellence, Integrity and Thoughtfulness.

We are proud to be a **Rights Respecting School**.

Recognising Wider Achievement

Hermitage Academy recognises wider achievement wherever possible and has a significant range of strategies to embrace this:
Rights Respecting School, Level 1.

In June we launched Youth Awards in partnership with Youth Scotland. This encouraged pupils from P7 transition years to S6 to participate in accrediting wider learning. Training sessions for pupils as well as parents during lockdown ensured that the whole school community could participate.

Leadership Academy, continues to encourage participation in Wider Achievement across the school

Children's University. We have 99 pupils signed up to this across S1 & S2

Subs in Schools pilot project

Lego competition: continued success having been invited to the national finals. Unfortunately cancelled due to Covid.

Virtual Summer Concert, planned virtual Christmas Concert

Investors in Young People (first in Scotland) Review.

Increased access to/uptake of a variety of courses

Course	SCQF Level	No. Learners Achieved
Maritime Skills	5	9
Hairdressing	5	4
Hairdressing	4	12
Make-Up Skills	5	5
Beauty Skills	4	17
Early Education and Childcare	5	9
Early Education and Childcare	4	11
		Total 67

Engagement in courses

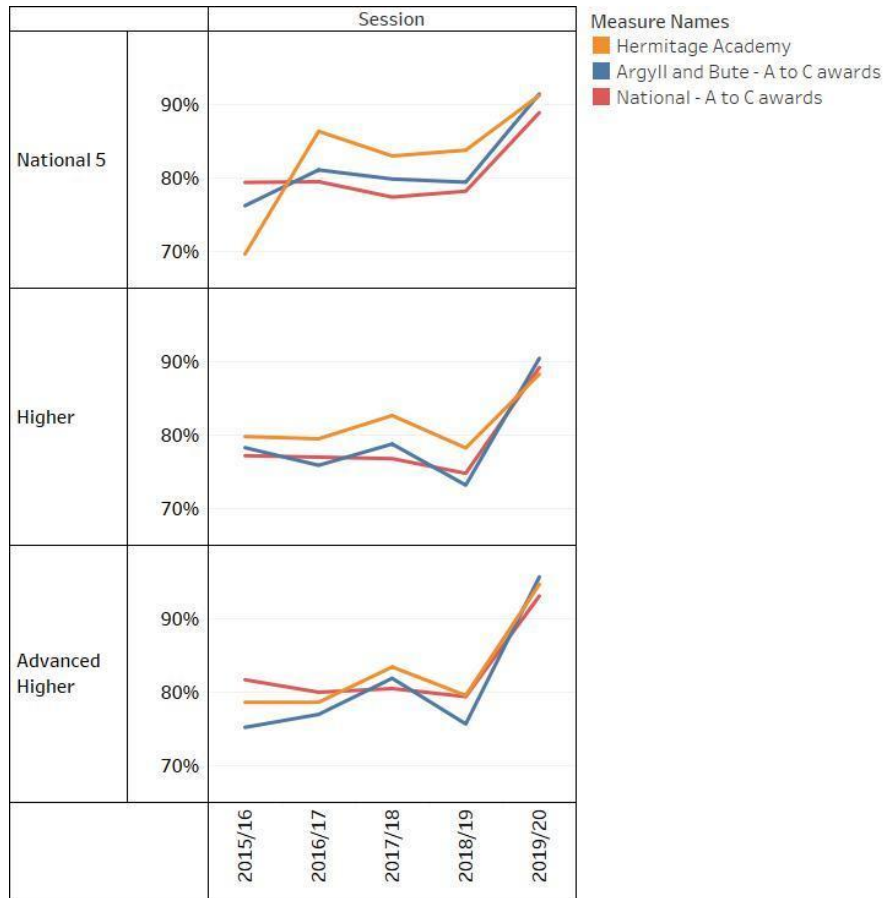
2016-17	2017-18	2020-2021
<p>Cosmetology & Hairdressing 5 S6 Students completing units in both courses</p>	<p>Cosmetology S4 Level 4 23 Students S5/6 Level 6 15 Students</p> <p>Early Education & Childcare S4 Level 4 13 Students S5/6 Level 5 16 Students</p> <p>Hairdressing Level 4 8 Students Level 5 8 Students</p> <p>Maritime S5/6 Level 4 5 Students</p> <p>Rural Skills Level 4 3 Students Level 5 9 Students</p> <p>Introduction to Psychology 5 Students</p> <p>HNC Business 1 Student</p>	<p>Beauty/Make-up Skills S3 (Introduction): 21 students S4 Level 4: 12 students S5/6 Level 5: 6 students Level 6: 12 students</p> <p>Early Education & Childcare S3 (Introduction): 24 students S4 Level 4: 20 Students S5/6 Level 5: 9 Students</p> <p>Hairdressing Level 4: 10 Students Level 5: 14 Students</p> <p>Maritime S5/6 Level 4: 10 Students</p> <p>FA Engineering S6 Level 6: 2 students</p> <p>FA Social Services Children & Young People S5/6 Level 6: 6 students</p> <p>FA Creative & Digital Media S5 Level 5: 7 students (+1 from Dumbarton Academy)</p> <p>YASS S6 Level 7: 16 students</p>

School Roll

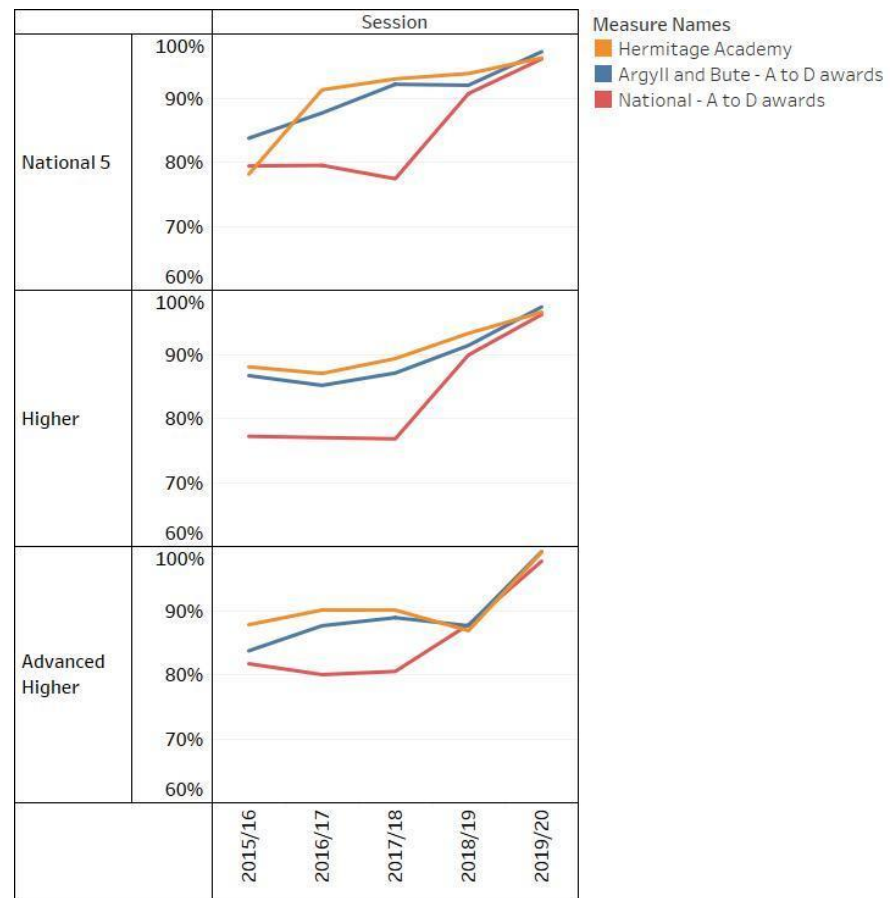
School roll as at Census	S4	S5	S6
2019/20	229	205	135

SQA Results

Levels A to C



Levels A to D



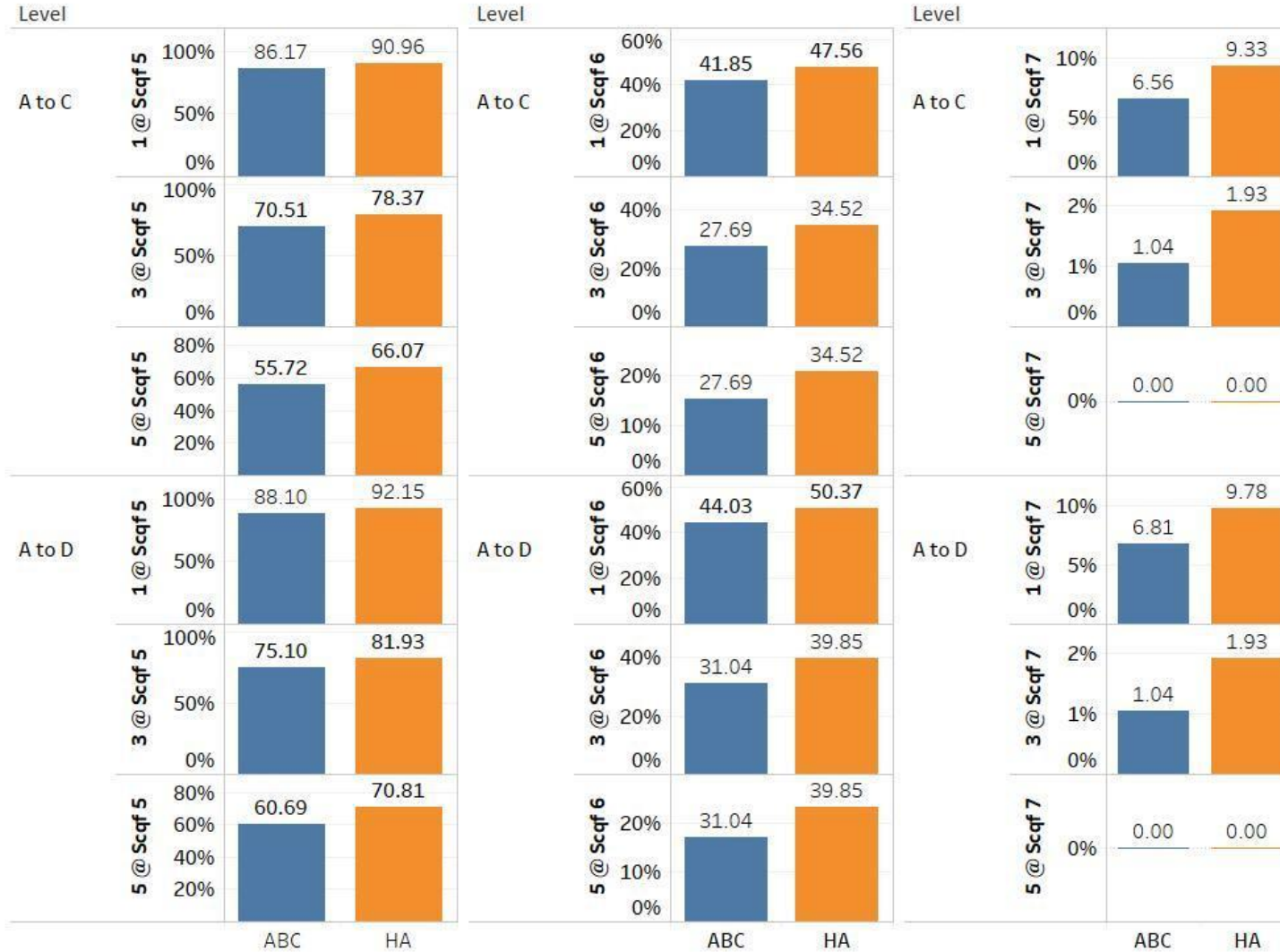
Breadth & Depth

The chart below shows SQA Breadth and Depth information for S4 to S6 (Acc)

SCQF - Level 5

SCQF - Level 6

SCQF - Level 7



Pupil and staff well-being

During lockdown we introduced a number of procedures to ensure young people were safe:

School recovery guidance – hand sanitisers, face coverings, one-way system, staggered break and lunch times, different entrances etc.

Full consultation with staff associations immediately and weekly since August.

Risk assessment available to all on website

Working Time agreement – flexible time for staff

Guidance staff – making regular contact with young people who continue to remain absent

Staff Well-being group – staff group looking at staff mental health and how best to support colleagues- plan in place

Collegiate and staff development – all inputs being delivered virtually, where possible

School Improvement plan priorities – these have been reviewed to support staff workload

Covid bulletin issued weekly

SLT high visibility

Lunchtime routines for dry and wet days

Widespread signage re. distancing from staff, corridor movement, mask wearing

Supporting Pupil Wellbeing

HWB Curriculum Aug -Nov - focus on Supporting Mental Health & Resilience

Facilitation of School Health/H4U listening/counselling services - virtual and face to face

Guidance/Pupil Support contact with pupil/families - virtual where possible

Identification of 'vulnerable' pupils during lockdown. Implementation of tracking of vulnerable pupils process. Including weekly wellbeing surveys.

Creation of House Teams for each pupil/family.

Blended and home Learning

All teaching sets have a 'Google Classroom' and material is uploaded to this on a regular basis. Pupils can communicate via this resource and pupils temporarily isolating who are fit and healthy can access lesson resources. A blended 'week about' House based model is available as a contingency, should schools be forced into a limited capacity situation, with distancing and the school is in a position to deliver all courses through Google Classroom, should full closure take place at any time.

School successes

Results/Wider Achievement

Foundation Apprenticeship Developments

Youth Achievement Awards

IYP review

Contingency planning

Hermitage Academy

November 2020

Covid-19 Contingency Planning

Level	Description	Actions / Support / Solutions
1	<p>SCHOOL FULLY OPERATIONAL</p> <ul style="list-style-type: none"> School fully operational within normal staffing capacity. 	<p>a) Ongoing support from central team staff as required</p> <p>b) School support team actively refresh supply list on a regular basis</p> <p>c) HT shares approved advanced contingency plans with parents/carers (eg explain how schools would utilise blended learning – for example by class/year group/house group)</p> <p>d) HT continues to submit weekly response detailing staff absence and current contingency level</p>
2	<p>SCHOOL FULLY OPERATIONAL – WITH REDUCED STAFF CAPACITY</p> <ul style="list-style-type: none"> School fully open for all pupils and is managing to operate on a reduced staffing capacity. 	<p>a) HT arranges appropriate supply cover</p> <p>b) Help available with supply list from central school support staff – argyllhouse-reception@argyll-bute.gov.uk</p> <p>c) HT seeks permission from D Morgan (EM) for use of code 73 to cover Covid related absence cost – douglas.morgan2@argyll-bute.gov.uk</p>
3	<p>SCHOOL FULLY OPERATIONAL REDUCED STAFF CAPACITY – POTENTIAL RISK OF LIMITING PUPIL NUMBERS</p> <ul style="list-style-type: none"> HT has identified the potential need to limit the number of pupils attending school due to reduced staffing capacity. Notify risk to EO/EM. 	<p>a) HT revisits all options at level 2</p> <p>b) HT makes contact with EO/EM to discuss staffing situation and identify year group/stages that would learn from home if necessary</p> <p>c) HTs identify issues relating to pupil access to digital devices and connectivity at home</p> <p>d) HT/EO/EM explore short term redeployment of staff from other establishments/teams. HOS consulted</p> <p>e) HT/EO/EM explore possibility of pupils attending alternative establishment in the short term. HOS consulted</p> <p>f) Director and Comms Team alerted to potential risk.</p>

<p>4</p>	<p>SCHOOL UNABLE TO OPEN FULLY -REDUCED STAFF CAPACITY – PUPIL NUMBERS LIMITED</p> <ul style="list-style-type: none"> Identify and initiate rotational blended learning model maximising pupil face to face learning. Staff absent but who are able to work from home - support online learning (refer to blended learning guidance). 	<ul style="list-style-type: none"> a) HT revisits all options at levels 1-3. b) Director, HOS and Comms Team updated c) Policy Lead and Elected Members informed by Directorate d) HT use of school closure/re-opening flowchart (appendix 1) to alert all necessary contacts of partial school closure and move to rotational blended learning (refer to previously shared contingency plan at 1c) e) Blended learning model maximising pupil face to face learning established and shared with EO/EM/HOS f) HT/EO/EM actively repeat levels 1-3 in an attempt to increase staff capacity
<p>5</p>	<p>SCHOOL UNABLE TO OPEN FULLY - FURTHER REDUCTION IN PUPIL NUMBERS REQUIRED</p> <ul style="list-style-type: none"> Requirement to limit pupil numbers further due to reduction in staffing capacity or updated national guidance on social distancing. Revised rotational blended learning model maximising pupil face to face learning identified. Staff absent but who are able to work from home - support online learning using blended learning guidance. 	<ul style="list-style-type: none"> a) HT revisits all options from levels 1-4. b) Director, HOS and Comms Team updated c) Policy Lead and Elected Members informed by Directorate d) HT use of school closure/re-opening flowchart (appendix 1) to alert all necessary contacts of increased partial school closure and move to updated rotational blended learning model e) Blended learning model that maximises pupil face to face learning and meets updated local and national guidance on Covid-19 established and shared with EO/EM/HOS f) HT/EO/EM actively repeat levels 1-3 in an attempt to increase staff capacity as appropriate
<p>6</p>	<p>SCHOOL CLOSED TO ALL PUPILS AND STAFF</p> <ul style="list-style-type: none"> School closed to all pupils and staff due to further reduction in staffing capacity or updated National Guidance. Home learning for all young people supported by school staff using blended learning guidance. Welfare contact between school staff and families. Priority given to those identified as vulnerable. Welfare contact between school and staff that are at home. Potential hub support for key worker children re-established. 	<ul style="list-style-type: none"> a) HT has explored all options from levels 2-5 b) Director, HOS and Comms Team updated c) Policy Lead and Elected Members informed by Directorate d) HT use of school closure/re-opening flowchart (appendix 1) to alert all necessary contacts of full school closure e) HTs/EO/EM/HOS continue to work in partnership to ensure that home learning provision is in place and monitored effectively f) HT/EO/EM/HOS actively revisit levels 1-3 in an attempt to increase staff capacity g) All parents / carers sent contact details for support services including the Educational Psychology Service h) In the event of return to lockdown: Covid Recovery workstreams fully re-established to support schools and respond efficiently to updated national and local guidance. i) Ongoing partnership planning in preparation for return to school

Overview

Measure	15/16	16/17	17/18	18/19	19/20	% change in Roll over 5 years ¹
Roll (as at census)	1331	1296	1260	1254	1217	8.56%
Clothing and Footwear Grant (number of pupils) ³	161	151	130	139	162	
Clothing and Footwear Grant (% of number of pupils)	12.1%	11.7%	10.32%	10.87%	13.11%	
Clothing and Footwear Grant (%) - Authority Average ²	14.31%	12.98%	11.77%	14.59%	15.96%	
Free School Meals (number of pupils) ³	132	118	108	97	98	
Free School Meals (% of number of pupils)	9.92%	9.1%	8.57%	7.58%	7.92%	
Free School Meals (%) - Authority Average ²	11.2%	10.53%	9.45%	11.31%	10.75%	
Free School Meal - National Average for Secondary Schools (%) ⁴	14.2%	14.1%	14.40%	15%	Not available	

Attendance, Absence and Exclusions⁸

Measure	15/16	16/17	17/18	18/19	19/20	Range of Attendance (%) over 5 years ⁸
Attendance:						
Attendance (% of school roll)	91.62%	92.56%	92.63%	91.67%	90.83%	-0.79%
Authorised Absence (% of school roll) ⁸	5.06%	5.26%	4.82%	5.07%	6.01%	
Unauthorised Absence (% of school roll)	3.31%	2.16%	2.52%	3.24%	3.11%	
Attendance Number of Pupils (%) - Authority Average ¹	91.8%	91.58%	91.24%	90.3%	90.01%	
Attendance Number of Pupils (%) - National Average ⁹	not collated	91.2%	Not collated	90.7%	Not collated	

Measure	15/16	16/17	17/18	18/19	19/20 ⁶
Exclusions:					
Exclusion Openings - number	81	102	120	88	143
Exclusion Incidents - number	13	16	31	29	46
Number of Pupils	9	14	25	23	37

Footnotes

¹ Please note the % change in Roll over 5 years shows the percentage change in roll figures from 2015/2016 to 2019/2020 and is not an average.

² averages based on Secondary only

³ FSMCG % based on whole school figures for session

⁴ National average for FSM taken from School Healthy Living Survey Statistics 2019

⁵ Attendance, Absence and Exclusion information is now collected on a biennial basis by Scottish Government.

