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ARGYLL AND BUTE COMMUNITY PLANNING PARTNERSHIP

29 October 2004

A meeting of the **ARGYLL AND BUTE COMMUNITY PLANNING PARTNERSHIP** will be held in the **COUNCIL CHAMBER, KILMORY, LOCHGILPHEAD** on **FRIDAY, 5 NOVEMBER 2004** at **11:00 AM**.

Coffee will be available from 10.45

AGENDA

- 1. WELCOME AND APOLOGIES**
- 2. MINUTES OF THE MEETING HELD ON 2 JULY 2004** (Pages 1 - 4)
- 3. MATTERS ARISING**
- 4. KEY MANAGEMENT COMMITTEE RECOMMENDATIONS**
 - (a) Bute and Cowal Pilot - Progress to Date and Way Forward (Andrew Campbell) (Pages 5 - 6)
 - (b) Community Representation on the Community Planning Partnership (Andrew Campbell) (Pages 7 - 8)
 - (c) Update on Partnership Communications Plan (Andrew Campbell)
 - (d) Draft Regeneration Outcome Agreement (Donald MacVicar) (Pages 9 - 30)
- 5. COMMUNITY PLANNING ISSUES**
 - (a) Citizens' Panel Consultation Programme (Lolita Lavery)
 - (b) Update on New Community Planning Partnership Priorities (Theme Group Leaders)
 - (c) Issues to be Raised with Dr Andrew Goudie from the Scottish Executive (Lolita Lavery) (Pages 31 - 33)
 - (d) Audit Scotland's Draft Community Planning Indicators (Brian Barker) (Pages 33 - 44)
 - (e) Choose Life Action Plan (Charlotte Lee) (Pages 45 - 62)
 - (f) Community Planning Partnership Review Day/Community Planning Partnership Community Assembly - 10 June 2004 (Lolita Lavery)
- 6. ANY OTHER PARTERSHIP ISSUES/CONCERNS TO BE DISCUSSED/TAKEN FORWARD BY MANAGEMENT COMMITTEE**
- 7. DATE OF NEXT MEETING: FRIDAY 4 MARCH 2005**

A buffet lunch will be provided at the conclusion of the meeting (12.30pm)

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**MINUTES of MEETING of ARGYLL AND BUTE COMMUNITY PLANNING
PARTNERSHIP held in the COUNCIL CHAMBER, KILMORY, LOCHGILPHEAD on FRIDAY,
2 JULY 2004**

Present:

Councillor Allan Macaskill (Chair)
Councillor Robin Banks
James McLellan, Argyll and Bute Council
Lolita Lavery, Community Planning Partnership

Erik Jespersen, NHS Argyll & Clyde
Douglas Trigg, Association of Community Councils
John Boyd, Association of Community Councils
Muriel Kupris, Argyll and Bute Council
Alan Milstead, Argyll and the Islands Enterprise
David Hutchison, Strathclyde Fire Brigade
Pauline Borland, Strathclyde Fire Brigade
Gavin Brown, NHS Argyll and Clyde

Superintendent Raymond Park, Strathclyde Police
Sergeant Neil Wallace, Strathclyde Police
Carl Olivarius, Argyll and Bute Council
Bill Dalrymple, Loch Lomond & the Trossachs
National Park
Brian Barker, Argyll and Bute Council
Donald MacVicar, Argyll and Bute Council
Andrew Campbell, Scottish Natural Heritage
David Dowie, Communities Scotland
Allan McDougall, Fyne Homes
Jim McCrossan, Argyll and Bute Council
Melissa Stewart, Argyll and Bute Council

Apologies:

Hugh Clayden, Forestry Commission Scotland
Nick Purdy, Forestry Commission Scotland
Alasdair Oatts, Argyll and Bute Care & Repair
Sue Nash, Argyll CVS (Who has now moved to
Australia)

Anne Clark, Islay & Jura CVS
Shane Rankin, Crofter's Commission
Angus Laing, Scottish Natural Heritage

1. WELCOME

Councillor Allan Macaskill welcomed everyone to the meeting and introduced Pauline Borland of Strathclyde Fire Brigade, Gavin Brown of NHS Argyll and Clyde, John Boyd of the Association of Community Councils and Brian Barker of Argyll and Bute Council who were attending their first meeting of the Community Planning Partnership.

2. MINUTES OF THE MEETING HELD ON 5 MARCH 2004

The Minutes were accepted as an accurate record of the meeting held on 5 March 2004.