⁶ Exclusion data taken from Business Intelligence – Session 2019 – EXC 6 Individual School Cumulative Report

⁷ attendance change figure shows percentage of change and is not an average

⁸ Authorised absence includes bereavement, short – term exceptional domestic situations, religious observance, weddings of immediate family. Unauthorised absence includes truancy, unexplained absence and most family holidays during term time. Attendance and absence is outlined in Management Circular 3.03.

⁹ National attendance statistics taken from Scottish Government Summary statistics for schools in Scotland.

ARGYLL AND BUTE COUNCIL**HELENSBURGH AND
LOMOND AREA COMMITTEE****HEALTH AND SOCIAL CARE PARTNERSHIP****17 DECEMBER 2020**

Argyll & Bute HSCP Annual Performance Report 2019/20

1.0 EXECUTIVE SUMMARY

The required content of the Argyll & Bute Health and Social Care Partnership Annual Performance Report is set out in The Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014

<http://www.legislation.gov.uk/ssi/2014/326/contents/made>

As a minimum the annual performance report must include:

- Assessment of performance in relation to the 9 National Health and Wellbeing Outcomes
- Assessment of performance in relation to integration delivery principles
- Assessment of performance in relation to the Partnership's Strategic Plan
- Comparison between the reporting year and previous reporting years, up to a maximum of 5 years. (This does not apply in the first reporting year)
- Financial performance and Best Value
- Information about Localities
- Details of Service Inspections
- Details of any review of the Strategic Plan.

Due to the impact of the COVID-19 pandemic on the services and supporting services we are unable to produce the Annual Performance Report for 2019/20 in its customary format and content. As such the report appended is a summary report and is enabled by the legislation.

ARGYLL AND BUTE COUNCIL

**MID ARGYLL, KINTYRE AND THE
ISLANDS AREA COMMITTEE**

HEALTH AND SOCIAL CARE PARTNERSHIP

2 DECEMBER 2020

Argyll & Bute HSCP Annual Performance Report 2019/20

2.0 INTRODUCTION

- 2.1 Robust performance management arrangements are critical to the delivery of the HSCP Strategic Plan. There is a legislative requirement to provide an annual report. Coronavirus legislation has taken into account the focus on pandemic response and provided the facility for a shorter annual report at this time which takes account of the change of activity.
- 2.2 The Health and Social Care Partnership has focused on the pandemic response and in line with government guidance sought to remobilise services as soon as was feasible. Remobilised service provision is monitored weekly to prioritise delivery.

3.0 RECOMMENDATIONS

- 3.1 Members are asked to note and comment on the Annual Performance Report for the Health and Social Care Partnership for the year 2019/20.

4.0 DETAIL

4.1 In accordance with the Coronavirus (Scotland) Act 2020, we have postponed the publication of our Annual Performance Report for 2019/20. This decision was taken at the Integration Joint Board meeting in October.

4.2 The Annual Performance report for 2019/20 is therefore of necessity a lighter content and further National Services Scotland (NSS) has advised that due to the impact of Covid 19, official performance information is incomplete for the Financial Year 2019/2020 and that Partnerships should use the 2019 calendar year for reporting, but to still compare against historical data for financial years.

4.3 The Annual Performance report for 2019/20 has been presented to the Strategic Planning Group, who have considered it and recommended it for approval to the IJB.

5.0 CONCLUSION

5.1 The Covid 19 response has had a significant impact on:

- the capacity of officers to produce a 2019/2020 IJB Annual Performance report to the legislated 31st July 2020 timescale
- The 2019/2020 Annual Performance report presented to the IJB demonstrate progress against the commitments laid out in the Strategic Plan for Health and Social Care.
- There remain challenges to meet some of the performance standards particularly emergency demand and waiting times.
- Publishing the IJB Annual Performance Report 2019/20 later will fulfil the IJB's reporting requirements under the 2014 Act

6.0 IMPLICATIONS

6.1 Policy – No policy implications

6.2 Financial - documented in the report

6.3 Legal -as noted

6.4 HR - documented in the report

6.5 Fairer Scotland Duty: none specific

6.6 Equalities – no action required for this report

6.7 Socio-economic Duty – no action required for this report

6.8 Islands – no action required for this report

6.9 Risk -Impact on strategic and operational risks will be assessed within existing risk assessment processes.

6.10 Customer Service – none

Stephen Whiston

Head of Strategic Planning

19 November 2020

For further information contact: Stephen Whiston

Stephen.whiston@nhs.scot

APPENDICES

Appendix 1 Argyll & Bute HSCP Annual Performance Report 2019-20

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People in Argyll & Bute will live longer, healthier independent lives

**Argyll & Bute Health &
Social Care Partnership**

**Annual Performance
Report 2019/20**

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Foreword

We are pleased to present Argyll and Bute HSCP's fourth Annual Performance report for 2019/20. This report continues to illustrate the significant progress we are making on providing integrated services which focus on keeping people healthy, safe and well, but also providing care and treatment quickly when needed.

Our staff and health and care partners continue to rise to these challenges as shown in the high quality of services we provide and the improved outcomes people are experiencing.

From March this year COVID-19 has affected service delivery across the HSCP and in-turn the usual delivery date of September for the publication of this Annual Performance Report. At the August meeting of the Integration Joint Board, the Chief Officer agreed to delay the publication date for the annual performance report until its meeting in November in exercise of the power granted to public authorities under the Coronavirus (Scotland) Act 2020 to do so. The staff who would have usually been involved in its preparation have been engaged in supporting the Covid-19 pandemic response and the result of this is a nationally agreed reduced version of the usual annual report format.

The Covid-19 pandemic has created an opportunity to speed up remote working, which has significantly reduced travel and reduced printing (through move to paperless office), and plans for the new normal intend to continue with extensive use of Near Me for remote consultations where this is appropriate, and continued use and expansion of Microsoft Teams.

Finally, we would like to thank all HSCP staff, partners, carers and volunteers for their continued dedication and commitment, going the extra mile when most needed.



**Joanna MacDonald,
Chief Officer Argyll &
Bute HSCP**



**Kieron Green, Chair of
Argyll & Bute Integration
Joint Board**

Introduction

Welcome to the fourth Annual Performance Report from Argyll and Bute Health and Social Care Partnership (HSCP). This report summarises what we have achieved in the last calendar year from 1st January to 31st December 2019 this is different from previous years when we have used data across the financial quarters. The reason for this is a direct effect of the redirection of national analytical services to support the COVID-19 reporting process which resulted in data lag across the last financial quarter data period. It was agreed in consultation with all HSCP's that calendar data would provide the most robust data to use across this report.

The Partnership has responsibility for the planning and delivery of all health and social care services to adults and children within Argyll and Bute. We routinely monitor our performance to ensure we are delivering services that meet the needs of our residents, and also which identifies areas where require improvement is required. All Health and Social Care Partnerships are required by the Public Bodies (Joint Working) (Scotland) Act 2014 to publish an Annual Performance Report.

Our report aims to measure the progress we have made, specifically in relation to

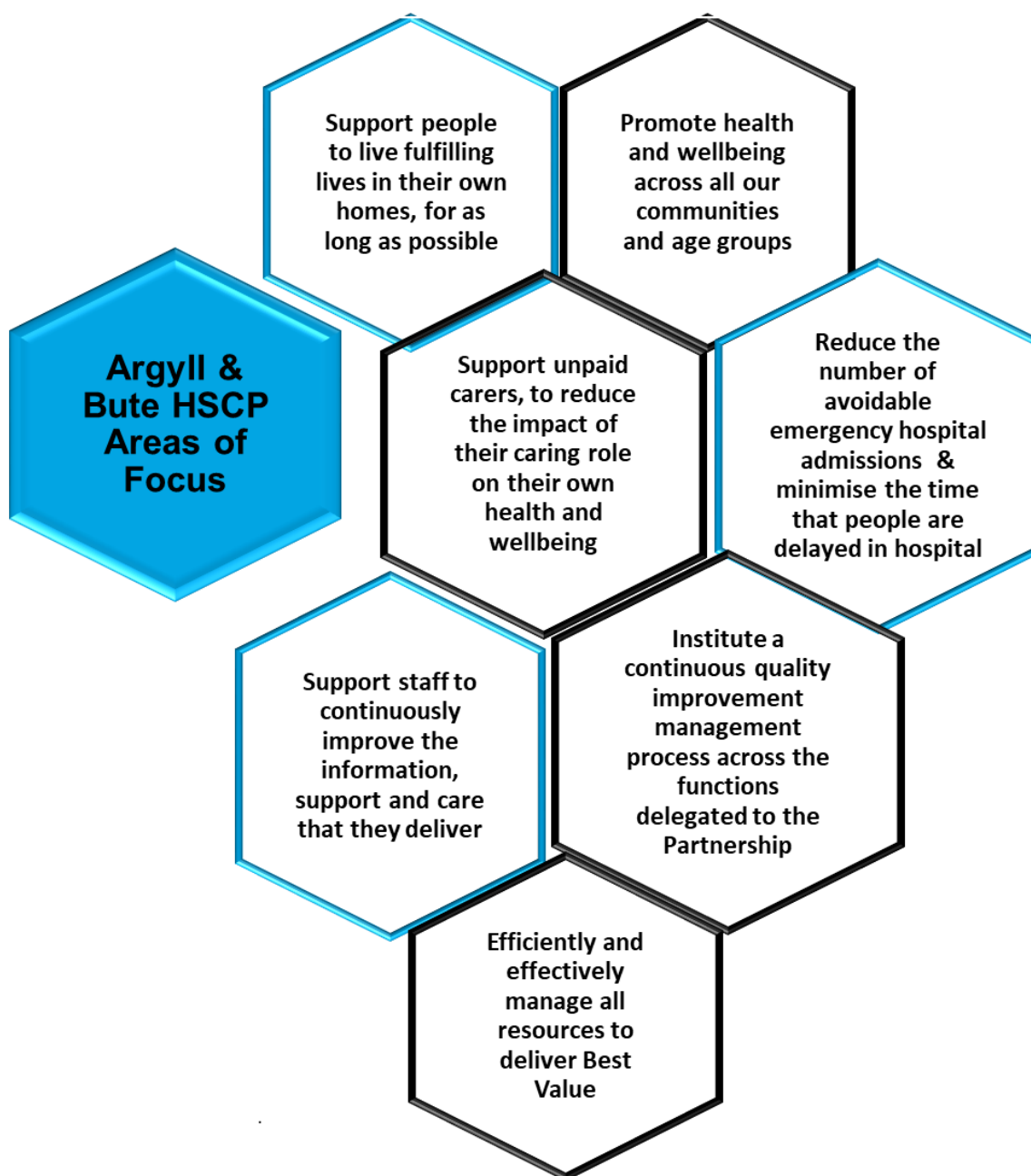
- National Health & Wellbeing Outcome Indicators
- Finance & Best Value
- Inspection of Services

The full breakdown of our performance against the nine National Health and Wellbeing Outcomes over the past 4 years is available in Appendix 1. This includes all national and local indicators which we have used to measure progress. How our performance compares against other HSCP areas is documented in Appendix 2

We have also included some good practice highlights and case studies describing service developments and improvements which have occurred within Argyll and Bute over the last year, which demonstrate the work of the Partnership and the impact it has had on our communities.

Section 1: Strategic Plan, Vision and Key Achievements in 2019/20

The Partnership's vision and priorities for health and social care in Argyll and Bute were developed for our first Strategic Plan 2016-2019. This describes how we intend to deliver integrated health and social care services to the communities within Argyll and Bute and identified seven key areas of focus for us as a partnership. These are shown in the diagram below.



Our Vision:

People in Argyll and Bute will live longer, healthier independent lives

The Public Bodies (Scotland) Act 2014 requires Integration Authorities (IA's) to review their strategic plan at least once every three years. We completed this in 2018 and included a robust three month engagement programme where we sought the views of public, service users, carers, partner agencies and staff.

This confirmed that our objectives remain current and relevant to our communities, staff, partners and stakeholders.

Section 2 - Performance Management and Governance

The National Health and Wellbeing Outcomes provide a strategic framework for the planning and delivery of health and social care services. These suites of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers and their families.

Currently there are 9 key National Health and Wellbeing Outcomes (NHWBO) and 23 sub-indicators. These form the basis of the reporting requirement for Health and Social Care Partnerships across Scotland. A full breakdown of all the Outcomes, Indicators and our local indicators is available in Appendix 1.

Our Performance for 2019/20

There are currently 43 indicators against which we measure our performance. 27 measures are reported as meeting target or better and 15 off target and 1 measure under development. Further analysis of the trends across the outcomes notes 11 indicators remain unchanged against target, 12 are down against target and 19 are up against target.

Benchmarking against other Health and Social Care Partnerships

We regularly benchmark our performance against similar Health and Social Care Partnerships in order to compare our performance and identify any areas of potential improvement. Health Improvement Scotland has identified Moray, Stirling, East Lothian, Angus, Scottish Borders and Highland as areas which are similar in terms of population size, relative deprivation or affluence and rurality of area. Our performance against 23 National Indicators is presented in **Appendix 2** in comparison to these areas.

Performance Governance development over the last year

- **Delivery of new IJB performance scorecard in Pyramid Balanced Scorecard**
As part of the ongoing review of the current Integrated Joint Board (IJB) a number of duplicated measures have been removed, bringing the total number down from 66 to 44 measures. A new scorecard was designed and delivered informed through two

development sessions with IJB members and built within the corporate Pyramid Balanced Scorecard

- Delivery of a new performance scorecard for Adult Protection**
 Following two development sessions with the Adult Protection Committee members a new scorecard was developed and built in Pyramid Balanced Scorecard which focussed on performance improvement across key indicators identified by the committee and through direct user consultation and feedback
- Delivery of new national Performance Indicators for Child Protection**
 Working alongside the national delivery team and Child Protection Committee saw the delivery of the new national data set for Child Protection. Argyll & Bute were one of the first HSCP's to deliver this new and exciting data set to the local teams and Committee allowing HSCP's to benchmark nationally their performance activity.
- Delivery of Children & Young Peoples Service Plan**
 A series of development sessions were organised using a Logic Modelling approach to the new plan for 2020-23.

Section 2.1 – How have we performed in 2019/20 - Ministerial Steering Group Indicators

The Ministerial Steering Group (MSG) Performance Measures have been developed **in addition to** the National Health and Wellbeing Outcome Indicators. These are intended to measure the improved outcomes resulting from the integration of HSCP services.

Our performance for 2019/20 against the Ministerial Group Indicators is shown in the table below:

Measure	2015/16	2016/17	2017/18	2018/19 ^P	2019/20	Target 2019/20
Emergency admissions (All Ages)	8,638	8,715	9,018	8,659	8,756	8,569
A&E attendances (All Ages)	15,113	16,105	16,026	17,060	17,135	16,957
Unplanned bed days (All Ages)	65,847	65,705	64,800	58,941	62,791	58,495
Delayed discharge bed days (18+)	8,857	6,803	8,414	9,561	7,863	8,605

Emergency Admissions Performance

Performance for 2019 notes a 1% increase in the previous year levels of emergency admission and a 2% increase against target. Performance across the other years notes a relatively flat trajectory and work continues across the HSCP with regards to reducing multiple emergency admissions.

Accident & Emergency (A&E) attendances

An increasing year on year trend against the target and statistically there is a 0.5% increase from last year and a 1% increase in performance this year against target.

Unplanned bed days

Against target, performance notes a 7% increase in unplanned bed days against target and against the previous year an increase of 6.5%

Delayed Discharge Bed days

Delayed Discharge performance notes a 9% reduction against target and a 22% reduction against last year. This reduction for 2019 is significant when projected against the other year's performance.

Section 3. National Health and Wellbeing Indicators Performance

In this section we aim to demonstrate our performance against each of the National Health and Wellbeing Indicators over the last year.

3.1 National Health and Wellbeing indicator 1

People are able to look after and improve their own health and wellbeing and live in good health for longer.

National Health and Wellbeing Indicator 1 aligns directly to Argyll and Bute HSCP Strategic Plan area of focus:

Within Argyll & Bute we are committed to supporting individuals to look after their own health and wellbeing in their communities. We aim to support individuals to prevent illness and focus on wellbeing and health improvement and have identified **6** targets by which we measure our performance in relation to National Health and Wellbeing Outcome 1.

These are listed in **Appendix 1** and this year we have achieved target in **4** of the **6** identified indicators.

This chapter described the work we have done over the last year, and areas where we recognise that more work is required in order to achieve our targets.

**REDUCE THE NUMBER OF
AVOIDABLE EMERGENCY
HOSPITAL ADMISSIONS &
MINIMISE THE TIME THAT
PEOPLE ARE DELAYED IN
HOSPITAL**

ARGYLL & BUTE HSCP
AREA OF FOCUS
A&B Transforming
HSCP Together
Argyll & Bute Health & Social Care Partnership

3.1.1 Smoking Cessation – Quit Your Way

We have reviewed and set up a new model for delivering our smoking cessation service. The new model involves specialist staff working in communities delivering a person centred approach to stopping smoking, this model was launched in January 2020 once the team had completed the national training for specialist advisors.

- The types of services accessed to support smoking cessation makes a difference, with those accessing specialist services twice as likely to be still not smoking after 12 weeks compared with those who use pharmacy based services (34.6% and 18.4% respectively).
- 5 staff completed the newly developed national Specialist Advisor Training, this included training online and face to face as well as shadowing and mentoring.

- 4 part time advisors form part of The Quit Your Way service along with 3 contracts with GP Practices. The Health Improvement team manage the advisors and monitor the contracts.
- Part of the role of the advisors is to work in partnership with communities, pharmacies, GP practises and hospitals to ensure those wanting to stop smoking are offered behavioural support as well as medication.
- The Argyll and Bute target for smoking cessation is agreed locally and forms part of the NHS Highland Local Delivery Plan (LDP) standard which is set by the Scottish Government. NHS Highland's LDP Standard is 336 successful 12 week quits (those people still not smoking at 12 weeks) within the 40% most deprived areas, and to date have achieved 288.
- The team work towards meeting an Argyll and Bute target of 57 successful 12 week quits within the 40% most deprived areas. At the time of writing this report 29 quits had been achieved against this target. Whilst the team are very focussed on the target group, anyone wanting to stop smoking in Argyll and Bute will be supported. To date, the team have recorded 46, successful 12 week quits overall, however this does not include the clients they have supported in partnership with pharmacies through shared care.
- Shared care is the term used when pharmacies and advisors work in partnership to deliver co-ordinated care for clients. Pharmacies reported 42 successful 12 week quits overall, of which 21 were within the LDP standard. 17 successful 12 week quits were through shared care, 6 of which were within the LDP standard.
- The Public Health Scotland report for quarter three identifies that 9 out of 14 health boards have not met their Quarter three target for the LDP standard, reporting that Scotland achieved 67% of the annual LDP standard. NHS Highland was performing slightly behind this figure at the time the report was produced. These nationally set targets are derived to help us achieve a tobacco-free generation (a smoking population of 5% or less) by 2034 and forms part of the Scottish Government's strategy; Raising a Tobacco Free Generation : Our Tobacco Control Action Plan 2018

3.1.2 Telecare

Argyll and Bute HSCP Telecare Service continues to grow year on year. During the year 2019/10 we:

- Achieved virtual working across Argyll and Bute and Islands which supports some of Argyll and Bute's more rural and isolated settings.
- Developed a robust reporting suite of data to ensure our work streams provided early intervention for clients to prevent any delay or issues that would be a risk to our clients.
- Held workshops for Technology Enabled Care, Housing and Health to investigate a way to work together with all internal and external partners and reduce duplication –

Outcome being a TEC, Housing and Health Forum will be established. TEC and Housing colleagues are part of strategic developments around older adult care.

- The HSCP are part of exciting National discussions and Test of Change Groups to be part of shared learning across Scotland to ensure the HSCP are at the forefront of service redesign and opportunity to improve.
- We were successful in a bid for funding to roll out the use of activity monitoring “Just Checking” and a purchase of 2 years licenses for 48 units to support reablement.
- Achieved a full migration of Data into Carefirst and the archive of the old Telecare Database for a more visible data stream
- Developed the TEC Equipment Technician post and a plan for developing and implementing a full asset management service
- Increased the enhanced our use of different equipment and peripherals to enhance the service we provide.
- Developed consistent Telecare processes across all localities.
- Joined the Telecare Service Association (TSA) which is the representative body for technology enabled care. Their vision is that people can choose technology enabled care to enrich their lives.

3.2 National Health and Wellbeing indicator 2

People, including those with disabilities, long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

National Health and Wellbeing Indicator 2 aligns directly to the Argyll and Bute HSCP Strategic Plan area of focus:

Our Community teams work across disciplines to ensure that people with intensive needs are cared for within their homes, and that people with chronic conditions are managed within the community where possible. Over the last year we have worked hard to further develop our community care teams to ensure that reablement is at the centre of our work. This has shown to be effective in reducing the need for long term care packages and in ensuring that essential home care services are matched to needs. There will be further work to develop a consistent reablement approach as part of developments around community teams in 2020-21.



We have identified **6** targets by which we measure our performance in relation to National Health and Wellbeing Outcome 2. These are listed in **Appendix 1** and this year we have achieved the target in **1** of the **6** identified indicators.

This chapter describes the work we have done over the last year, and areas where we recognise that more work is still required in order to achieve our targets.

3.2.1 Reducing Unplanned Bed Days & Emergency Admissions

The main drive for the partnership has been a sustained focus with regards to reducing unplanned bed days and this has seen an improvement and reduction of 15% across mental health specialities. With regards to emergency admission and unplanned bed days across acute specialities both trends note a further reduction this year. Accident and emergency attendances have increased by 4% from the previous year, this increase could in part be attributable to increase attendance at A&E in the first few weeks of the COVID-19 pandemic.

The rate of emergency admissions has reduced against target and this has been supported with a further reduction in readmissions within 28 days. Trends in both these indicators note ongoing reductions for the most part year on year.

3.3 National Health and Wellbeing Indicator 3

People who use health and social care services have positive experiences of those services, and have their dignity respected.

National Health and Wellbeing Indicator 3 aligns directly to the Argyll and Bute area of focus:

Within Argyll & Bute Partnership it is important to us that our citizens have a positive experience when using our services. We endeavour to ensure we enable them to give feedback about their experiences of health and social care services in a range of ways. This feedback supports us to improve and develop services in line with the needs of our local communities. We have identified **5** targets by which we measure our performance in relation to **National Health and Wellbeing Outcome 3**.

These are listed in **Appendix 1** and this year we have achieved target in **3** of the **5** identified indicators. This chapter described the work we have done over the last year and areas where we recognise that more work is required in order to achieve our targets.

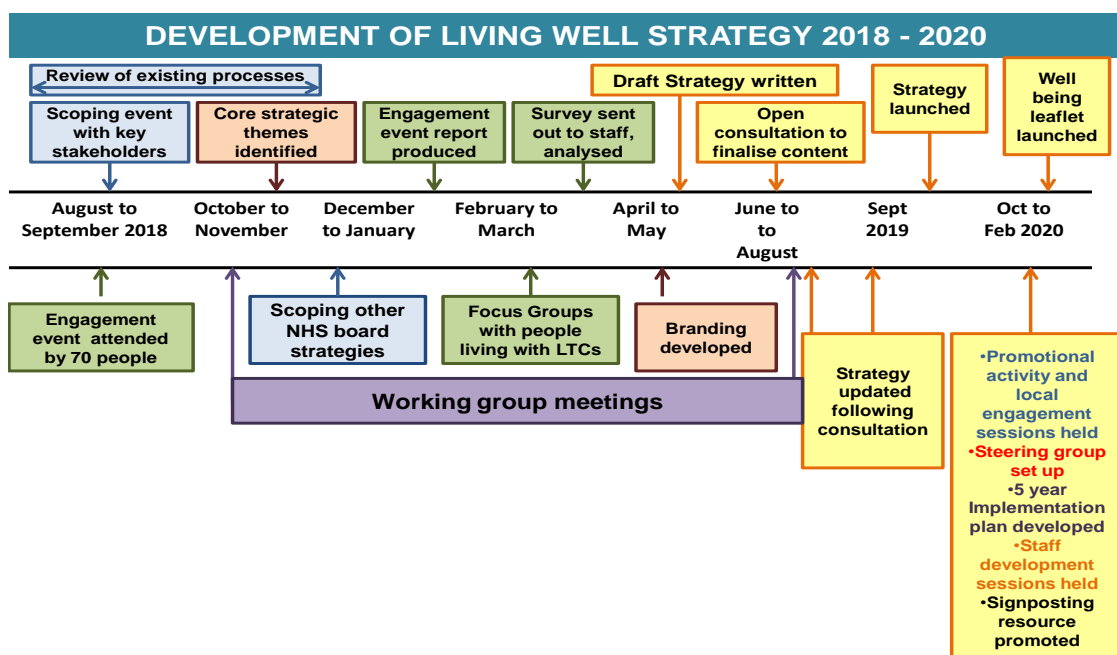


3.3.1 Living Well Strategy

The Living Well strategy was launched at the IJB in September 2019 following extensive engagement with over 450 people, stakeholders, partners and staff during 2018. The draft strategy was developed and consulted on in June and July 2019 prior to its launch.

Progress includes-

- An overarching steering group linked to various related work across the HSCP and other partners.
- Development of a 5 year implementation plan
- 8 projects funded with small grants to support people in local communities to self-manage
- 4 reflective practice sessions delivered in partnership with the Health and Social Care Alliance.
- Type 2 diabetes framework action plan linked to the Living Well strategy
- Self-management course delivery continues through an Argyll and Bute Healthy Living Partnership made up of 3rd sector partners with HSCP representation and funded by the Alliance
- Two pain events planned by the Healthy Living partnership 1 in Inveraray was very well received by staff, 3rd sector and in particular people and their families living with chronic pain. The second in Dunoon was cancelled due to Covid 19 pandemic.



3.4 National Health and Wellbeing Indicator 4

Health and social care services are centred on helping to maintain or improve the quality of life of service users

National Health and Wellbeing Indicator 4 aligns directly to all our areas of focus.

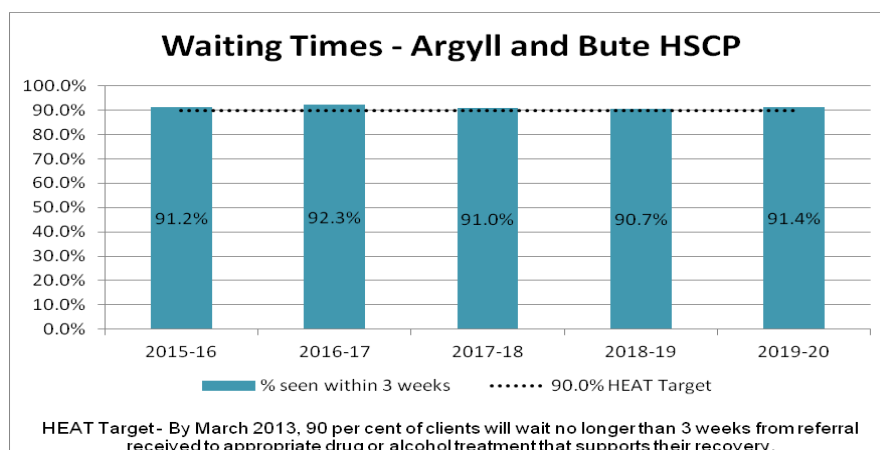
Within Argyll & Bute Partnership we recognise the importance of supporting people to maintain or improve their quality of life. We have identified targets by which we measure our performance in relation to **National Health and Wellbeing Outcome 4**.

These are listed in **Appendix 1** and this year we have achieved targets in **4** of the **5** identified indicators.

3.4.1 Alcohol and Drug Services

The Argyll & Bute Alcohol and Drug Partnership (ADP) have oversight of the delivery of the drug and alcohol treatment waiting times target and the Alcohol Brief Intervention target.

- **Waiting Times Target** – “By March 2013, 90 percent of clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.” Argyll and Bute HSCP has met or exceeded this target since 2015.



- **ABI Heat Target** – “NHS Boards to sustain and embed alcohol brief interventions in priority settings (primary care, A&E antenatal) and broaden delivery in wider settings.” Argyll and Bute HSCP did not meet their part of the delivery target for Alcohol Brief Interventions (ABI) however, a new plan to increase ABIs in Argyll and Bute is being developed including:
 - Three community hubs have been setup across Argyll and Bute to offer Job Seekers, financial support, housing and/or general advice to people in the area who are in recovery. A fourth hub is in development.
 - A family’s support group has been setup in Helensburgh with more to follow across Argyll and Bute.
 - Forty-four people were supplied with take home Naloxone last year, which is almost double the number from the year before. Plans are in place to increase

the number of people who will supply and carry Naloxone across Argyll and Bute. Argyll and Bute now have Intranasal Naloxone which will make this life saving medication easier to administer.

3.5 National Health and Wellbeing Indicator 5

Health and social care services contribute to reducing health inequalities

National Health and Wellbeing Indicator 5 aligns directly to the Argyll and Bute HSCP Strategic Plan area of focus:

Within Argyll & Bute Partnership we recognise the importance of supporting our service users to maintain or improve their quality of life. We have identified **5** indicators by which we measure our performance in relation to **National Health and Wellbeing Outcome 5**. These are listed in **Appendix 1** and this year **we have marginally missed both our targets in this area.**

This chapter describes the work we have done over the last year and areas where we recognise work is still required in order to achieve our targets.



3.5.1 Engagement

The Public Health team consolidated statutory engagement responsibilities developed in 2018-19 by leading and coordinating the HSCPs annual engagement plan. Highlights from this work included-

- Providing advice and support to a number of services to deliver their engagement activities such as the dementia service review and the care home review
- Our dementia redesign involved significant engagement from local communities and despite Covid-19, services are building on this and are developing longer term co-production approaches to dementia redesign
- Conducted a formal evaluation on feedback from people accessing HSCP services
- Provided professional advice to the HSCP on statutory responsibilities for equality and diversity impact assessment. Implemented a new assessment process in line with Argyll and Bute council's processes and accommodating the new responsibilities for Fairer Scotland.
- 7 conversation cafes were held as part of the new engagement process linked to the review of Locality planning Groups with a total of 183 people in attendance. 3 were cancelled due to Covid 19.
- Additionally as a result of our response to Covid-19, a unique partnership was formed with all care homes in Argyll and Bute whether internal or externally commissioned strongly supported by Scottish Care, known as the Care Home Task Force, this group is moving from a pandemic response to embedded within planning structures

3.5.2 Young People

- P7 Smoke Free Programmes includes 5 lesson plans delivered by teachers and a travelling theatre production delivering 9 interactive shows to 979 pupils across Argyll & Bute. Every primary school in Argyll and Bute is offered the Smoke Free Programme and secures an extremely high uptake.
- S3 health drama “You are not alone” is a travelling theatre production and forms part of an educational programme which includes lessons and meeting service providers. The aim is to improve pupil’s knowledge of services and encourage them to access support. 2019 is the third year that all Argyll and Bute secondary schools have participated in the programme, reaching 755, S3 pupils. Smaller and remote schools were supported with travel and accommodation to reach one of the 7 schools used as venues
- Cool2talk was reviewed and a new delivery model is in place from April 2020. It will now be delivered by a third sector partner. Funding sourced from a number of partners, but will still be supported by the Public Health team

3.5.3 Sexual Health

- A new contract was awarded to Waverly Care as part of a Highland procurement process for BBV and LGBT support and services
- The CCard service giving young people access to free condoms has been included in the new contract with Waverly Care
- 2 Pride events were supported in Oban and Bute

3.5.4 Independent Sector Partners

Argyll & Bute HSCP commission a wide range of services from the independent sector, with 80% of all home care provision and 85% of care home placements fulfilled by the sector. The HSCP continues to work in partnership with these organisations and with Scottish Care who represent the voice of the independent sector. There is representation from Scottish Care Independent Sector Leads who sit on our Integrated Joint Board and on our Strategic Planning Group and we value their ongoing contributions.

We are committed to developing a program of works and consultations with the Scottish Care Independent Sector Leads and the providers they represent and recognise the importance of the sector and value the role they bring to the partnership. We look forward to working with them to develop and create opportunities for collaboration as we continue to develop services and workforce capacity and capabilities to meet our community’s future needs.

3.6 National Health and Wellbeing Indicator 6

People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing

National Health and Wellbeing Indicator 6 aligns directly to the Argyll and Bute HSCP Strategic Plan area of focus:

Within Argyll and Bute HSCP, 17% of adults are reported as being providers of unpaid care.

We are committed to supporting carers of all ages across Argyll and Bute in their caring role especially by recognising the importance of their own wellbeing. We currently still have 1

indicator by which we measure our performance in relation to **National Health and Wellbeing Outcome 6**. This is listed in **Appendix 1** and this year we have marginally missed this target.

Below we describe our support to carers over the last year and areas where we recognise that more work is required in order to achieve our target.

3.6.1 Carers Strategy

The Carers Strategy was launched in April 2019. It has a detailed implementation plan that has progressed in some areas and focus is required on the areas that have not progressed.

Feedback from managers to Scottish Health Council highlighted that the informal tender process had been very difficult with communication and timescales leading to the contracts having to be accepted with limited time for discussion or negotiation. The feedback has identified other areas for consideration and these have informed the recommendations. The informal process was used for experience for the centres who will have to operate within a formal tender process for the next contract period. Progressing formal contracts for third sector providers for unpaid carer services was unknown territory for management and teams like finance and procurement and made more difficult by services being set up and run differently in each area. Carer services now have longer periods of contract security, the process was challenging but the fact that it has progressed formally is to be acknowledged but did distract from the work of the Carers Strategy implementation plan.

Sections of the implementation plan require operational capacity like training and education of HSCP teams and improving pathways for carer support in the localities. This capacity will come with recruitment of the Carers Officer and it is recommended that moving to a permanent post will assist recruitment and support long-term work to improve our unpaid carer support.

The HSCP established a Carers Act Implementation Group and last year this moved back to the Carers Partnership. It is acknowledged that the current Partnership has not had the

**SUPPORT UNPAID CARERS, TO
REDUCE THE IMPACT OF THEIR
CARING ROLE ON THEIR OWN
HEALTH AND WELLBEING**

ARGYLL & BUTE HSCP
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HSCP Together
Argyll & Bute Health & Social Care Partnership

right representation or enough focus on continued implementation so it is recommended that the Carers Act Implementation Group is reformed and the HSCP will lead on progressing the implementation plan.

We currently have unpaid carer support commissioned across 6 services in Argyll & Bute;

- North Argyll Carer Centre
- North Argyll Crossroads
- Dochas Centre (based in Mid Argyll)
- Mid Argyll Youth Development Service
- Cowal Crossroads
- Helensburgh and Lomond Carer Centre

There are of course a range of other organisations who work with and support unpaid carers.

Recently our partners in the Scottish Health Council carried out informal consultation with our carer service managers to review progress towards implementation of the Carers Act. This has provided useful feedback to help focus future plans for the future.

3.7 National Health and Wellbeing Indicator 7

People who use health and social care services are safe from harm.

National Health and Wellbeing Indicator 7 aligns directly to the Argyll and Bute HSCP Strategic Plan area of focus:

We have identified **7** indicators by which we measure our performance in relation to National Health and Wellbeing Outcome 7. This is listed in **Appendix 1** and this year we have achieved **5** of the **7** identified targets. This chapter describes the work we have done over the last year to support the most vulnerable individuals within our communities and keep them safe from harm.

3.7.1 Adult Support and Protection Committee

The Adult Support and Protection Committee has benefitted from an improved performance data and analysis service provided to it, both in 'live' input to committee from Pyramid materials and to the Chair and Lead Officer. The refinement of both service data on adult protection referrals, service user group, geographical area, harm groupings, and on performance data on reporting timescales, activity completion and outcomes has been of considerable operational value to the partnership approach to protection.



The Performance team have assisted in preparation of material for the National Inspection of adult protection, and for statistical analysis for the Independent Convenors Biennial Report to the Scottish Government, and work progressing from the Committee to locality analysis and development.

3.7.2 Child Protection

Trauma Training

Argyll and Bute continue to be one of three areas in Scotland leading the way in developing a trauma informed workforce. As part of this we have developed and collated a range of easy to use on line learning materials for everyone in the children's services workforce to help support the different groups of staff who come into contact with children and families as part of their job. As we work through all the implications coronavirus many of us are also finding that these materials are invaluable in helping support our colleagues, teams and communities through these difficult times.

Getting it Right for Every Child Leadership Programme

The GIRFEC Leadership Programme aims to increase capability and capacity around collective leadership in partnerships to drive forward integration and fully embed GIRFEC at the local level, using a 'place-based' approach, providing necessary support to leaders at all levels in their local partnerships, enabling them to apply learning to live situations as part of the 'day job'. A trial of the Programme in two partnership areas (Argyll & Bute, and Fife), and in addition, SG are working with local partnerships across Scotland to deliver a series regional leadership seminars to address common challenges, with a particular focus on collective leadership, integrated practice and GIRFEC. Four seminars have been delivered to date.

3.8 National Health and Wellbeing Indicator 8

People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do

National Health and Wellbeing Indicator 8

aligns directly to the Argyll and Bute HSCP Strategic Plan area of focus:

We have identified **3** indicators by which we measure our performance in relation to **National Health and Wellbeing Outcome 8** This is listed in **Appendix 1** and this year we have achieved **1** of the **3** identified targets

This chapter describes the work we have done over the last year to support our staff to deliver services across the communities of Argyll and Bute.

**SUPPORT STAFF TO
CONTINUOUSLY IMPROVE THE
INFORMATION, SUPPORT AND
CARE THAT THEY DELIVER**

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3.8.1 Workforce development

The Public health team are involved in workforce development at differing levels. This includes delivery and coordination of education and training and also supporting the health and wellbeing of staff.

- A new NES Map of Health Behaviour Change programme has been implemented with local trainers in place with 46 people trained between October 2019 to March 2020
- 2 events were held our Annual Health and Wellbeing development day focused on Health Behaviour change with a follow up day in February on developing a coaching model
- Monthly virtual education sessions were developed with a range of topics and are opened up to relevant staff groups
- We continue to deliver training on mental health first aid.
- As part of our SLA with Waverly Care they also delivered a range of training sessions across Argyll & Bute

3.8.2 Sturrock review.

In November 2018, the Scottish Government announced a fully independent external review into allegations of a bullying culture at NHS Highland which includes the Argyll & Bute Health and Social Care Partnership (HSCP), as an integrated arrangement under the direction of the Argyll & Bute Joint Board. The Review was commissioned following the public disclosure of concerns about bullying and harassment in September 2018.

The Sturrock Review was published in April 2019 and was based on engagement with 340 people across the NHS Highland area. One of the report's recommendations was that an

independent review of NHS Highland Culture in Argyll & Bute HSCP should be carried out, since only 6% of respondents to the Review were from Argyll & Bute, although they are around 15% of the colleague population.

In November 2019, NHS Highland Board commissioned Progressive Partnership Ltd to carry out a survey of NHS Highland colleagues working in Argyll & Bute and ensured the A&B HSCP were consulted upon the work being undertaken. The HSCP has around 1540 NHS Highland employees and 770 Council employees and the scope of the review did not include Council employees, so this report only covers two thirds of the HSCP.

Summary of findings:

- 68% (344) of the 508 respondents to the survey (which includes 62 former colleagues) reported experiencing bullying or harassment within the Argyll & Bute Health and Social Care Partnership (HSCP).
- 65% (291) of the 446 respondents who are still employed (i.e. current not ex-staff) reported experiencing bullying and harassment. This represents 19% of the current 1540 NHS Highland employees in the Argyll & Bute HSCP.
- 49% (167) of those 344 respondents who said they had experienced bullying reported experiencing issues within the last 6 months. This represents 11% of the current 1540 NHS Highland colleagues in the Argyll & Bute HSCP.
- 41% (140) of those 344 respondents who said they had experienced bullying reported that it happened/happens frequently. This represents 9% of the current 1540 NHS Highland colleagues in Argyll & Bute.
- It was reported that both managers and colleagues were responsible for bullying, although individuals were able to report bullying by more than one type of person, so it is difficult to assess this more specifically.
- Bullying was reported across all grades from the 344 who responded that they had experienced bullying and harassment (out of the 508 respondents from the target population of 1540).
- Respondents from Bands 1 to 4 (99 of the 160 respondents from this grade range, which is 62%) were significantly less likely than those in Bands 5 to 7 to experience this (191 of the 266 respondents from this grade range, which is 72%).
- Bands 1-4 also had greater confidence than Bands 5-7 that reported incidents would be treated seriously.
- Those working for NHS Highland within the Argyll & Bute HSCP for less than 2 years were least likely to have experienced bullying (42% which is 31 of the 73 respondents, versus 66% which is 100 of the 151 respondents with 3-10 years' service and 75% which is 212 of the 283 respondents with 10+ years' employment).