3. MATTERS ARISING

Carl Olivarius updated the Partnership on the successful launch of the "Drivesafe" initiative. He advised that copies of the signed Charter and photographs taken at the launch would be issued to the participating organisations shortly. He also mentioned that 2 new organisations had signed up to the Charter since the launch.

4. PRESENTATION BY ERIK JESPERSEN ON THE CLINICAL STRATEGY FOR NHS ARGYLL AND CLYDE

Erik Jespersen gave a presentation on the Clinical Strategy which was currently out for public consultation. He highlighted the major issue for Argyll and Bute as being Mental Health and also spoke regarding the trends and pressures on acute services and primary care services.

The Chair advised that the Council had set up a Policy Development Group (PDG) to formulate a response to the consultation which ends on 17 September 2004 and that the Group would be inviting some Health Board officials to give advice to them. It was agreed that the Health Theme Group would prepare a response on behalf of the Community Planning Partnership and that this be fed into the PDG as the Partnership would not meet again until after the consultation period had ended.

5. KEY MANAGEMENT COMMITTEE RECOMMENDATIONS

(a.) CPP TRANSITIONAL STRUCTURE - BUTE & COWAL PILOT

Andrew Campbell updated the Partnership on the earlier discussion of the Management Committee in which two proposals had been considered. The first proposal was that the Bute and Cowal Area Corporate Services Manager be the Area Co-ordinator and the second was that Partners fund an additional full time new or seconded post. As Partners were unable to commit financially, the Management Committee had agreed to accept the Council's offer of support, noting that as a pilot it would be subject to review.

(b.) INTEGRATION OF SIPS - STATEMENT OF READINESS

Muriel Kupris advised that the Statement of Readiness complied with stage one of the guidance issued by Communities Scotland which stipulates that Social Inclusion Partnerships should integrate with the Community Planning framework. She further advised that Ministers would be looking at the self assessment review contained in the Statement of Readiness and that on the basis of the progress made, the Partnership was in a strong position to take forward the integration of the Social Inclusion Partnership by March 2005.

(c.) PARTNERSHIP COMMUNICATIONS PLAN

Andrew Campbell advised that the report was a good example of Partnership working and that a lot of thought had been put into the proposals. He reported that this was a work in progress and that discussions to define various elements of the Communications Plan would take place at the next Management Committee meeting.

6. COMMUNITY PLANNING ISSUES

(a.) CITIZEN'S PANEL - NEW TENDERS

The Chair advised that the current contractors had come to the end of their contract and that tenders had subsequently been invited.

Lolita Lavery reported that of the 12 firms invited to tender, 5 had responded. The tenders had been scrutinised and the preferred consultant would be notified on Monday 5 July 2004. She advised that once appointed, their first task would be to freshen up the Citizens Panel.

(b.) RESULTS OF 7TH QUESTIONNAIRE TO CITIZENS PANEL

Andrew Campbell reported that the Bute response was low and this would be a matter for the contractors to look at in future. He explained that it could be an option to conduct telephone surveys in future to try and increase the number of responses received.

Andrew then discussed a few of the outcomes of the questionnaire advising that some issues do not necessarily reflect the Argyll and Bute perspective and this would need to be addressed in future.

Superintendent Park advised that the outcomes of the questionnaire relating to community safety confirmed that the Police continued to be on track with their National and Local priorities.

James McLellan advised that the Council would be building the Panels' views on service delivery and identifying priorities into their budget process.

(c.) CPP BUDGET - END OF YEAR SPEND REPORT

The Partnership agreed to exclude the press and public for the following item on the basis that it contained private information.

Lolita Lavery spoke to her report on the end of year spend for the Partnership budget. It was noted that there was no overspend at the end of the financial year. It was also re-iterated that for 2004/5 the expenditure required to be contained within the income.

(d.) UPDATE ON NEW CPP PRIORITIES (THEME GROUP LEADERS)

Gavin Brown advised that the Health and Well-being Theme Group had been looking at identifying short, medium and long term priorities from within the Joint Health Improvement Plan. He also advised that the Management Committee had agreed a new structure for the Theme Group based on Local Networks and spoke regarding the need to establish these promptly.

Alan Milstead spoke regarding the proposal to merge the two Local Economic Fora and Theme Group 2. He explained that this was not a straightforward merger but there was a commitment to make it work. He advised there would be a meeting held in August to discuss the details further.