- Those working less than 2 years were also more confident that any issue they reported would be taken seriously (42% agreed which is 25 of the 60 respondents versus 24% which is 31 of the 131 respondents with 3-10 years' service and 25% which is 62 of the 244 respondents with 10+ years' service).
- 67% (129) of the 271 respondents who had experienced bullying and answered this question had reported it via one of the formal channels, although 61% (264) of the 435 respondents who answered this question (from the target population of 1540) believe there is a culture of discouraging reporting.

The findings are deeply concerning and we accept them fully and offer a sincere apology to every colleague who has experienced bullying or harassment. We would also like to thank those who responded for having the bravery to respond.

The main themes from the survey were in line with the Sturrock findings and are part of our ongoing programme and action plan to transform the culture to one where colleagues feel listened to, valued and respected. We have brought forward timings and increased resources as a result of the findings and address the themes of rurality and history within the Argyll & Bute HSCP.

We have also created a **100 day plan** setting out 5 priority actions which we will continue to engage with colleagues and staff side on developing and delivering. Some of these were already part of our wider culture programme plans, but we have advanced the pace and resources on these. Others are new actions to address the themes that are specific to Argyll & Bute.

Progress with the plan will be tracked through partnership forum, leadership meetings and the Culture Programme Board. It is proposed there will be joint plan across both NHS Highland and Argyll & Bute only actions although they may be discussed or taken forward in different forums.

3.9 National Health and Wellbeing Indicator 9

Resources are used effectively and efficiently in the provision of health and social care services

National Health and Wellbeing Indicator 9 aligns directly to the Argyll and Bute area of focus:

We have identified **4** indicators by which we measure our performance in relation to **National Health and Wellbeing Outcome 9**. This is listed in **Appendix 1** and this year we have achieved **4** of the **4** identified targets.

This chapter describe the work we have done over the last year to support and encourage continuous improvement throughout services and directly with our staff.



3.9.1 How we Reduce Harm, Eliminate Waste and Manage Variation

The Highland Quality Approach (HQA) continues to be used as our quality and continuous improvement methodology. We are consistently trying to reduce harm, to eliminate waste and to manage variation.

3.9.2 Public Health

The key work of the Argyll and Bute Public Health team is aligned to not only the National Public Health Priorities but also all 9 National Health and Wellbeing indicators and additionally to the HSCP 7 areas of focus.

1. A Scotland where we live in vibrant, healthy and safe places and communities.
2. A Scotland where we flourish in our early years.
3. A Scotland where we have good mental wellbeing.
4. A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs.
5. A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all.
6. A Scotland where we eat well, have a healthy weight and are physically active.

We have 3 indicators that we measure performance against alcohol brief interventions, waiting times and smoking targets. Of these we have not reached our target for 2 of them despite additional measure in place. We recognise further targeted work is required to ensure we achieve these targets next year.

While we recognise that there needs to be a focus on prevention of health and social care problems from arising. There also needs to be a focus on supporting people and their circle of support who have developed long term physical and mental health to better manage their

conditions. By targeting both pre and post long term conditions we will be better equipped to reduce demand on health and social care services.

Section 4: Financial Performance and Best Value

5.1 Financial Performance

Financial management and performance is regularly reported to the IJB during the financial year, for the financial performance during the year and also the budget outlook for future years. This includes the monitoring and development of the annual Savings Plan. More detailed monitoring is carried out monthly by the Finance and Policy Committee.

NHS Highland and Argyll and Bute Council delegate funding to the Integration Joint Board. The IJB then determines how to deploy these resources to achieve the objectives and outcomes in the Strategic Plan. The IJB then directs the Health Board and Council to deliver services in line with these plans.

This section summarises the main elements of our financial performance for 2019-20 and highlights the financial position and risks going forward into future years.

5.1.1 Financial Performance 2019-20:

It was clear from the beginning of financial year 2019-20 that the HSCP had financial challenges. The final revenue outturn for 2018-19 was an overspend of £6.681m. The health related overspend of £3.554m was covered by the Scottish Government brokerage given to NHS Highland. The social work related overspend amounting to £3.127m has to be repaid to Argyll and Bute Council.

At the IJB meeting on 27 March 2019, when the budget for 2019-20 was considered, the Board set a balanced budget which required new savings of £6.794m to be delivered. In addition there was £3.029m of previously agreed savings still to be delivered, making the total savings due to be delivered in year £9.823m which was a significant challenge. Further in-year savings were agreed through financial recovery plans which increased the total to be delivered to £10.877m, of which £7.665m was subsequently delivered. The shortfall in savings delivery and the SLA dispute with NHS GG&C were the two key reasons for the outturn overspend of £2.446m in 2019/20. It should be noted that although there is an overspend, the level of overspend is well reduced from that in 2018-19, which is a considerable achievement.

The Chief Financial Officer post was covered by the Council's Head of Strategic Finance (in addition to her Council post) until 31 May 2019. A new Head of Finance and Transformation was appointed for a 2 year fixed term from 1 June 2019 to 31 May 2021. The enhanced budgetary control arrangements introduced by the Chief Officer and the Council's Head of Strategic Finance have been continued and expanded and comprehensive financial reports are now being presented to the IJB and to the Finance and Policy Committee on a regular basis. Although unable to break even at the end of 2019-20, there is now greater control and transparency over the partnership's financial position.

The forecast outturn position was reported to the IJB at each meeting throughout the financial year. The overall financial performance against budget for financial year 2019-20 was an overspend of £2.446m, with an overspend of £1.280m on health related services and an overspend of £1.166m on social work services.

The overspend for health related services took an adverse dip between February and the end of the financial year. This was as a result of recognition of the disputed charging of services from NHS Greater Glasgow and Clyde (GG&C). At the end of financial year 2019-20 the dispute remained unresolved. This dispute has continued throughout the financial year, with £1.1m of charges from 2018-19 remaining in dispute and a further disputed amount for 2019-20 of £1.324m. (These disputed amounts are for increases above the normal inflationary uplift which has been offered.) Without the need to make the provision for the disputed amount, the Health position would have shown a small underspend of £44k, and the overall overspend would have been reduced to £1.122m. The dispute has been escalated to the chairs of the respective health boards, and they have agreed to a meeting with the relevant chief executives supported by their directors of finance in order to bring this matter to a resolution. This meeting has understandably been delayed by the Covid-19 pandemic.

The main service areas contributing to the overall overspend position are noted below:

- Looked After Children - Overspend arises due to service demand for external residential placements, overspends on the Life Changes Trust project, overspends on staffing costs within children's homes and slippage on agreed savings in residential placements (£200k) partially offset by underspends in fostering arising due to lower than budgeted service demand.
- Physical Disability - Overspend arises mainly due to higher than budgeted demand as well as slippage on the delivery of efficiency savings for supported living services. This is partially offset by an underspend in respite and payments to other bodies.
- Learning Disability - Overspend arises due to a combination of higher than budgeted demand for supported living and care home services and slippage on savings developed to reduce both of these commitments partially offset by underspends on day services and respite.
- Adult Services West – Overspend arises due to savings not being achieved and several budget overspends, including; Mull Medical Group - GP locums £668k, Psychiatric medical services - locums £603k, LIH General Medical Services - locums £308k, GP prescribing Campbeltown £123k, LIH Laboratory - agency staffing £136k, LIH Ward B - agency nurses £106k, Kintyre Medical Group - GP locums £92k, Campbeltown Hospital nursing £102k, and Jura out of hours GP service. (LIH: Lorn & Isles Hospital)
- Commissioned Services – NHS GG&C – overspend arises mainly due to disputed element of SLA accounted for as per NHS accounting rules, £1.324m. Balance of variance relates to cost per case charges, mainly cystic fibrosis drug costs.

The main reason for the overall overspend was the failure to deliver all the agreed savings. As at end of March, £7.665m of the target £10.877m savings have been delivered, 70% of the total – this includes £1.080m non-recurring savings.

The shortfall for Social Work savings is £3.212m. The shortfall for Health savings of £1.080m was fully offset by non-recurring (one-off) savings many of which relate at least in part but where the saving cannot yet be regarded as recurring. The Health savings are being tracked through the Project Management Office approach co-ordinated by NHS Highland which includes greater visibility of progress against agreed milestones. This approach is now being rolled out to Social Work savings through the Finance team. The regular meetings to review the savings were paused in March due to work on the Covid response and restarted in late May. A Service Improvement Officer (SIO) post dedicated to tracking and progressing social work savings has been recruited to, in addition to two SIOs focussed on Learning Disability and Care Homes / Home Care for Older people. These are expected to improve the focus on savings delivery in 2020-21.

Efforts to deliver savings were hampered by the need to prioritise responses to Covid-19 pandemic. Where we can, we will ensure that actions for Covid-19 are aligned and capitalised on such as increasing use of Near Me.

The table overleaf summarises the financial performance against budget for 2019-20, split across Health and Social Work related services.

Service	Annual Budget £000	Outturn £000	Variance £000	% Variance
COUNCIL SERVICES:				
Chief Officer	1,477	798	679	46.0%
Children and Families Central Management Costs	2,285	2,399	(114)	-5.0%
Child Protection	3,348	3,068	280	8.4%
Children with a Disability	874	815	59	6.8%
Criminal Justice	151	(36)	187	123.8%
Looked After Children	6,885	7,385	(500)	-7.3%
Adult Services Central Management Costs	501	464	37	7.4%
Learning Disability	14,679	15,812	(1,133)	-7.7%
Mental Health	2,707	2,482	225	8.3%
Older People	35,078	35,369	(291)	-0.8%
Physical Disability	2,192	2,790	(598)	-27.3%
Service Development	412	409	3	0.7%
COUNCIL SERVICES TOTAL	70,589	71,755	(1,166)	-1.7%
HEALTH SERVICES:				
Adult Services - West	54,702	56,314	(1,612)	-2.9%
Adult Services - East	30,237	30,230	7	0.0%
Children & Families Services	7,257	7,031	226	3.1%
Commissioned Services - NHS GG&C	65,457	66,925	(1,468)	-2.2%
Commissioned Services - Other	3,929	4,044	(115)	-2.9%
General Medical Services	17,720	17,409	311	1.8%
Community and Salaried Dental Services	3,793	3,493	300	7.9%
Other Primary Care Services	9,406	9,406	0	0.0%
Public Health	1,812	1,656	156	8.6%
Lead Nurse	1,516	1,433	83	5.5%
Management Service	3,808	3,679	129	3.4%
Health Board provided services	2,047	2,047		0.0%
Planning & Performance	2,190	2,144	46	2.1%
Depreciation	2,516	2,494	22	0.9%
Income	(1,533)	(1,920)	387	-25.2%
Estates	5,322	5,501	(179)	-3.4%
Budget Reserves	427	0	427	100.0%
HEALTH SERVICES TOTAL	210,606	211,886	(1,280)	(0.6%)
GRAND TOTAL	281,195	283,641	(2,446)	(0.9%)

The Scheme of Integration states that any overspend is funded from additional payments in-year by the IJB partners, i.e. Argyll and Bute Council and NHS Highland. The Health overspend of £1.280m is covered by brokerage from the Scottish Government in the first instance and this will require to be repaid unless the dispute with NHS GG&C is settled in our favour. It is expected that discussions will be held next year about a repayment schedule. At the earliest, repayment might commence in 2022-23.

The Council has allocated additional funding to the IJB to cover the social work overspend of £1.166m. This needs to be repaid to Argyll and Bute Council along with the repayment of the 2018-19 and 2017-18 overspends. The agreed schedule for repayments is set out overleaf:

	Repayment 2017-18 Overspend £000	Repayment 2018-19 Overspend £000	Repayment 2019-20 Overspend £000	Total Repayment £000
2020-21	400			400
2021-22	655	545		1,200
2022-23		1,255		1,255
2023-24		1,327		1,327
2024-25			1,166	1,166
Total	1,055	3,127	1,166	5,348

Financial Outlook, Risks and Plans for the Future

The IJB has a responsibility to make decisions to direct service delivery in a way which ensure services can be delivered within the finite financial resources available.

Taking into account the estimated available funding and the pressures in relation to costs, demand and inflationary increases the budget gap for the Partnership for 2020-21 is summarised below:

	2020-2021 £m
Baseline Budget	278.9
Cost and Demand Pressures	4.8
Inflation (employee and non-pay)	9.3
Previously agreed savings	(1.3)
Total Expenditure	291.7
Total Funding	(286.3)
In-Year Budget Gap	5.4

There are significant cost and demand pressures across health and social care services and these are expected to outstrip any available funding uplifts and have a significant contribution to the overall budget gap. The main pressures relate to demographic and volume pressures including amongst other areas healthcare packages, growth in prescribing, growth in adult social care services, younger adult supported living services and acute health services. There are also significant costs of the uplift in the Living Wage rate, pay inflation costs for HSCP employees, inflationary increases for drugs and prescribing costs and for commissioned services.

A savings plan for the budget gap shortfall of £5.4m has been agreed by the Integration Joint Board comprising management / operational savings of £4.242 and policy savings of £1.463m along with a further investment of £0.318m to deliver financial sustainability.

The IJB approved the 2020-21 budget proposals at their meeting on 25 March 2020 delivering a balanced budget for 2020-21. The approval of the budget proposals should provide reassurance to the public, staff and stakeholders that the HSCP is determined to work within budget. Moving into 2020-21, there is a continuing need for robust budget monitoring, and when an activity deviates from plan corrective action will have to be taken immediately to minimise any future overspends.

Looking into 2021-22 and beyond, it is anticipated the Scottish public sector will continue to face a very challenging short and medium term financial outlook with significant uncertainty over the scale of funding.

The budget gap over 2020-21 to 2022-23 across each scenario is summarised in the table below:

Budget Gap	2021-22 £000	2022-23 £000	2023-24 £000	Total £000
Best Case	1,906	476	842	3,224
Mid-Range	5,678	4,411	4,932	15,021
Worst Case	11,865	10,528	11,088	33,482

The most significant financial risk is the contract with NHS Greater Glasgow and Clyde (NHS GG&C). NHS Highland has a Service Level Agreement (SLA) with NHS GG&C for services provided to Argyll and Bute residents in NHS GG&C hospitals. The annual value of the SLA has been successfully agreed for over a decade, usually following a period of negotiation but always without the need for arbitration. However in 2018-19, an impasse was reached with NHS GG&C seeking payment of a higher value than that willing to be agreed to by NHS Highland (and the IJB) which included the usual inflationary uplift. The difference was £1.1m. At the end of financial year 2019-20 the dispute remained unresolved with a further difference of £1.324m after offering an inflationary uplift at the nationally agreed rate.

Another major risk is around uncertainties on funding for costs and undelivered savings resulting from the Covid-19 pandemic. In addition there are risks resulting from continued use of agency medical staff in psychiatry and for locum GPs and other agency staffing, potential for growth in high cost care packages, and the largely unquantifiable potential implications of the UK's withdrawal from the European Union.

5.2 Best Value

NHS Highland and Argyll and Bute Council delegate funding to the Integration Joint Board (IJB). The IJB decides how to use these resources to achieve the objectives of the strategic plan. The IJB then directs the Partnership to deliver services in line with this plan.

The governance framework is the rules and practices by which the IJB ensures that decision making is accountable, transparent and carried out with integrity. The IJB has legal responsibilities and obligations to its stakeholders, staff and residents of Argyll and Bute.

The Health and Social Care Partnership ensures proper administration of its financial affairs by having an appointed Chief Financial Officer (section 95 of the Local Government (Scotland) Act 1973). The Chief Financial Officer is required to keep proper accounting records and take reasonable steps to ensure the propriety and regularity of the finances of the Integration Joint Board. A short summary against the 8 best value themes is given below:

Vision and Leadership

The IJB and Senior Leadership team are involved in setting clear direction and organisational strategy which is expressed in the 3 year Strategic Plan. There are strong mechanisms for contributions from the Locality Planning Groups and the Strategic Planning Group. The latter Group is currently working on the Strategic Commissioning Plan informed by a formal Joint Strategic Needs Analysis and has reported regularly to the IJB on its progress with this.

Governance and Accountability

There has been an internal audit of corporate governance in 2019-20. In addition the scheme of integration has been reviewed, the strategic risk register has been maintained and reviewed, the committee terms of reference have been reviewed, Data Protection Officer appointed, and an arrangement concluded with the Council to provide formal committee support, all of which had contributed to improved governance and accountability.

Effective use of resources

Finance & Policy Committee now meet on a monthly basis to scrutinise monthly budget monitoring and progress of delivering against savings. NHS Highland has utilised a formal Project Management Office approach to delivering savings throughout 2019-20 and this has included all health savings in the HSCP. This approach has started to be extended to social work savings and additional resource to support this is being recruited to following approval by IJB in March 2020. A formal grip and control regime has been in place through the year for all purchases of supplies and services, and workforce monitoring has reviewed all vacancies before agreeing to fill essential posts only. This has continued post Covid.

Partnership and Collaborative Working

The IJB works closely with NHS Highland and Argyll and Bute Council. The Chief Officer is a member of both of their Strategic Management Teams and attends relevant Board meetings. These close relationships have been particularly evident in the joined up responses to the Covid-19 pandemic through the Local Resilience Partnership and the Caring for People Tactical Group. In addition the HSCP has worked extremely closely with its commissioned service providers holding weekly meetings with care homes and care at home providers and has been commended by these stakeholders for this. This illustrates the ethos of true partnership working.

Community Responsiveness

The Locality Planning Groups ensure that local concerns are addressed and feed through to the Strategic Plan. In addition the Engagement Strategy ensures that full consultation and engagement is carried out before policy changes are agreed. Most recently this has been illustrated through the extensive consultation carried out for the changes to dementia services, and through the budget consultation.

Fairness and Equality

The Equality Impact Assessments now include an assessment of socio-economic impact. There is a single process used across the HSCP and EQIAs are published. EQIAs were produced for all policy related budget saving proposals.

Performance, Outcomes & Improvement

The quarterly performance reporting has moved to a system of reporting by exception. The number of performance indicators has been reduced to 45 to improve focus. An integrated performance reporting regime has been designed but is still being fully implemented.

Appendix 1- Health & Wellbeing Outcome Indicators

Please note for 2019/20 due to effect on data availability as a result of COVID 19 the most recent data reported is calendar year (2019) and not financial quarter as in previous years.

Outcome 1 - People are able to improve their health	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-1 - % of adults able to look after their health very well or quite well	96.0%	93.0 %	93.0%	93.0 %	93.0 %	●	⇒
NI-3 - % of adults supported at home who agree they had a say in how their support was provided	82.0%	76.0 %	76.0%	76.0 %	76.0 %	●	⇒
NI-4 - % of adults supported at home who agree that their health & care services seemed to be well co-ordinated	81.0%	72.0 %	72.0%	72.0 %	74.0 %	●	⇒
NI-16 - Falls rate per 1,000 population aged 65+	26	26	26	23	20	●	↑
A&B - % of Total Telecare Service Users with Enhanced Telecare Packages				45.7 %	31.0 %	●	↑
NI-13 - Emergency Admissions bed day rate	107,343	107,548	108883	109,759	123,200	●	↑
Outcome 2 - People are able to live in the community	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
MSG 1.1 - Number of emergency admissions - A&B	8,716	9,046	9,003	8,902	8,509	●	↑
MSG 2.1 - Number of unplanned bed days acute specialties - A&B	65,707	65,030	67,060	64,407	57,139	●	↑
MSG 2.2 - Number of unplanned bed days MH specialties - A&B	13,034	13,755	14,623	13,835	15,896	●	↓
MSG 3.1 - Number of A&E attendances - A&B	16,130	16,026	16,912	17,623	16,960	●	↓
MSG 6.1 - % of population in community or institutional settings - A&B	2.2%	2.2%	2.2 %	2.1 %	2.0 %	●	⇒
A&B - % of LAC who are looked after at home or in a community setting				82.4 %	90.0 %	●	↑

Outcome 3 - People have positive service-user experiences	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-2 - % of adults supported at home who agree they are supported to live as independently	84.0%	79.0 %	79.0%	79.0 %	81.0 %	●	⇒
NI-5 - % of adults receiving any care or support who rate it as excellent or good	82.0%	80.0 %	80.0%	85.0 %	80.0 %	●	↑
NI-6 - % of people with positive experience of their GP practice	91.0%	85.0 %	85.0%	85.0 %	83.0 %	●	⇒
MSG 3.2 - % A&E attendances seen within 4 hours - A&B	95.0%	93.5%	93.4%	91.6%	95.0 %	●	↓
CA72 - % LAAC >1yr with a plan for permanence	88.0%	100.0%	65.0%	85.2%	81.0%	●	↑
Outcome 4 - Services are centred on quality of life	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-7 - % of adults supported at home who agree their support had impact improving/maintaining quality of life	87.0%	74.0 %	74.0%	74.0%	80.0%	●	↓
NI-12 - Rate of emergency admissions per 100,000 population for adults	12,145	12,617	12,678	11,353	12,241	●	↑
NI-14 - Readmission to hospital within 28 days per 1,000 admissions	80.0	87.0	87.0	76.0	98.6	●	↑
MSG 5.1 - % of last six months of life by setting community & hospital - A&B	90.0%	90.0%	90.0%	89.9%	88.2%	●	↑
A&B - % of Waiting Time breaching >12 weeks				21 %	25 %	●	↓
Outcome 5 - Services reduce health inequalities	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-11 - Rate of premature mortality per 100,000 population	418	380	380	393	425	●	↓
NI-17 - % of SW care services graded 'good' '4' or better in Care Inspectorate inspections	84.0%	86.0%	86.0%	84.1 %	83.0 %	●	↓
NI-19 - No of days people [75+] spent in hospital when ready to be discharged, per 1,000 population	597 Days	625 Days	640 Days	540 Days	640 Days	●	↑

CPC01.4.4 - % Waiting time from a patient's referral to treatment from CAMHS	95.0%	89.0 %	91.0%	92.5%	90.0%	●	↑
AC21 <=3 weeks wait between SM referral & 1st treatment	93.0%	95.0 %	90.5%	91.3%	90.0%	●	↓
Outcome 6 - Unpaid carers are supported	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-8 - % of carers who feel supported to continue in their caring role	41.0%	33.0 %	33.0%	33.0%	37.0%	●	⇒
Outcome 7 - Service users are safe from harm	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-9 - % of adults supported at home who agree they felt safe	84.0%	83.0 %	83.0%	83.0%	83.0%	●	⇒
CP16 - % of Children on CPR with a completed CP plan	91%	99 %	91%	89%	100%	●	↓
CP43 - No of Child Protection Repeat Registrations - 18 months				0	0	●	⇒
CJ63 - % CPO cases seen without delay - 5 days	86.0%	94.0%	84.8%	95.6%	80.0%	●	↑
A&B - % of Adult Protection referrals completed within 5 days				45.8 %	80.0%	●	↓
A&B - % of Adult Protection referrals that lead to AP Investigation				12.5%	10.0%	●	↑
A&B - % of complaints [Stage 2] responded within timescale				25.0 %	20.0 %	●	↑
Outcome 8 - Health and social care workers are supported	2016/17	2017/18	2018/19	2019 Calendar Year	Target (CY)	Status	Trend
NI-10 - % of staff who say they would recommend their workplace as a good place to work	71%	71%	71%	71%	67%	●	⇒
Health & Social Care Partnership % of PRDs completed	52%	30%	37%	37%	90%	●	↓
SW only - HSCP Attendance	3.90 Days	5.70 Days	5.20 Days	5.23 Days	3.78 Days	●	↓

Outcome 9 - Resources are used effectively in the provision of health and social care services	2016/17	2017/18	2018/19	2019 Calendar Year	Target	Status	Trend
NI-15 - Proportion of last 6 months of life spent at home or in a community setting	89.8%	89.6%	90.0%	91.0%	89.0%	●	↑
NI-18 - % of adults with intensive needs receiving care at home	67%	67%	67%	68%	62%	●	↑
NI-20 - % of health & care resource spend on hospital stays where patient admitted in an emergency	24%	22%	22%	22%	24%	●	⇒
MSG 4.1 - Number of DD bed days occupied - A&B	6,803	8,414	9,530	8,113	8,604	●	↑

Appendix 2a: Adult Services – Inspection Reports for 2019/20

Internal Care Home Provision					
Service Provider	How well do we support people's wellbeing?	How well is care and support planned?	How good is our setting?	How good is our staff team?	How good is our leadership?
Ardfenaig	4	4	4	4	4
Eadar Glinn	4	3	4		
Gortanvogie	4	4	4	4	3
Struan Lodge	4	5			
Thomson Court	5	4			
Tigh a Rhuda	4	3	4	3	2
External Care Home Provision					
Service Provider	How well do we support people's wellbeing?	How well is care and support planned?	How good is our setting?	How good is our staff team?	How good is our leadership?
Ardenlee	4	4	4	5	4
Ardnahein	4	3	3	4	4
Argyle Care Centre	4	4			
Ashgrove	4	5			
Etive Care Home	4	3	4	4	4
Kintyre Care Centre	2	3	3	3	3
Lochside Care Home	4	4	4	5	4
Morar Lodge Nursing Home	5	4			
North Argyll House	5	4			
Northwood House	5	4			

Palm Court	2	2	4	2	2
Internal Home Care & Day Centre Provision					
Service Provider	How well do we support people's wellbeing?	How well is care and support planned?	How good is our setting?	How good is our staff team?	How good is our leadership?
ASIST	5	4	4	4	3
Service Provider	Care & Support	Environment	Staffing	Management & Leadership	
Mid Argyll , Jura, Islay, and Kintyre Homecare	4	NA	4	4	
Mull & Iona, Tiree and Colonsay Homecare	5	NA	4	4	
Lynnside Day Centre	5	5	5	4	
Struan Lodge Day Care	4	5	5	4	
Thomson Court Day Care	5	4	5	4	
Phoenix Resource Centre	5	4	5	5	
Greenwood	5	NA	4	4	
Community Resource Team	4	NA	4	3	
Lochgilphead Resource centre	6	4	4	5	
Lorne Resource Centre	4	4	4	3	
Woodlands Centre	5	4	5	5	

External Home Care & Day Centre Provision				
Service Provider	Care & Support	Environment	Staffing	Management & Leadership
Allied Health Care (Helensburgh & Cowal)	5		4	4
Allied (Isle of Bute)	5		4	4
Argyll Homecare	5		5	4

Care+ (Oban)	4		3	3
Careplus	5		5	5
Carers Direct	4		4	4
Carr Gomm Argyll & Bute	5		5	5
Oasis Day Centre	6	6	6	5
Cowal Care Services	6		6	5
Crossroads (Cowal & Bute)	5		5	4
Joans Carers	4		5	4
Mears A&B	5		5	5
Premier Healthcare	5		5	4
Crossroads North Argyll	5		5	4
Blue Triangle Oban Housing	4		3	3
Affinity Trust	5		4	5
Enable Scotland (Dunoon)	5		5	5
Enable Scotland (Helensburgh)	5		5	6
Enable Scotland (Lorn & Isles)	5		5	5
Enable Scotland (Helensburgh Day Services)	5	4	5	5
Mariner Homecare	5		5	5
South Peak	5	4	4	4
Maxie Richards Foundation	5		5	5
Beechwood	5			4
Oban Community Carers Ltd	5		5	4
ACHA Sheltered Housing Service	5		5	4
Cowal Care Services Home Care	6		6	5
Abbeyfield Helensburgh	6		5	6
HELP (Argyll & Bute) Ltd Housing Support Service	6		6	6

Appendix 2b: Children & Families Inspection Reports 2019/20

The latest inspection grading for Children and Families services registered with the Care Inspectorate are as below.

Children and Families - Quality Theme Care Inspectorate Grades (1-6)						
Care Inspectorate Number	Name	How well do we support people's wellbeing?	How well is care and support planned?	How good is our setting?	How good is our staff team?	How good is our leadership?
CS2005091229	Achievement Bute	5	5		5	5
CS2012307560	Cornerstone	5	5		4	4
CS2010249688	Ardlui Respite House – Sense Scotland	4	3			
CS2003000426	Helensburgh Children's Unit (Argyll and Bute Council)	4	4			
CS2003000461	Shellach View (Argyll and Bute Council)	5	5			
CS2003000451	Dunclutha Residential Home (Argyll and Bute Council)	5	5			
CS2006115758	Dunoon School Hostel (Argyll and Bute Council)	3	3	4	4	3
CS2006130205	Glencruitten Hostel (Argyll and Bute Council)	4	4	5	4	4
CS2004082322	Argyll and Bute Adoption Service	5	5		5	4
CS2004082341	Argyll and Bute Fostering Service	5	5		5	4

Appendix 3: Glossary of terms	
Advanced Nurse Practitioners (ANP)	Advanced Nurse Practitioners are Registered Nurses who have done extra training and academic qualifications to be able to examine, assess, make diagnoses, treat, prescribe and make referrals for patients who present with undiagnosed/undifferentiated problems.
Alcohol and Drug Partnership (ADP)	A multi-agency group tasked by the Scottish Government with tackling alcohol and drug issues through partnership working. There are 30 ADPs in Scotland.
Analogue to Digital	The Technology Enabled Care (TEC) Programme has been exploring the scope of benefits of switching the current Telecare provision from an analogue based system via traditional telephony connections, to a digital service.
Allied Health Professionals (AHPs)	Allied Health Professionals (AHPs) are a diverse group of professionals supporting people of all ages focusing on personal outcomes. They provide preventative interventions in such areas as supported self-management, diagnostic, therapeutic, rehabilitation and enablement services to support people to live healthy, active and independent lives. The Active and Independent Living Programme (AILP) supports AHPs, working in partnership with multi-disciplinary teams and agencies to improve the health and wellbeing of the population throughout the life-course. For the full list of AHP professions please see: https://www2.gov.scot/Topics/Health/NHS-Workforce/Allied-Health-Professionals
Alternative Care Pathways (ACP)	Community or primary care pathways ; Self-care and are an effective alternative pathway of care for patients with long term conditions that enables health professionals to identify when referral to expert community teams may be a better option for the patient.
Anticipatory Care/ Anticipatory Care Planning	An Anticipatory Care Plan is a dynamic record that should be developed over time through an evolving conversation, collaborative interactions and shared decision making. It is a summary of Thinking Ahead discussions between the person, those close to them and the practitioner. More information is available on: https://www.gov.scot/publications/anticipatory-care-planning-frequently-asked-questions/
Attend Anywhere	Attend Anywhere is a web-based platform that helps health care providers offer video call access to their services as part of their 'business as usual', day-to-day operations
Beating the Blues	Beating the Blues® is a computerised cognitive behavioural therapy (CBT) programme for depression and anxiety.
Benchmarking	The process of comparing quantitative or qualitative information, often related to practices, performance or prices, against a point(s) of reference. A point(s) of reference might be, for example, an agreed standard, established targets, or the performance of other organisations.

CareFirst information system	CareFirst is a web based, multi modular Case Management system commonly used by local authorities for recording care arrangements, statutory interventions and related events pertaining to Social Care Service Users.
Cardiopulmonary resuscitation (CPR)	Cardiopulmonary resuscitation is an emergency procedure that combines chest compressions often with artificial ventilation in an effort to manually preserve intact brain function until further measures are taken to restore spontaneous blood circulation and breathing in a person who is in cardiac arrest.
Child Protection Register (CPR)	In Scotland the child protection register (CPR) is a confidential list of all children in the local area who have been identified as being at risk of significant harm. It allows authorised individuals to check if a child they are working with is known to be at risk.
Chronic Obstructive Pulmonary Disease (COPD)	Chronic Obstructive Pulmonary Disease (COPD) is an umbrella term used to describe progressive lung diseases including emphysema, chronic bronchitis, and refractory (non-reversible) asthma. This disease is characterized by increasing breathlessness.
Cognitive Behavioural Therapy (CBT)	Cognitive behavioural therapy (CBT) is a talking therapy that can help you manage your problems by changing the way you think and behave. It is most commonly used to treat anxiety and depression, but can be useful for other mental and physical health problems.
Core and Cluster Housing	The term 'cluster accommodation' refers to shared accommodation, in which people have their own private bedroom, or other single person accommodation units, but they share communal facilities such as kitchens, bathrooms and so on
Health and Social Care Partnership (HSCP)	Health and Social Care Partnerships, (HSCPs) are the organisations formed as part of the integration of services provided by Health Boards and Councils in Scotland. Each partnership is jointly run by the NHS and local authority. HSCPs manage community health services and create closer partnerships between health, social care and hospital-based services.
Information Services Division (ISD)	The Information Services Division (ISD) is a division of National Services Scotland, part of NHS Scotland. ISD provides health information, health intelligence, statistical services and advice that support the NHS in progressing quality improvement in health and care and facilitates robust planning and decision making.
Integration Authority (IA)	The Public Bodies (Joint Working) (Scotland) Act 2014 requires councils and NHS boards to work together to form new partnerships, known as integration authorities (IAs).

Integration Delivery Principles	The integration planning and delivery principles are the lens through which all integration activity should be focused to achieve the national health and wellbeing outcomes. More information is available on: https://www2.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Principles
Integration Joint Board (IJB)	The Argyll and Bute Integration Joint Board is responsible for the planning, performance, resourcing, and operational management of health and social care services delivered through the Argyll & Bute Health & Social Care Partnership (HSCP).
iMatter	Imatter is a staff experience continuous improvement tool designed with staff in NHSScotland to help individuals, teams and Health Boards understand and improve staff experience.
Interagency Referral Tri-partite Discussions (IRTD)	Interagency planning and decision making procedures for responding to allegations or concerns about children at risk.
Just Checking	Just Checking is an activity monitoring system that helps people live in their own homes for longer by showing family and professionals their day-to-day capabilities — or where support is needed.
Lean	Lean Process Improvement is the process of continually reviewing a process identifying waste or areas in a process map that can be improved. It is an ongoing feedback process of loop that over time improves the business through better processes.
Local Intelligence Support Team (LIST Team ISD)	Local Intelligence Support Team (LIST Team ISD) have staff with a wide skill set who can assist GP Clusters and Practices to gain a better understanding of their own data and with data linkage give a broader picture of how patients are interacting across a complex landscape. Profiling local populations, projecting future demand and looking at alternative models of service delivery and care can help find potential answers to complex problems
Locality Planning Group (LPG)	A Locality Planning Group (LPG) brings together NHS and Council staff, community members, carers, representatives from third and independent sectors and community based groups. These individuals collectively work together to improve the health and wellbeing of the community in which they live. LPGs develop a locality plan, influence priorities in their local area, agree mechanisms for all members to contribute to the delivery of actions at a local level and review and regularly report progress to the Strategic Planning Group.

Looked After Children (LAC)	Under the Children (Scotland) Act 1995, ' looked after children ' are defined as those in the care of their local authority – sometimes referred to as a 'corporate parent'.
National Health and Wellbeing Outcomes (NHWBO)	The National Health and Wellbeing Outcomes are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care.
NHSGGC	This refers to NHS Greater Glasgow and Clyde from whom we buy acute health services.
Options Appraisal	Options Appraisal is a technique for setting objectives, creating and reviewing options and analysing their relative costs and benefits.
Out of Hours Services (OOH)	Across Scotland, NHS Boards provide Primary Care Out of Hours (OOH) services for patients' when their registered GP practice is closed.
The Partnership	The Partnership means the Health and Social Care Partnership, also referred to as the HSCP.
Psychological Therapies	A range of interventions, based on psychological concepts and theory, which are designed to help people understand, and make changes to, their thinking, behaviour and relationships in order to relieve distress and to improve functioning.
Reablement	Reablement is a short and intensive service, usually delivered in the home, which is offered to people with disabilities and those who are frail or recovering from an illness or injury.
Scotland Excel	Scotland Excel is the Centre of Procurement Expertise for the local government sector and offers training and provides assessment, consultancy and improvement services to help councils transform their procurement capability.
Scottish Children's Reporter Administration (SCRA)	The Scottish Children's Reporter Administration (SCRA) is a national body focused on children and young people most at risk. SCRA was formed under the Local Government (Scotland) Act 1994 and became fully operational on 1st April 1996.
Self-Directed Support	Self-Directed Support is a way of providing social care support that empowers individuals to have informed choice about how support is provided to them with a focus on working together to achieve individual outcomes.
Self-management	Self-management is the name often given to a set of approaches which aim to enable people living with long term conditions to take control and manage their own health and put them in the "driving seat" of their care.

SOURCE Team ISD	The Source Tableau Platform is a tableau visualisation tool with interactive features aimed at Health and Social Care Partnerships (HSCPs) or Integrating Authorities (AI). It contains a wide range of information on health activities, expenditure and linked data to support HSCPs with understanding local activities, decision making, and planning and performance management.
Strategic Planning Group (SPG)	The Strategic Planning Group is responsible for advising the Integration Joint Board, the development and review of the HSCP Strategic Plan and Commissioning Plan ensuring the alignment of service strategies. This group is also responsible for monitoring progress against the strategic priorities and National Health and Wellbeing Outcomes (NHWBO).
SWOT analysis	SWOT Analysis is a useful technique for understanding your Strengths and Weaknesses, and for identifying both the Opportunities and the Threats of particular options
Wellbeing Monitoring System (Activity Monitoring System)	These systems are designed to automatically check your wellbeing on a regular basis. Some rely on you pressing a button once or twice a day. If you do not press the button a call centre will ring you to check you are ok. Just Checking is an example of one type of activity monitoring system.

If you would like a copy of this document in Gaelic or another language or format, or if you require the services of an interpreter, please contact Argyll and Bute Health and Social Care Partnership on 01546 605664 or email nhs.abhscp@nhs.net



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ARGYLL AND BUTE COUNCIL

**HELENSBURGH & LOMOND AREA
COMMITTEE**

**COMMUNITY PLANNING AND
COMMUNITY DEVELOPMENT**

17th December 2020

MONITORING OF SUPPORTING COMMUNITIES FUND 2019/20

1.0 EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to provide monitoring information on the funds distributed through the council's Supporting Communities Fund in 2019/20.
- 1.2 17 constituted, not-for-profit community organisations were awarded funding for community projects at the Area Committee meeting on 24 April 2019. Organisations were required to spend their funding within the 2019/20 financial year and to submit an end of project monitoring report.
- 1.3 The council's Supporting Communities Fund in 2019/20 provided up to 100% of eligible project costs, with organisations able to apply for up to £2,500.
- 1.4 Members are asked to consider the contents of the report showing a summary of the information supplied by organisations in their end of project monitoring reports.
- 1.5 Members are asked to note the return of £323.09 and consider whether this should be carried forward to be included in funds available for dispersal in Helensburgh and Lomond in 2021/22.

ARGYLL AND BUTE COUNCIL

**HELENSBURGH & LOMOND AREA
COMMITTEE**

**COMMUNITY PLANNING AND
COMMUNITY DEVELOPMENT**

17th December 2020

MONITORING OF SUPPORTING COMMUNITIES FUND 2019/20

2.0 INTRODUCTION

- 2.1 This report highlights the positive outcomes for communities in Helensburgh and Lomond through the allocation of the Council's Supporting Communities Fund in 2019/20.
- 2.2 A total of £30,320.70 was awarded to 17 organisations in 2019/20. Organisations had up to two months from the end of their project, to complete and return an End of Project Monitoring Report.
- 2.3 A total of £323.09 has been returned. This amount can be made available for allocation in the financial year 2021/22.
- 2.4 Two groups asked for an extension due to the Covid-19 pandemic affecting the ability of the projects to be completed, these were granted an extension until end of November 2020. End of project reports will be completed as soon as possible following this and will be noted in the next Monitoring of Supporting Communities Fund report.

3.0 RECOMMENDATIONS

It is recommended that the Helensburgh & Lomond Area Committee:

- 3.1 Note the positive contribution of the funds to communities in Helensburgh and Lomond, detailed in paragraph 4.1 and the attached table.
- 3.2 Agree that the unspent funds of £323.09, detailed in paragraph 4.4. of the report be carried forward to be included in funds available for dispersal in 2021/22.