Donald MacVicar reported on a successful first meeting in which all of the actions were reviewed and priorities cut down from 7 to 6. He advised of a not so successful second meeting which had only 7 attendees and therefore the action plan could not be approved. However, the action plan had been circulated to all partners and hoped to get confirmation of acceptance of this at the next meeting which would be held in mid August.

(e.) FEEDBACK ON MEETING WITH SCOTTISH EXECUTIVE

Lolita Lavery advised that the Scottish Executive indicated that they wished to be more actively involved with Community Planning Partnerships and have divided the Country into various clusters. Argyll and Bute have been included in the Highland Cluster, led by Dr Andrew Goudie, Acting Head for Finance and Central Services from the Scottish Executive. The first cluster meeting was held in Inverness on 2 June 2004 and attended by representatives from Western Isles, Highland and Argyll and Bute Community Planning Partnerships. She advised that Dr Goudie had been invited to attend the next Management Committee on 11 August 2004 and Partners were invited to advise her of issues they wished to be raised with Dr Goudie.

7. BETTER NEIGHBOURHOOD SERVICES FUND - YEAR 4 LOCAL OUTCOME AGREEMENT AND SUSTAINABILITY BEYOND YEAR 4

James McLellan briefly outlined the background to the Better Neighbourhood

Services Fund (BNSF) and informed the Partners of the current and future status of the BNSF in Argyll and Bute. A discussion followed on the sustainability of projects dependant on ringfenced funding from the Scottish Executive that was then withdrawn after a period of time. It was agreed that this was something that should be discussed with Dr Goudie as a major disincentive to partnership working.

It was furthermore agreed to adopt the recommendations contained in the report regarding the utilisation of the BNSF for year 4.

8. DRAFT COMMUNITY LEARNING & DEVELOPMENT STRATEGY

Jim McCrossan briefly outlined the content of the Draft Community Learning and Development Strategy and the timeframes for adopting the Strategy. It was agreed that the final draft would be submitted to the Management Committee for endorsement on behalf of the Partnership.

9. PARTNERSHIP ISSUES/CONCERNS TO BE DISCUSSED/TAKEN FORWARD BY MANAGEMENT COMMITTEE

The Chair mentioned that this agenda item was in the place of AOCB and briefly updated the meeting on progress with the Schools NPDO.

James McLellan advised that a report entitled "Making a Difference – Community Planning a Year on" had been received from the National Community Planning implementation Group and would be discussed at the next Management Committee meeting with any issues being reported back to the next Partnership meeting.

Bill Dalrymple circulated copies of the first Newsletter for the National Park. The Community Futures programme was briefly discussed and it was agreed that this would tie in closely with the work of the Partnership in the Bute and Cowal Pilot area.

10. DATE OF NEXT MEETING: FRIDAY 5 NOVEMBER 2004

The next Community Planning Partnership meeting will be held on Friday 5 November 2004 in the Council Chamber, Kilmory, Lochgilphead,

BUTE AND COWAL PILOT**PROGRESS TO DATE AND WAY FORWARD**

The following report briefly outlines progress to date with implementing the Bute and Cowal pilot and also highlights some issues arising from experience so far and proposed solutions.

The Community Planning Partnership is invited to discuss the report and endorse the proposed way forward.

Meetings to date:

Bute and Cowal Area Partnership: 2 meetings held to date (NOTE: Name has changed from Area Partnership Forum to Area Partnership due to name clash with NHS groups)

Level 1 Support Staff: 1 meeting held to date

Issues with regard to Level 1:

- Confusion over the structure (especially areas within and outwith the National Park)
- Structure is perceived as unwieldly and under-resourced
- Task of creating and supporting Level 1 groups is greater than the resources available - more resources will be necessary or the programme changed if this task is to be carried out effectively
- Community Futures funding is limited and, after April 2005, funding will only be available for areas within the National Park
- No feedback from Area Partnership meeting
- Dunoon ADG not keen to expand boundaries to include other areas of Dunoon
- Community activists are keen to become involved and commit time but structure not ready to accommodate them at this stage
- In areas outwith the Pilot, communities are keen to become involved but have no structure to feed into (relates to areas where Argyll CVS have funding to develop community links with community planning)
- Concerns over the lack of publicity of the Pilot and Community Planning in general
- Resignation of the CVS Level 1 Support Staff representative for Cowal as she felt her personal credibility and the credibility of the CVS was being undermined by the issues outlined above

The following way forward agreed by the Area Partnership and endorsed by the Management Committee:

- That in view of limited resources no new Level 1 structures be formed but that existing structures such as Community Councils, Community Care Forums, etc. be used in areas where gaps are identified (Dunoon outwith ADG, West Cowal, etc.)