4.0 DETAIL

- 4.1 The funding distributed enabled communities across Helensburgh and Lomond to participate in a variety of projects with focuses including; mental and physical health, outdoor activities, combating loneliness and intergenerational participation. Highlights include:
- A festival highlighting local history, and enabling families and children to learn about arts and culture.
 - Cooking demonstrations and a recipe book for foodbank clients to promote cooking fun and nutritious family meals.
 - Peer support activities, social events and volunteering opportunities for veterans to help tackle loneliness, isolation and mental health issues.
- 4.2 The attached table summarises information received from individual projects.
- 4.3 15 of the 17 projects awarded funding submitted an end of project monitoring report. Two groups have asked for an extension until end of November 2020 due to the Covid-19 pandemic affecting their ability to complete their projects.
- 4.4 There is a return of unspent funds totalling £323.09 from Project Trust and Route 81. This can be distributed in the 2021/22 round of grant funding.
- Project Trust requested funding for costs towards a global citizenship festival. Partial funding was also awarded from Oban Lorn and the Isles Area Committee. The cost of travel to the event was less than anticipated and the underspent funds of £182.48 have been returned to Helensburgh & Lomond.
 - Route 81 Youth Project requested funding to deliver a Friday Footprint environmental awareness project. This included participation in the 'Every Can Counts' initiative as well as the delivery of peer led sessions with young people and community beach cleans. Due to Covid-19, the community event scheduled for March 2019 was unable to go ahead as planned. The unspent funds of £140.61 are to be returned.

No	Organisation	Project Funded	Total Projected Cost	Award	Council's Supporting Communities Fund Award	Comments	Total Number of Beneficiaries in reported categories		
							M	F	Age
1	ACT – Argyll & the Isles Coast & Countryside Trust	Moving On sessions for mental health	£2,912.53	£2,500	£2,523.87	The 5 planned outdoor sessions took place, with staff facilitating activities such as green wood working and gardening. Participants cooked and shared a communal meal each day.	7	2	25-64: 9
2	Arrochar and Tarbet Community Development Trust - Generation Communities	Venue Hire, transport, activities, equipment for a health/fitness walking group	£2,000	£2,000	£2,000	The aims of intergenerational project were achieved through regular meetings and activities such as musical sessions, and cinema visits. Many of the group were also supported to join the local walking group, giving them the opportunity to interact with the wider community.	16	15	0-4: 2 5-9: 10 10-16: 4 25-64: 3 65+: 12
3	Cove and Kilcraggan Community Council	Enhance area, through plants, maps/leaflets and improved on-line presence	£1,150	£1,150	£1,162.99	4 half barrel wood planters were purchased and filled with plants. Maps and leaflets have been produced and are waiting for Covid-19 measures to be lifted to be appreciated by visitors. Approval was given to create a mobile app for visitors using WordPress.	Not Given		Not Given
4	Cove and Kilcraggan Lunch Club	Running costs	£3,557.34	£1,554.70	£3,112.96	The lunch club took place weekly during the school term providing a social event for the members to look forward to, including trips out and a Christmas dinner.	Not Given		Not Given
5	Cove Burgh Hall	Speaker fee, workshops, marketing and music	£2,200	£1,800	£2,237	The festival provided opportunities for children, young people, families and residents to access culture and arts.	Not Given		Not Given

No	Organisation	Project Funded	Total Projected Cost	Award	Council's Supporting Communities Fund Award	Comments	Total Number of Beneficiaries in reported categories		
							M	F	Age
		performances				Samba lessons, developing a logo and magic workshops took place. Audiences learnt about local history through a documentary film about Hamish MacInnes and the making of the film with a Q&A with the director.			
6	ENABLE Scotland (Leading The Way)	Food Hygiene training, writing tutor, pots and pans and top soil, seeds etc for kitchen garden/lunch club and writing course	£2,498.04	£2,468	£2,468	10 members completed REHIS food hygiene training. The development of the allotment has allowed the fruit and vegetables grown to be used in meals for lunches, and the Bothy Book Volume 1 has been published by members of the creative writing group.	22	21	25-64: 38 65+: 5
7	Gareloch Riding for the Disabled Association	Upkeep of one horse	£2,316.20	£2,316	£2,401.33	Livery and upkeep of one horse were supported which allowed all sessions to go ahead. This enabled younger riders to have consistent, regular lessons which increased their rate of improvement.	4	2	0-4: 1 5-9: 5
8	Garelochhead Senior Citizens	Hire of hall, insurance, Christmas lunch and bus trip or theatre outing and speakers expenses.	£800	£500		An extension until end of November 2020 has been requested due to the Covid-19 pandemic.			
9	Garelochhead Station Trust	Office space rent and costs, transport costs for social and educational activities for a drop-in facility for partners and	£3,495	£2,245	£5,895	Office space has enabled those seeking information and advice easy access to resources. The volunteering opportunities created, including driving the minibus and serving veterans at the brunch club, has contributed greatly to	Not Given		25-64: 20 65+: 68

No	Organisation	Project Funded	Total Projected Cost	Award	Council's Supporting Communities Fund Award	Comments	Total Number of Beneficiaries in reported categories		
							M	F	Age
		veterans to access information.				the wellbeing of the members. The funding also helped members to take part in the Lochgilphead Armed Forces day celebrations, visit the Garden for Heroes in Dunfermline and host a 1940's tea dance in partnership with the Police Youth Volunteers.			
10	Grey Matters	Cost of 5 excursions for up to 52 seniors and costs for Christmas party for 100	£3,740	£1,018.50	£2,098	Older people from all over the area were able to take part in activities that tackled loneliness and isolation. Events took place on a weekend or during a holiday period offering older people something to look forward to when many services stop.	53	89	25-64: 10 65+: 132
11	Helensburgh and Lomond Foodbank	Soup makers, kitchen utensils and cupboard for storage for Meal in a bag project	£2,354	£1,018.50	£1,018.50	A cooking demonstration was delivered in collaboration with the plot to pot project. A recipe book called Tin Can Cook was used with a few changes to ensure thought was given to gas/electricity costs. Ingredients were bagged with a recipe for meals for 2-3 people. Feedback from clients was positive with queries received about future recipes,	30	20	10-16: 1 17-24: 2 25-64: 45 65+: 2
12	Helensburgh Savoy	Towards cost of staging the group's main production, including hire of hall, costumes, insurance and staff costs	£16,100	£2,500	£18,162	744 Adults and 168 children attended the show. The cast reported benefits from being part of a community activity, learning and developing new skills in music, singing, choreographed dance, using technical sound equipment and	18	33	10-16: 5 17-24: 13 25-64: 25 65+: 8

No	Organisation	Project Funded	Total Projected Cost	Award	Council's Supporting Communities Fund Award	Comments	Total Number of Beneficiaries in reported categories		
							M	F	Age
						operating as backstage crew.			
13	Loch Long Jetty Association	Print costs for a booklet of Loch Long history, and life buoyancy aids and life ring	£1,901.14	£1,900	1,901.59	A 64 page educational information booklet about Loch long has been produced. Safety equipment was purchased to allow for school visits, as well as litter picking equipment.	40	40	5-9: 40 10-16: 20 25-64: 10 65+: 10
14	Project Trust	Costs of a Global Citizenship festival including volunteer expenses, travel, printing of resources and staff costs	£5,328.80	£248	£2,041.52	Children from 17 primary schools across Argyll & Bute received three 45 minute workshops delivered by Global Citizenship Ambassadors. As this was an Argyll and Bute wide project, funding was also received from Oban Lorn and the Isles Area Committee. As the festival took place in Oban and only one school from Helensburgh and Lomond participated, funds are being returned to Helensburgh and Lomond. Unspent funds of £182.48 have been returned.	51	63	5-9: 30 10-16: 56 17-24: 5 25-64: 23
15	Rosneath Peninsula Highland Gathering	Towards cost of staging the highland games, insurance, medals, trophies, PA, toilets and advertising,	£14,250	£2,500	£15,052.81	The highland games took place with various events, there was an increase in local community members competing and volunteering. The piping and dancing convener reported an increase in young people becoming members of the pipe band and local dancing school.	Not Given		0-4: 50 5-9: 80 10-16: 150 17-24: 80 25-64: 150 65+: 200
16	Route 81 Youth Project	Staff costs and materials for 28	£4,887.34	£2,477	£2,336.39	The Footprint Friday environmental awareness project was successfully	21	24	0-4: 1 10-16: 21

No	Organisation	Project Funded	Total Projected Cost	Award	Council's Supporting Communities Fund Award	Comments	Total Number of Beneficiaries in reported categories		
							M	F	Age
		week Footprint Friday project				delivered. This included participation in the 'Every Can Counts' initiative as well as 34 peer led sessions with the young people and 2 community beach cleans. Due to Covid-19, the planned community event scheduled for March 2019 was unable to go ahead. Unspent funds of £140.61 to be returned.			17-24: 4 25-64: 15 65+: 4
17	Welcome In	Extend activities offered by the group, purchase of gardening tools, membership to National Trust and cost of a monthly local trip for 5 people to teach budgeting skills	£2,125	£2,125		An extension until end of November 2020 has been requested due to the Covid-19 pandemic.			

Key

	Report in and award fully spent
	Report pending or Report in and money to be returned
	Report outstanding or Award has not been spent at all

5.0 CONCLUSION

- 5.1 The project monitoring form has a section asking for comments on the grant process. Not all applicants have completed this section but of those received the comments have largely been very positive. The majority note that the process is simple, straightforward, clear and concise. Thanks are noted for the support received from staff and elected members.

6.0 IMPLICATIONS

- 6.1 Policy: None
- 6.2 Financial: The report sets out the expenditure from the Helensburgh & Lomond Area 2019/20 budget for the allocation of the Supporting Communities Fund.
- 6.3 Legal: None
- 6.4 HR: None
- 6.5 Fairer Scotland Duty / Equalities: Compliant with policy
- 6.6 Risk: None
- 6.7 Customer Service: None

Chief Executive – Pippa Milne
Policy Lead - Cllr Mary Jean Devon
Community Planning Manager - Rona Gold
10 November 2020

For further information contact: Kirsty Moyes on 01436 657635 /
kirsty.moyes@argyll-bute.gov.uk

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ARGYLL AND BUTE COUNCIL

HELENSBURGH AND LOMOND AREA
COMMITTEE

LEGAL AND REGULATORY SUPPORT 17 DECEMBER 2020

APPOINTMENTS TO AREA COMMUNITY PLANNING GROUP

1.0 INTRODUCTION

- 1.1 This report asks the Area Committee to confirm appointments of Elected Members to the Helensburgh and Lomond Area Community Planning Group.

2.0 RECOMMENDATIONS

- 2.1 The Area Committee is asked to consider the appointments of the 3 Elected Member representatives on the Helensburgh and Lomond Area Community Planning Group.

3.0 DETAIL

- 3.2 The appointments to the Helensburgh and Lomond Area Community Planning Group were made in June 2017 and were in the following terms:-

“the Chair and Vice-Chair of the Area Committee plus one other Member from the Ward not already represented”

- 3.3 Due to the change in Chair and Vice-Chair of the Area Committee, the appointments to the Area CPG (in line with the previous decision) would be Councillor Morgan, Councillor Hardie and a Councillor from the remaining ward – Ward 11. Councillor Douglas is currently appointed as a member of the Group as previously Ward 10 was the “Ward not already represented”. It is open to the Area Committee to confirm the 3 appointments.

- 3.4 Appointment to the Area Community Planning Group will be until the next Local Government Elections scheduled for May 2022. It should be noted that the meetings are open to the public and as such any Member of the Area Committee can attend.

4.0 CONCLUSION

- 4.1 This report asks the Area Committee to confirm those Members who will represent the Council on the Helensburgh and Lomond Area Community Planning Group.

5.0 IMPLICATIONS

- 5.1 Policy – none

- 5.2 Financial – none.
- 5.3 Legal – none
- 5.4 HR – none
- 5.5 Fairer Scotland Duty:
 - 5.5.1 Equalities – protected – none
 - 5.5.2 Socio-economic Duty – none
 - 5.5.3 Islands – none
- 5.6 Risk – none
- 5.7 Customer Service – none

Douglas Hendry, Executive Director with responsibility for Legal and Regulatory Support

4 November 2020

For further information contact: Shona Barton, Committee Manager, 01436 657605, shona.barton@argyll-bute.gov.uk

APPENDICES

None.

 ARGYLL AND BUTE COUNCIL
HELENSBURGH AND
LOMOND AREA COMMITTEE

CUSTOMER SUPPORT SERVICES

17 DECEMBER 2020

 AREA SCORECARD FQ1 and FQ2 2020-21

1 Background

- 1.1 Due to operating impacts of Covid-19 it was agreed to defer the regular reporting of performance to the Area Committees. As the Council is now in the recovery phase this paper presents the Area Report for the first two Financial Quarters in 2020/21 (April-June 2020 and July-September 2020) and illustrates the agreed performance measures.
- 1.2 A summary of all the measures is included at the start of the report. The summary provides an overview of the number of measures and how many are Red, Amber, Green or No Target.
- 1.3 As previously agreed individual car park income will be reported to the Area Committee.

Due to the total number of car parks Council wide individual car park measures have not been built in Pyramid however, they are presented individually in the attached Performance Report.

Presenting the information in this manner enables the Area Committee to view performance while ensuring any additional officer workload is kept to a minimum.

It is proposed that the Area Committee agree to this practice going forward.

The measure is in a consistent format for the Council and all 4 administrative areas and continues to have commentary at both Area and Council wide levels. There are no 'trend' arrows for the car park income as it is a cumulative total.

- 1.4 Also as previously agreed the Positive Destinations measure has been replaced with the following Participation measure –

The proportion of 16 – 19 year olds participating in a positive destination (Education, Training or Employment.)

This information is now presented in the Performance Report at both Council wide and Area level.

- 1.5 Regular updates for both Primary and Secondary School inspections are presented separately to the Area Committee. The measures in Pyramid and

subsequently the Performance Report sees little or no change on a quarter to quarter basis.

It is proposed that the Area Committee agree to the removal of both these measures from the Performance Report.

- 1.6 To improve the response to performance queries, it is requested that either the Responsible Named Officer or Sonya Thomas are contacted once the Quarterly Performance Report is received with any queries. This should enable some queries being resolved or clarified prior to the Area Committee meeting, and therefore being carried forward as Actions at a subsequent meeting.
- 1.7 A short key to symbols / layout is attached. (Appendix 1).
- 1.8 An illustration of how the Business Outcomes align to the Corporate Outcomes is attached. (Appendix 2).

2 Recommendations

- 2.1 It is recommended that the Area Committee-
- a) Notes the performance presented on the Scorecard and supporting commentary.
 - b) Upon receipt of the Quarterly Performance Report the Area Committee contact either the Responsible Named Officer or Sonya Thomas with any queries.
 - c) Agree to the proposed presentation of Car Park Income
 - d) Agree to the removal of both Primary and Secondary School Inspection measures.
 - e) Note that work is ongoing and to respond to Sonya Thomas with requests or comments regarding the layout and format of the Report and Scorecard.

3.0 IMPLICATIONS

3.1	Policy	None
3.2	Financial	None
3.3	Legal	None
3.4	HR	None
3.5	Fairer Scotland Duty	No impact assessment required for this report.
3.5.1	Equalities	None. If requested the Area Committee Performance Report can be supplied in a different format.
3.5.2	Socio-economic Duty	None
3.5.3	Islands	None
3.6	Risk	None
3.7	Customer Service	None

Kirsty Flanagan, Executive Director with responsibility for Customer Support Services

**Jane Fowler
Head of Customer Support Services**

For further information, please contact:
Sonya Thomas
Performance and Improvement Officer
Customer Support Services
01546 604454

Appendix 1: Key to symbols

Appendix 2: Illustration of Business Outcomes aligned to Corporate Outcomes

Appendix 3: FQ1 and FQ2 2020/21 H&L Word Report in pdf format

PERFORMANCE REPORTS – KEYS TO SYMBOLS

WORD REPORT

STATUS SYMBOL

- This is colour coded and indicates if the performance is good – Green; or off track – Red

TREND ARROW

- This indicates the trend of the performance between the last two periods

NAME IN BRACKETS (StreetScene)

- This indicates not only where in Pyramid you can find the data but also what team in the council deals with this element of performance

GREY SUCCESS MEASURE

- This indicates that the performance measure is a council-wide one

WHITE SUCCESS MEASURE

- This indicates that the performance measure is a local area one

ON GRAPHS IN PYRAMID

GREEN

- Performance is positively within desired parameters / meeting target / positively exceeding target

RED

- Performance is negatively out-with desired parameters / not meeting target / negatively exceeding target

KEY

- There is a key / explanation to each graph indicating Target / Actual / Benchmark alongside each graph

THE SCORECARD

- This is a plain summary of the success measures
- It mirrors the word report – BUT without commentary / names / teams
- It is simply a picture

Joint Over-arching Vision	Argyll and Bute's Economic Success is built on a growing population						
Council Mission	Making Argyll and Bute a place people choose to Live, Learn, Work and do Business						
	Choose Argyll, Love Argyll						
	A Place people choose to Live			A Place people choose to Learn	A Place people choose to Work and Do Business		Getting It Right
Corporate Outcomes	People live active healthier and independent lives	People will live in safer and stronger communities	Children and young people have the best possible start	Education, Skills and training maximise opportunities for all	Our economy is diverse and thriving	We have an infrastructure that supports sustainable growth	
Business Outcomes	BO101 We Ensure Information And Support Is Available For Everyone.	BO104 Our Communities Are Protected And Supported.	BO106 Our Looked After Young People Are Supported By Effective Corporate Parenting.	BO108 All Our Children And Young People Are Supported To Realise Their Potential.	BO110 We Support Businesses, Employment And Development Opportunities.	BO113 Our Infrastructure Is Safe And Fit For The Future.	BO115 We Are Efficient And Cost Effective.
	BO102 We Provide Support, Prevention And Opportunities To Help People Make Better Lifestyle Choices.	BO105 Our Natural And Built Environment Is Protected And Respected.	BO107 The Support And Lifestyle Needs Of Our Children, Young People, And Their Families Are Met.	BO109 All Our Adults Are Supported To Realise Their Potential.	BO111 We Influence And Engage With Businesses and Policy Makers.	BO114 Our Communities Are Cleaner And Greener.	BO116 We Engage And Work With Our Customers, Staff And Partners.
	BO103 We Enable A Choice Of Suitable Housing Options.				BO112 Argyll & Bute Is Promoted To Everyone.		BO117 We Encourage Creativity And Innovation To Ensure Our Workforce Is Fit For The Future.
CROSS-CUTTING	Socio-Economic Duty, Equalities, Gaelic						
OUR VALUES	<p style="text-align: center;">Caring, Committed, Collaborative & Creative Cùramach, Dealasach, Cruthachail agus Com-pàirteach</p>						

HELENSBURGH & LOMOND FQ2 2020/21 OVERALL PERFORMANCE SUMMARY

The table below presents a summary of all of the success measures in the scorecard.
They show the performance against targets and the trend against the pervious quarter's performance.
Measures with 'no trend data' are the cumulative car parking income measures.

SUMMARY OF PERFORMANCE AGAINST TARGETS	FQ4 2019/20	FQ2 2020/21	GREEN RED NO TARGET TOTAL
	12	17	
	9	7	
	10	8	
	31	32	

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Corporate Outcome No 1 - People live active, healthier and independent lives								
Number of affordable social sector new builds - H&L (Housing Services)	●	⇒	0	0	0	0	Allan Brandie	<p>FQ2 2020/21 H&L 28 units in total were delivered during Quarter 2 Lorn - West Highland Housing Association delivered 10 units at Barcaldine, (4 NSSE & 6 social rent) in August; ACHA - delivered the final 12 units at Glenshellach, Lorn in August; Bute & Cowal - ACHA completed 1 refurb in Dunoon, Mid Argyll - ACHA delivered 5 units at Cairnbaan. This is a remarkable achievement considering the complications and delays resulting from the Covid-19 pandemic. The annual SHIP update projects 137 completions by 31/03/21 against a target of 75.</p> <p>FQ 2020/21 H&L All sites on lockdown due to Covid-19. Some units should carry over to Q2 now restrictions easing.</p>
DEG103_01-Number of new affordable homes completed per annum. (Housing Services)	●	↑↑	0	0	28	28	Allan Brandie	<p>FQ2 2020/21 A&B 28 units in total were delivered during Quarter 2 Lorn - West Highland Housing Association delivered 10 units at Barcaldine, (4 NSSE & 6 social rent) in August; ACHA - delivered the final 12 units at Glenshellach, Lorn in August; Bute & Cowal - ACHA completed 1 refurb in Dunoon, Mid Argyll - ACHA delivered 5 units at Cairnbaan. This is a remarkable achievement considering the complications and delays resulting from the Covid-19 pandemic. The annual SHIP update projects 137 completions by 31/03/21 against a target of 75.</p> <p>FQ1 2020/21 A&B All sites on lockdown due to Covid-19. Some units should carry over to Q2 now restrictions easing.</p>

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Corporate Outcome No.2 - People live in safer and stronger communities								
H&L - Number of Parking Penalty Notices Issued (Streetscene H&L)		↑	No Target	57	No Target	2,301	Hugh O'Neill	<p>FQ2 2020/21 H&L Increase in patrols in the Lomond area plus an increase of visitors, perhaps due to Covid resulting in more PCNs. Wardens from Oban have assisted, particularly at weekends. New temporary traffic regulation order for Luss, & Duck Bay. The new Luss village restrictions are resulting in many PCNs being issued. These no waiting restrictions have no double yellow lines painted and few signs to alert drivers. Luss car park parking capacity has been reduced due to part of the car park being closed to allow for National Park portals.</p> <p>FQ1 2020/21 H&L During Covid restrictions, patrols of Arrochar were made at weekends due to parking issues.</p>
A&B - Number of Parking Penalty Notices Issued (StreetScene)		↑	No Target	57	No Target	2,761	Hugh O'Neill	<p>FQ1 & FQ2 2020/21 A&B During FQ1 while national travel restrictions were in place, enforcement activities were reduced significantly, effectively stood down across the Council area. The only exception to this was in H&L, which is in reasonable travel distance from the central belt. Even so, only limited enforcement was carried out in this area. Within H&L, Luss and both Arrochar off-street car parks were closed. FQ2 saw an uptick in traffic figures, with visitor numbers increasing particularly in both Luss and Arrochar. Due to the visitor number in these villages and as a result of the TTRO in place in Luss, additional resource from was directed to H&L to assist. As a result, the number of PCNs issued in H&L was up circa 380% compared to FQ2 2019/20. Although the other areas are down compared to the same quarter in 2020/21, overall PCN numbers are up.</p>
Car Parking income to date - H&L (Streetscene H&L)	●	↑	£57,464	£4,883	£143,380	£74,169	Hugh O'Neill	<p>FQ1 & FQ2 2020/21 H&L Joint financial quarter 1 & 2 update: Due to the impact of COVID-19 restrictions, Amenity Wardens were stood down during lockdown period. The Amenity Wardens were diverted to assist with the food delivery programme. The travel restrictions would have had an impact on tourism and directly on the car parking income.</p>
<i>Maitland Street, Helensburgh</i>				£3		£63		
<i>Pier, Helensburgh</i>				£981		£5,080		
<i>Arrochar</i>				£1,240		£20,631		
<i>Luss, Lomond</i>				£2,660		£43,512		
Car Parking income to date - A&B (StreetScene)	●	↑	£252,705	£43,711	£630,531	£230,268	Hugh O'Neill	<p>FQ1 & FQ2 2020/21 A&B Joint financial quarter 1 & 2 update: Due to the impact of COVID-19 restrictions, Amenity Wardens were stood down during lockdown period. The Amenity Wardens were diverted to assist with the food delivery programme. In addition to this, a Leadership decision was taken to close three car parks within H&L to protect our communities. The travel restrictions would have had an impact on tourism and directly on the car parking income.</p>

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Dog fouling - total number of complaints H&L (Streetscene H&L)	●	↓	12	7	12	11	Tom Murphy	FQ2 2020/21 H&L The number of dog fouling complaints in the Helensburgh/Lomond area has risen slightly this quarter with 11 complaints compared to 7 for the months of April, May and June. It is hoped the figure will drop again next quarter as the service is very much aware of the public's perception surrounding this issue.
								FQ1 2020/21 H&L The number of dog fouling complaints in the Helensburgh area has reduced dramatically from 25 in FQ4 to only 7 complaints in the months of April, May and June. It is hoped this will continue over the following months.
Dog fouling - total number of complaints A&B (StreetScene)	●	↓	78	28	78	49	Tom Murphy	FQ2 2020/21 A&B Unfortunately there has been an increase in the number of dog fouling complaints for the months of July, August and September. This is unacceptable and the service will arrange for additional patrols when resource permits. This could be due to a number of reasons, poor dog ownership or the reduction in the Number of Amenity Enforcement Wardens. The service is aware of the public's perception on this.
								FQ1 2020/21 A&B There has been a significant reduction in the number of dog fouling complaints over the whole of Argyll and Bute for the 1st Quarter. This is very encouraging and could be down to the Amenity Enforcement Wardens arranging additional patrols when resources permitted. This will continue to be monitored as the service is aware of the public's perception of this.

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
LEAMS [Local Environment Audit and Management System] - H&L Helensburgh (Cleanliness Monitoring Systems) MONTHLY DATA	●	↑	73		73	74	Tom Murphy	FQ2 2020/21 H&L The LEAMS figure for Helensburgh is 74 for FQ2, this exceeds the Target figure of 73. LEAMS was suspended due to Covid-19 and has only just resumed.
								FQ1 2020/21 H&L Due to Covid-19 the LEAMS reporting has been suspended over the months of April, May and June. It is hoped this will commence again in FQ2.
LEAMS [Local Environment Audit and Management System] - Argyll and Bute monthly average (Cleanliness Monitoring Systems) MONTHLY DATA	●	↑	73		73	80	Tom Murphy	FQ2 2020/21 A&B Argyll and Bute Council have only just returned to LEAMS reporting in September, during the period from April to August this was stood down as a result of the measures taken by operations relating to Covid 19. Monthly inspections will now continue in conjunction with Keep Scotland Beautiful locations identified. The level of street cleanliness performance across Argyll and Bute for the month of September was at a high standard exceeding both the National Standard and Target figure.
								FQ1 2020/21 A&B Due to Covid-19 Keep Scotland Beautiful took the decision to suspend the LEAMS reporting for the months of April, May and June. It is hoped this will re-commence in FQ2.

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Corporate Outcome No.3 - Children and young people have the best possible start								
No Area Committee Measures to report on for Corporate Outcome 3.								
Corporate Outcome No.4 - Education, skills and training maximises opportunities for all								
% HMIE positive Primary School Evaluations - H&L (Authority Data)	●	⇒	0	0	0	0	Maggie Jeffrey	FQ2 2020/21 H&L No inspections.
								FQ1 2020/21 H&L No inspections.
% HMIE positive School Evaluations Primary incl Gaelic - A&B (Authority Data)	●	⇒	0	0	0	0	Louise Connor	FQ2 2020/21 A&B No inspections.
								FQ1 2020/21 A&B No inspections.
% HMIE positive Secondary School Evaluations - H&L (Authority Data)	●	⇒	0	0	0	0	Maggie Jeffrey	FQ2 2020/21 H&L No inspections.
								FQ1 2020/21 H&L No inspections.
HMIE positive Secondary School Evaluations - A&B (Authority Data)	●	⇒	0	0	0	0	Maggie Jeffrey	FQ2 2020/21 A&B No inspections.
								FQ1 2020/21 A&B No inspections.
H&L-Maintain the percentage of 16-19 year olds participating in education, training or employment (Youth Services)	●				94.00%	94.84 %	Martin Turnbull	FQ2 2020/21 H&L Figure is extracted from Datahub and is collected by ABC and SDS. It contains the most current information available to us on destinations. This information is collated nationally and used to produce the Annual Participation Measure, however the APM is averaged out over a year and also contains additional information from external partners so it may differ slightly. The 2020 APM records the Argyll and Bute average participation rate as 94.1% and national participation rate as 92.1% which indicates the H&L figures for this quarter are just above the Argyll and Bute average and the national average.
								FQ1 2020/21 H&L Due to Covid this wasn't run. 2019/20 Argyll and Bute wide was 93.1%.
EDU107_13-Maintain the percentage of 16-19 year olds in Argyll and Bute participating in education, training or employment (Youth Services)	●				94.00%	95.2%	Martin Turnbull	FQ2 2020/21 A&B Annual measure reporting in FQ3.
								FQ1 2020/21 H&L Due to Covid this wasn't run. 2019/20 Argyll and Bute wide was 93.1%.

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Corporate Outcome No.5 - The economy is diverse and thriving								
% of Pre-Application enquiries processed within 20 working days - H&L (Planning Applications)	●	↓	75.0%	75.0%	75.0%	73.3%	Peter Bain	<p>Comment from Peter Bain (Development Manager) on the impact of Covid on DM determination periods.</p> <p>The significant dip in performance against this indicator during FQ2 is directly attributable to the impact of the initial Covid-19 'lockdown' period which ran from late March into June 2020, and subsequent restrictions on service delivery. Whilst performance on all average determination time period indicators was largely maintained during FQ1 it is noted that this was based upon the determination of a much reduced number of applications. Whilst FQ1 gave rise to a number of challenges including loss of office accommodation and a requirement to rebuild a number of service critical processes, including mail handling arrangements, these were in the main, addressed efficiently during the first few weeks of lockdown and allowed determination of applications that were already at an advanced stage, without significant delay being incurred. What is not evident within the FQ1 performance indicator however is that new planning applications continued to be submitted at almost 80% of normal volume throughout the 'lockdown' period. It was not possible to progress these beyond initial validation due to restrictions on travel/engagement which prevented necessary site visit activity being undertaken to complete the professional assessment of applications, and to comply with procedural requirements for posting of site notices. Restrictions on essential travel were lifted during June, and planning application site visits to unoccupied sites resumed on 29th June 2020 following the development and roll out of new protocols and safe systems of work, and deployment of tablets to allow officers to operate on site without hardcopies of planning application files. Site visits to occupied sites including commercial premises and external areas of domestic premises resumed on 27th July 2020. FQ2 has seen a return to determination of planning applications at 'normal' volume, however a significant proportion of these applications have been subject to delays of up to 3 months as a result of 'lockdown' and, notwithstanding the significant effort of officers, their progression to determination has resulted in a significant increase to the average determination period.</p>
% of Pre-application enquiries processed within 20 working days - A&B (Planning Applications)	●	↓	75.0%	81.5%	75.0%	78.6%	Peter Bain	<p>FQ2 2020/21 A&B Above target for the second consecutive quarter at 78.6%.</p> <p>FQ1 2020/21 A&B Above target at 81.5%.</p>

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Householder Planning Apps: Ave no of Weeks to Determine - H&L (Planning Applications)	●	↓	8.0 Wks	7.6 Wks	8.0 Wks	12.9 Wks	Peter Bain	<p>Comment from Peter Bain (Development Manager) on the impact of Covid on DM determination periods.</p> <p>The significant dip in performance against this indicator during FQ2 is directly attributable to the impact of the initial Covid-19 'lockdown' period which ran from late March into June 2020, and subsequent restrictions on service delivery. Whilst performance on all average determination time period indicators was largely maintained during FQ1 it is noted that this was based upon the determination of a much reduced number of applications. Whilst FQ1 gave rise to a number of challenges including loss of office accommodation and a requirement to rebuild a number of service critical processes, including mail handling arrangements, these were in the main, addressed efficiently during the first few weeks of lockdown and allowed determination of applications that were already at an advanced stage, without significant delay being incurred. What is not evident within the FQ1 performance indicator however is that new planning applications continued to be submitted at almost 80% of normal volume throughout the 'lockdown' period. It was not possible to progress these beyond initial validation due to restrictions on travel/engagement which prevented necessary site visit activity being undertaken to complete the professional assessment of applications, and to comply with procedural requirements for posting of site notices. Restrictions on essential travel were lifted during June, and planning application site visits to unoccupied sites resumed on 29th June 2020 following the development and roll out of new protocols and safe systems of work, and deployment of tablets to allow officers to operate on site without hardcopies of planning application files. Site visits to occupied sites including commercial premises and external areas of domestic premises resumed on 27th July 2020. FQ2 has seen a return to determination of planning applications at 'normal' volume, however a significant proportion of these applications have been subject to delays of up to 3 months as a result of 'lockdown' and, notwithstanding the significant effort of officers, their progression to determination has resulted in a significant increase to the average determination period.</p>

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Householder Planning Apps: Ave no of Weeks to Determine - ABC (Planning Applications)	●	↓	8.0 Wks	8.0 Wks	8.0 Wks	11.6 Wks	Peter Bain	<p>Comment from Peter Bain (Development Manager) on the impact of Covid on DM determination periods.</p> <p>The significant dip in performance against this indicator during FQ2 is directly attributable to the impact of the initial Covid-19 'lockdown' period which ran from late March into June 2020, and subsequent restrictions on service delivery. Whilst performance on all average determination time period indicators was largely maintained during FQ1 it is noted that this was based upon the determination of a much reduced number of applications. Whilst FQ1 gave rise to a number of challenges including loss of office accommodation and a requirement to rebuild a number of service critical processes, including mail handling arrangements, these were in the main, addressed efficiently during the first few weeks of lockdown and allowed determination of applications that were already at an advanced stage, without significant delay being incurred. What is not evident within the FQ1 performance indicator however is that new planning applications continued to be submitted at almost 80% of normal volume throughout the 'lockdown' period. It was not possible to progress these beyond initial validation due to restrictions on travel/engagement which prevented necessary site visit activity being undertaken to complete the professional assessment of applications, and to comply with procedural requirements for posting of site notices. Restrictions on essential travel were lifted during June, and planning application site visits to unoccupied sites resumed on 29th June 2020 following the development and roll out of new protocols and safe systems of work, and deployment of tablets to allow officers to operate on site without hardcopies of planning application files. Site visits to occupied sites including commercial premises and external areas of domestic premises resumed on 27th July 2020. FQ2 has seen a return to determination of planning applications at 'normal' volume, however a significant proportion of these applications have been subject to delays of up to 3 months as a result of 'lockdown' and, notwithstanding the significant effort of officers, their progression to determination has resulted in a significant increase to the average determination period. Reductions to staffing levels within the Development Management Service has reduced the resilience of the Service to manage periods of higher than normal workload and extended periods of absence. As a consequence, the implications of the 'lockdown' period will have an extended impact upon performance for as long as the volume of applications awaiting determination exceeds the 'normal' capacity of the Service, and will be exacerbated by any period of extended staff absence during a period where this is potentially a higher risk of occurrence as a result of Covid-19/stress, or vacancies which arise during the upcoming period.</p>
								<p>Benchmarking 2020/21</p> <p>This is one of several measures where the Development Management service is benchmarked against The Scottish Government and "Rural 9" average performance. Benchmarking data for FY20/21 FQ1 & FQ2 is not due to be published by The Scottish Government until January 2021 at the earliest. We cannot know the full impact of the pandemic on the nationwide planning service until then.</p>
								<p>FQ1 2020/21 A&B</p> <p>Householders applying for planning permission in Argyll and Bute continue to receive good service. Performance has remained below the 8 week determination target for over six years now.</p>

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Corporate Outcome No.6 - We have infrastructure that supports sustainable growth								
Street lighting - H&L percentage of faults repaired within 10 days (Street Lighting - Maintenance)	●	↓	75%	61%	75%	20%	Hugh O'Neill	FQ2 2020/21 H&L Performance figures affected by the legacy of Covid - 19 shutdown. Resumption of activities in June / July was further disrupted due to sickness absence of, one of two Street Lighting Electricians. The electrician based in Dunoon for B&C and H&L also had to cover "emergency repairs" in OLI / MAKI where practicable. There is still a further issue related to miss-allocation of "dark lamps" when requests of service are entered from the public, as generally the faults are related to power supply or defective cabling which requires additional support from contractors and PU suppliers to rectify. This takes longer than the 10 day target for a purely "dark lamp" repair.
								FQ1 2020/21 H&L Performance figures affected by Covid - 19 shutdown during the bulk of FQ1. There is still a further issue related to miss-allocation of "dark lamps" when requests of service are entered from the public, as generally the faults are related to power supply or defective cabling which requires additional support from contractors and PU suppliers to rectify. This takes longer than the 10 day target for a purely "dark lamp" repair.
RIS113_05-The percentage of street lighting fault repairs are completed within 10 working days (Street Lighting - Maintenance)	●	↓	75%	72%	75%	29%	Hugh O'Neill	FQ2 2020 /21 A&B Due to the team being significantly reduced for a substantial period of time due to absence, the Lighting Team have been prioritising lighting repairs. The Street Lighting team should be back to capacity in FQ3. Discussions are ongoing to look at solutions to ensure the Street Lighting team have the resources necessary to carry out repairs.
								FQ1 2020/21 A&B Street Lighting works resumed on an emergency basis only – from Mid-May onwards, having entered lockdown 23rd March. There was a backlog in faults which meant that some dark lamps recoded as completed May / June related to those reported in March. These were therefore out with target times by a considerable amount. The capabilities of the service were further hampered later in June, due to the sickness absence (non-Covid related).

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Total number of Complaints regarding Waste Collection H&L (Streetscene H&L)		↓	No Target	2	No Target	3	Tom Murphy	FQ2 2020/21 H&L There were only 3 waste collection complaints received for the whole of Helensburgh and Lomond in the FQ2 quarter, months July, August and September. Given the number of properties both domestic and commercial and also the different range of services being delivered from general waste collections, kerbside co-mingle collections, glass recycling and food waste kerbside collections, this is an excellent level of service.
								FQ1 2020/21 H&L There were only 2 complaints regarding waste collection in the Helensburgh and Lomond area in FQ1, this is a considerable reduction from the last quarter when there were 11 complaints received. This is an excellent level of service given the large number of both domestic and commercial properties and also the wide range of services being delivered.
Total number of Complaints regarding Waste Collection - A&B (StreetScene)		↑	No Target	25	No Target	10	Tom Murphy	FQ2 2020/21 A&B The number of waste collection complaints for the months of July, August and September has significantly reduced again from the previous quarter with only 10 complaints. This is an excellent level of service. In general terms all collections were carried out although in some areas they may have been a day or so late due to breakdowns. Where collections were running late, this information was posted on the Council's web page to inform the public.
								FQ1 2020/21 A&B The number of waste collection complaints in FQ1 has dramatically reduced from the previous quarter from 74 to 25. Given the changes in services due to Covid-19 this is very good. All information regarding uplift days was posted on the Council web page and any delayed uplifts were passed to the Customer from the Customer Contact Centre advising of the amended uplift date. Where collections were running late the information was also posted on the web page to inform the public of the alterations to collections days.

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
RIS114_01-The percentage of waste that is recycled, composted or recovered (Waste Management Performance)	●	↑↑	45.0%	31.8%	45.0%	46.6%	John Blake	FQ2 2020/21 A&B 46.6% recycling ,composting and recovery (29.9% recycling/composting plus 16.7% recovery). Recycling figures have improved with the re-start of the majority of kerbside recycling services in late June.
								FQ1 2020/21 A&B 31.8 % recycling ,composting and recovery in Q1 (9.0% recycling/composting and 22.8% recovery). Recycling figure much lower than usual due to suspension of Council kerbside recycling services (almost 3 months) and closure of civic amenity sites (2 months), during Covid-19 emergency.
Shanks - Percentage of Waste Recycled, Composted & Recovered (Waste Management Performance)		↑↑	No Target	38.70%	No Target	47.60%	John Blake	FQ2 2020/21 Waste PPP Area 47.6% recycling, composting and recovery (24.0% recycling/composting plus 23.6% recovery). Recycling figures have improved in Q2 with the re-start of most kerbside recycling services at the end of June.
								FQ1 2020/21 Waste PPP Area 38.7% recycling, composting and recovery (7.5% recycling/composting plus 31.2% recovery). Recycling much lower than previous quarters due to suspension of Council kerbside recycling services (almost 3 months) and closure of civic amenity sites (2 months) during Covid-19 emergency.
Islands - Percentage of Waste Recycled, Composted & Recovered (Waste Management Performance)		↑↑	No Target	15.60%	No Target	32.10%	John Blake	FQ2 2020/21 Islands 32.1% recycling, composting and recovery (28.8% recycling plus 3.3% recovery).Recycling figures in Q2 improved with the re-start of most kerbside recycling services at the end of June.
								FQ1 2020/21 Islands 15.6% recycling, composting and recovery. Figure much lower than usual due to suspension of Council kerbside recycling services (almost 3 months) and closure of civic amenity sites (2 months) during Covid-19 emergency.
H&L - Percentage of Waste Recycled, Composted & Recovered (Waste Management Performance)		↑↑	No Target	23.20%	No Target	48.80%	John Blake	FQ2 2020/21 H&L 48.8% recycling, composting and recovery (40.4% recycling/composting plus 8.4% recovery).Recycling figures have improved in Q2 with the re-start of most kerbside recycling services at the end of June.
								FQ1 2020/21 H&L 23.2% recycling, composting and recovery (10.3% recycling/composting plus 12.9% recovery). Recycling figure much lower than usual due to suspension of Council kerbside recycling services (almost 3 months) and closure of civic amenity sites (2 months) during Covid-19 emergency.

H&L Area Scorecard FQ2 2020/21

Performance element	Status	Performance Trend	Target FQ1	Actual FQ1	Target FQ2	Actual FQ2	Owner	Comments
Making It Happen								
H&L Teacher Absence (Education Other Attendance)	●	↓	1.50 Days	0.59 Days	1.50 Days	0.96 Days	Anne Paterson	FQ2 2020/21 H&L A slight increase in H&L teachers absence has been experienced in FQ2 due to short term absences.
								FQ1 2020/21 H&L As a result of the Covid Pandemic and ensuing lockdown, homeworking and school closures Argyll and Bute Council experienced a significant reduction in short term absence across all services. Benchmarking has told us that the majority of local authorities have also experienced a dramatic drop in absence during this period also.
A&B Teacher Absence (HR1 - Sickness absence ABC)	●	↓	1.50 Days	0.82 Days	1.50 Days	0.92 Days	Anne Paterson	FQ2 2020/21 A&B After a significant drop in WDL Teacher absence has increased slightly this quarter. This is due to an increase in short term absences.
								FQ1 2020/21 A&B As a result of the Covid Pandemic and ensuing lockdown, homeworking and school closures Argyll and Bute Council experienced a significant reduction in short term absence across all services. Benchmarking has told us that the majority of local authorities have also experienced a dramatic drop in absence during this period also.
H&L LGE Only (HR1 - Sickness absence ABC)	●	↑	2.36 Days	1.80 Days	2.36 Days	1.71 Days	Carolyn McAlpine	FQ2 2020/21 H&L H&L has continued to experience a decrease in WDL. This is mainly due to a reduction in long term absence particularly in Adult Care East.
								FQ1 2020/21 H&L As a result of the Covid Pandemic and ensuing lockdown, homeworking and school closures Argyll and Bute Council experienced a significant reduction in short term absence across all services. Benchmarking has told us that the majority of local authorities have also experienced a dramatic drop in absence during this period also.
A&B LGE Staff Summary - Combined Office & Non Office (HR1 - Sickness absence ABC)	●	↓	2.36 Days	1.94 Days	2.36 Days	2.29 Days	Carolyn McAlpine	FQ1 2020/21 A&B As a result of the Covid Pandemic and ensuing lockdown, homeworking and school closures Argyll and Bute Council experienced a significant reduction in short term absence across all services. Benchmarking has told us that the majority of local authorities have also experienced a dramatic drop in absence during this period also.
								FQ2 2020/21 A&B An increase in short term absences across the majority of services have contributed to the increase in over all absence between FQ1 and FQ2.

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Helensburgh and Lomond Area Committee Workplan 2020-21

Committee Date	Report Description	Lead Service and contact officer	Regularity of occurrence/consideration	Date for Reports to Committee Services	Additional Comment
December 2020					
December 2020	Hermitage Academy School Report	Head Teacher Robert Williamson	Annual Report		
December 2020	Supporting Communities Fund – End of Project Monitoring Report	Chief Executives Rona Gold/Kirsty Moyes	Annual Report		Deferred from September AC
December 2020	Area Scorecard FQ1 – 2020-21	Improvement and HR Sonya Thomas/Jane Fowler	Quarterly		Deferred from September AC
December 2020	Area Scorecard FQ2 – 2020-21	Improvement and HR Sonya Thomas/Jane Fowler	Quarterly		
December 2020	Health and Social Care Partnership Update	Health & Social Care Partnership Charlotte Craig/Joanna McDonald	Annual Report		
December 2020	Police Scotland Update	Inspector Roderick MacNeill, Police Scotland	Quarterly		
December 2020	Cycleway Report	D&I Colin Young	Quarterly		
December 2020	Appointment to Area Community Planning Group	Shona Barton L&RS	One Off Report		

Helensburgh and Lomond Area Committee Workplan 2020-21

Committee Date	Report Description	Lead Service and contact officer	Regularity of occurrence/consideration	Date for Reports to Committee Services	Additional Comment
March 2021					
March 2021	Dates of Future Meetings	Shona Barton, Legal and Regulatory Support	Annual Report		
March 2021	Quarterly Performance Scorecard – FQ3 20/21	Sonya Thomas, Improvement and HR	Quarterly		
March 2021	Roads Capital Plan	D&I Jim Smith	Annual Report		
March 2021	Roads and Amenities Revenue Work Plan (Programmed)	D&I Jim Smith	Annual Report		
March 2021	Grass Cutting Schedule	D&I Jim Smith	Annual Report		
March 2021	Property Update	Commercial Services – David Allan	Quarterly Report		
March 2021	Post Winter Update	Jim Smith	Annual Report		
March 2021	Police Scotland Update	Inspector Roderick MacNeill, Police Scotland	Quarterly		

Helensburgh and Lomond Area Committee Workplan 2020-21

Committee Date	Report Description	Lead Service and contact officer	Regularity of occurrence/consideration	Date for Reports to Committee Services	Additional Comment
March 2021	Property Update	Commercial Services – David Allan	Quarterly		
March 2021	Cycleway Report	D&I Colin Young	Quarterly		
March 2021	Major Projects Update		Bi-Annual Report		Where appropriate
March 2021	Strategic Housing Infrastructure Programme	D&I Douglas Whyte	Annual Report		Deferred from December AC
June 2021					
June 2021	Quarterly Performance Scorecard – FQ4 20/21	HR & Improvement	Quarterly		
June 2021	Primary School Reports	Education Services	Annual Report		
June 2021	Health and Social Care Partnership Update	Health & Social Care Partnership Charlotte Craig	Bi-Annual Report		
June 2021	Police Scotland Update	Inspector Roderick MacNeill, Police Scotland	Quarterly		
June 2021	Property Update	Commercial Services – David Allan	Quarterly		
June 2021	Supporting	Rona Gold/Kirsty Moyes	Annual report with		

Helensburgh and Lomond Area Committee Workplan 2020-21

	Communities Fund Applications	Chief Executives	applications for decision		
June 2021	Cycleway Report	D&I Colin Young	Quarterly		
September 2021					
September 2021	Area Scorecard FQ1 – 21/22	Improvement and HR Sonya Thomas/Jane Fowler	Quarterly		
September 2021	Roads and Amenities Revenue and Capital Update	D&I	Annual Report		
September 2021	Annual Recycling Report	D&I	Annual Report		
September 2021	Major Projects Update		Bi-Annual Report		Where appropriate
September 2021	Police Scotland Update	Inspector Roderick MacNeill, Police Scotland	Quarterly		
September 2021	Property Update	Commercial Services – David Allan	Quarterly		
September 2021	Helensburgh, Cardross and Dumbarton Cycleway Update	D&I Colin Young	Quarterly		
September 2021	Charities and Trust Funds	Legal and Regulatory Support – Shona Barton	Update report		

Helensburgh and Lomond Area Committee Workplan 2020-21

September 2021	Supporting Communities Fund – End of Project Monitoring Report	Chief Executives	Annual Report		
December 2021					
December 2021	Hermitage Academy School Report	Headteacher Robert Williamson	Annual Report		
December 2021	Area Scorecard FQ2 – 2021-22	Improvement and HR Sonya Thomas/Jane Fowler	Quarterly		
December 2021	Health and Social Care Partnership Update	Health & Social Care Partnership Charlotte Craig/Joanna McDonald	Bi-Annual Report		highlight local issues
December 2021	Strategic Housing Infrastructure Programme	D&I Douglas Whyte	Annual Report		
December 2021	Police Scotland Update	Inspector Roderick MacNeill, Police Scotland	Quarterly		
December 2021	Property Update	Commercial Services – David Allan	Quarterly		
December 2021	Cycleway Report	D&I Colin Young	Quarterly		
Future Items					
	Hermitage Academy – Curriculum	Education Anne Paterson/ Louise Connor	Update on progress		

Helensburgh and Lomond Area Committee Workplan 2020-21

	Review				
	Helensburgh Shopfronts	Economic Development Andrew Collins	Update report		
	Parking in Helensburgh	Hugh O'Neill, Roads and Amenity Services			
	Helensburgh Civic Furniture	Shona Barton, Customer Services	One off report		
	Helensburgh Waterfront Development	Andrew Collins/John Gordon	Update on Progress		
	Luss TRO	Jim Smith RIS	Update Report		
	Charitable Trusts, Bequests and Trust Funds	Shona Barton LRS	One off Report		
	Marine Infrastructure – Dunoon and Kilcreggan	RIS	Update Report		

ARGYLL AND BUTE COUNCIL
DEVELOPMENT AND ECONOMIC
GROWTH

Helensburgh and Lomond Area
Committee
17 December 2020

Helensburgh, Cardross and Dumbarton Cyclepath Update

1.0 EXECUTIVE SUMMARY

- 1.1. This report updates Members of the progress made since the previous report to the Helensburgh and Lomond Area Committee on 17 September 2020 in relation to the delivery of Argyll and Bute Council's long-standing commitment to the provision of a dedicated, high quality walking and cycle route linking Helensburgh, Cardross and Dumbarton.
- 1.2. Roads and Infrastructure Services commenced construction of the section of the route linking Cardross Station to the Geilston Burn in March 2020. This work was interrupted by Covid-19, which has resulted in further knock-on delays to the completion of this section. As the Geilston Burn is a key winter fish breeding ground, SEPA require that we pause work involving the Geilston Burn during the winter breeding season. It is expected work involving the Geilston Burn will recommence in March 2021. This delay will not impact on the final completion date for the whole cyclepath.
- 1.3. At time of writing, the Council is finalising details for the award of contract for the completion of the required design stages for the identified preferred route for phase 1 (Helensburgh to Cardross) and phase 2 (Cardross to Dumbarton) of the cyclepath. This work will develop the designs to a constructible standard that, once we have secured the necessary land, will enable the construction of the cycle path.

2.0 RECOMMENDATIONS

- 2.1. It is recommended that the Helensburgh and Lomond members:
 - 2.1.1. Discuss the progress made towards award of the contract for the completion of the design work required for the cyclepath.
 - 2.1.2. Note the unavoidable delay to completion of the section of cyclepath in Cardross due to the requirement from SEPA to avoid any work affecting the Geilston Burn during the winter fish breeding season.

ARGYLL AND BUTE COUNCIL

Helensburgh and Lomond Area
Committee

DEVELOPMENT AND ECONOMIC
GROWTH

17 December 2020

Helensburgh, Cardross and Dumbarton Cyclepath Update

3.0 INTRODUCTION

- 3.1. This report updates Members of the progress made since the Helensburgh and Lomond Area Committee on 17 September 2020 in relation to the delivery of Argyll and Bute Council's long-standing commitment to the provision of a dedicated, high quality walking and cycle route linking Helensburgh, Cardross and Dumbarton.
- 3.2. Full details of the project, including previous progress is available in the project update reports previously presented to this Committee, most recently on 17 September 2020.

4.0 RECOMMENDATIONS

- 4.1. It is recommended that the Helensburgh and Lomond members:
- 4.1.1. Discuss the progress made towards award of the contract for the completion of the design work required for the cyclepath.
- 4.1.2. Note the unavoidable delay to completion of the section of cyclepath in Cardross due to the requirement from SEPA to avoid any work affecting the Geilston Burn during the winter fish breeding season.

5.0 DETAIL

Finances

- 5.1. At time of writing a total of £300,000 2020/21 Transport Scotland Places for Everyone funding, managed by Sustrans, has been secured to progress the design of the remainder of the route linking Colgrain, Helensburgh to Geilston Burn, Cardross and Ferry Road, Cardross to Dumbarton. It should be noted that this funding covers 100% of the cost of these design works.
- 5.2. £213,083 committed funding is available to the construction of the Cardross to Geilston Burn section of the route currently under construction. This consists of £25,000 2020/21 funding from SPT, £91,921 Cycling Walking and Safer Routes funding and £96,162 Transport Scotland 2020/21 funding from the Places for People fund managed by Sustrans. This funding covers all forecast project costs in 2020/21 and again there is no match funding required by the council.
- 5.3. Officers are working with colleagues in Roads Operations to confirm an updated spend for the work completed prior to work being halted in November as reported under 5.8.
- 5.4. An application has been submitted to SPT's 2021-22 Capital Programme for £100,000 to support completion of the section of route in Cardross and the completion of the necessary design work for the remainder of the route by summer 2021. It is planned a further 2021-22 funding application will be submitted to the Places for Everyone fund when this opens for applications, expected to be in early 2021.

Design

- 5.5. **Phase 1: Colgrain, Helensburgh to Geilston Burn, Cardross.** At time of writing, the Council is working to finalise award of contract for the completion of the Developed Design (stage 3) and Technical Design (stage 4) engineering investigation and design development for the new preferred phase 1 route, as instructed by this Committee in June 2019. Once completed in summer 2021, this will complete the design stages required prior to land acquisition and construction.
- 5.6. **Phase 2: Ferry Road, Cardross to Dumbarton.** At time of writing, the Council is working to finalise award of contract for the completion of the Developed Design (stage 3) and Technical Design (stage 4) engineering investigation and design development for the preferred phase 2 route, as instructed by this Committee in June 2019. Once completed, this will complete the design stages required prior to land acquisition and construction. Once completed in summer 2021, this will complete the design stages required prior to land acquisition and construction.
- 5.7. **Helensburgh Town.** It is planned to submit a funding application to Transport Scotland's Places for People fund managed by Sustrans for funding in

2021/22 to undertake a high quality community engagement to identify demand for and a potential route(s) of the Cyclepath from the western edge of Helensburgh into the heart of the town. Officers continue to assemble evidence to demonstrate the need for this community engagement to Sustrans.

Construction

- 5.8. Roads and Infrastructure Services commenced construction of the 285m section of the route within Cardross linking Cardross Station to the Geilston Burn in March 2020. This work was interrupted by the Covid-19 pandemic which resulted in a 4 month delay to the programme. Due to this delay, we have been unable to complete the construction prior to the winter fish breeding season in the Geilston Burn. As the Geilston Burn is a highly important fish breeding ground for the upper Clyde area, providing some of the most genetically diverse stocks in the region, SEPA have instructed that no work involving the Geilston Burn may take place during the fish breeding season. This means that work requires to be suspended until after the fish breeding season, expected to be March 2021.
- 5.9. Officers are working with suppliers, contractors and colleagues in the Roads and Infrastructure Service to schedule the remaining necessary work for spring 2021. It is anticipated that a revised completion date of June 2021 is considered to be robust. This delay will not impact on the final completion date for the whole cyclepath.

Programme

- 5.10. **Appendix 1** provides an outline programme of the key stages and forecast timescales for each section of the Phase 1: Helensburgh to Cardross section of the Cyclepath, Phase 2: Cardross to Dumbarton and Helensburgh: Hermitage Academy to Town Centre.
- 5.11. **Appendix 2** provides an update on Land Negotiations for Helensburgh, Cardross and Dumbarton Cyclepath, Phase 1 (previously planned Route Option 1, adjacent to the A814). **[EXEMPT]**

6.0 CONCLUSION

- 6.1. Completion of the Helensburgh, Cardross and Dumbarton Cyclepath will provide a dedicated, high quality, accessible walking and cycle route linking Helensburgh, Cardross and Dumbarton. This route will provide opportunities for all in the Helensburgh – Cardross – Dumbarton corridor to travel more sustainably and actively by walking and cycling. This will provide a safe alternative to having to use a private car to travel between these communities and help lower Argyll and Bute's carbon footprint. Funding for these works has been secured from our key active travel partners with further bids being progressed to enable the construction of further sections of the cycleway following detailed design work and as and when land purchases have been concluded.

7.0 IMPLICATIONS

- 7.1. Policy** Completion of this project will support the Council's SOA outcomes 2: We have infrastructure that supports sustainable growth and 5: People live active, healthier and independent lives. The project also supports achievement of the Scottish Government's objectives set out in the Cycling Action Plan for Scotland (CAPS) and Let's Get Scotland Walking - The National Walking Strategy.
- 7.2. Financial** The design, construction and land purchase will be funded by external grant funding applications. The council have not contributed any funding to design or capital costs. There is evidence to indicate that people who are more active, for example by walking or cycling, are less likely to require social care services in later life which could result in a future saving to the Council although the value of this would be difficult to quantify.
- 7.3. Legal** Continued input will be required from Legal Services to support contractual agreements and land purchase including a CPO should this be deemed necessary.
- 7.4. HR** None.
- 7.5. Fairer Scotland Duty:**
- 6.5.1 Equalities Completion of this project will provide opportunities for all in the Helensburgh – Cardross – Dumbarton corridor to travel more sustainably and actively by walking, wheeling and cycling.
- 6.5.2 Socio-economic Duty The route has been designed to be DDA compliant and will provide a safe and accessible route for those with mobility aids including wheelchairs and parents/guardians with a child's pram or buggy.
- 6.5.3 Islands There are no adverse impacts.
- 7.6. Risk** There is a reputational risk to the Council if the project is not completed within a reasonable timeframe.
- 7.7. Customer Services** None.

Executive Director with the responsibility for Development and Economic Growth: Kirsty Flanagan

Policy Lead: Cllr Robin Currie

16 November 2020

For further information contact: Colin Young
Strategic Transportation Delivery Officer
Colin.Young@argyll-bute.gov.uk
Tel: 01546 604275

Appendix 1: Helensburgh, Cardross & Dumbarton Cyclepath Programme
Appendix 2: Update on Land Negotiations for Helensburgh, Cardross and Dumbarton Cyclepath [EXEMPT]

Appendix 1: Helensburgh, Cardross & Dumbarton Cyclepath Programme

Activity	2019/20				2020/21				2021/22				2022/23				2023/24				2024/25				2025/26				2026/27				2027/28			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Funding Applications				Green				Green				Green				Green				Green				Green												
Phase 1: Helensburgh to Cardross	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green								
Route Design: Helensburgh to Cardross						Green	Green	Green	Green																											
Land Purchase Negotiations: Helensburgh to Cardross									Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange															
CPO Process (if required):										Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple															
- Provide CPO recommendation to H&L Area Committee										Green																										
- Develop CPO										Orange																										
- Gain Full Council approval for CPO										Green																										
- Advertise CPO										Red	Red																									
- Lodge CPO with Scottish Government										Red																										
- CPO Process										Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Red															
Construction: Helensburgh to Cardross																																				
Construction of Helensburgh to Cardross Part 1 (Cardross Station to Geilston Burn)				Blue		Blue		Blue																												
Construction of Helensburgh to Cardross Part 2 (assuming negotiated acquisition)														Green	Green																					
Construction of Helensburgh to Cardross Part 3 (assuming Compulsory Purchase Order required)																						Green	Green													
Construction of Helensburgh to Cardross Part 4 (assuming Compulsory Purchase Order required)																										Green	Green									
Phase 2: Cardross to Dumbarton					Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green				
Route Design: Cardross to Dumbarton						Green	Green	Green	Green																											
Land Purchase Negotiations: Cardross to Dumbarton									Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange	Orange															
CPO Process (if required):										Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Purple	Red															
- Provide CPO recommendation to H&L Area Committee										Green																										
- Develop CPO										Orange																										
- Gain Full Council approval for CPO										Green																										
- Advertise CPO										Red	Red																									
- Lodge CPO with Scottish Government										Red																										
- CPO Process										Purple	Purple	Purple	Purple	Purple	Purple	Purple	Red																			
Construction: Cardross to Dumbarton																																				
Construction of Cardross to Dumbarton Part 1 (assuming negotiated acquisition)														Green	Green																					
Construction of Cardross to Dumbarton Part 2 (assuming negotiated acquisition)																		Green	Green																	
Construction of Cardross to Dumbarton Part 3 (assuming Compulsory Purchase Order required)																						Green	Green													
Construction of Cardross to Dumbarton Part 4 (assuming Compulsory Purchase Order required)																										Green	Green									
Helensburgh: Hermitage Academy to Town Centre																																				
Community Consultation & Route Identification										Green	Green	Green																								
Route Design														Green	Green	Green	Green	Green																		
Land Access Negotiations																		Orange	Orange	Orange	Orange	Orange														
Construction of route from Hermitage Academy to Helensburgh Town Centre Phase 1																										Green	Green	Green								
Construction of route from Hermitage Academy to Helensburgh Town Centre Phase 2																														Green	Green					

Colour Key (Responsibilities / Lead):
Green: Strategic Transportation
Blue: Road Service
Orange: Estates Service
Red: Legal
Purple: External to Council (e.g. Scottish Government)

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NOT FOR PUBLICATION by virtue of paragraph(s) 6
of Schedule 7A of the Local Government(Scotland) Act 1973

Document is Restricted

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