- That Level 1 Support Staff identify appropriate Community Representatives to sit on the Area Partnership (and that whilst they do this they participate in the Area Partnership meetings to facilitate communication)
- That publicity be put on hold until the Area Partnership has something concrete to promote. In the meantime, Level 1 Support Staff will be given a briefing sheet from which to work (to give them information to address common questions and to ensure that there is a consistent approach across all areas)
- That Community Representatives be paid childcare, travel expenses, etc. from the CPP budget allocated for this purpose as no funds were volunteered by partners. If this budget is spent, partners will have to top-up the budget as part of their annual contributions
- That George MacKenzie and Lolita Lavery to meet with Level 1 Support Staff to discuss an appropriate way forward

COMMUNITY REPRESENTATION ON THE CPP

Background

At its Review Day in June 2003, the Community Planning Partnership agreed a revised structure to enable communities to be more pro-actively involved at all levels of the Community Planning process.

The following principles underpinned the new structure:

- Wider community involvement by aiming for 50% community participation at all levels
- Having an area as well as a thematic focus
- Use existing forums where possible (perhaps with wider remits)
- Abolish as many meetings as we create

Various issues and concerns were raised at the Review Day regarding the more general/practical aspects of the proposed new structure and more specifically regarding the proposed target of 50% community representation. It was agreed that although the target of 50% community representation at all levels of the proposed structure was commendable, it was felt that the target would be difficult to realise. Concern was expressed regarding the following aspects, namely:

- How the community representatives would be selected (elected or appointed)
- Whether they would be truly representative of the wider community or whether they would “be in it for their own self-interest”
- How one would ensure that “hard to reach” groups were fully represented and that dominance by “pressure groups” was avoided.

Implementation of 50% Community Representation Target

While it is not disputed that the community should be at the heart of community planning and that communities should be involved at all levels of the revised CPP structure, achieving and implementing this target remains a challenge. The issues mentioned above as well as some of the more practical aspects such as doubling the size of meetings, etc. is cause for concern and has hampered progress in this regard.

The objective of community representation is to ensure that the aims of an open community planning process are realised, and also to act as a “community conscience” within meetings, namely a scrutiny role. The target of 50% community representation is therefore not a pre-requisite to achieve this – the designation of the scrutiny role is more important in this respect.

Recommendation

The Management Committee has discussed the above and recommends that:

1. The CPP change the basis of community representation from one that focuses on 50% representation to one that focuses on a designated scrutiny role for any community representative.
2. That the Management Committee be given responsibility for developing this further.

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**Argyll & Bute Community
Planning Partnership
Draft Regeneration Outcome
Agreement**

Argyll & Bute Community Planning
Partnership
Draft Regeneration Outcome Agreement

OCTOBER 2004

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Executive Summary

Introduction

1.1 The draft Regeneration Outcome Agreement (ROA) for Argyll and Bute provides an outline of the overall approach that has been developed in relation to the implementation of the new Community Regeneration Fund (CRF). The CRF replaces the existing Social Inclusion Partnership (SIP) and Better Neighbourhood Services Fund (BNSF), and has been designed to bring improvements to the most deprived areas and help individuals and families escape poverty.

1.2 The draft Regeneration Outcome Agreement builds on the progress that has been made within Argyll and Bute through the work of the SIP and the BNSF. The approach also draws on the lessons and experience gained through the operation of the previous programmes, and provides a strategic and operational framework for the implementation of the CRF over the three-year period 2005 – 2008.

1.3 The draft ROA has taken due cognisance of the guidance issued by Communities Scotland with regard to the requirement to ensure that the CRF is focussed on the most deprived 15% of areas within Argyll and Bute. A detailed analysis of local need has been undertaken and a framework developed for building on the regeneration activity that has been established within the area.

Summary of Approach

1.4 The draft ROA provides an outline of the proposed approach to the targeting and allocation of CRF funding within Argyll and Bute. The draft plan builds on the work that has been undertaken over the last year within existing SIP areas that has focussed on the preparation of local development plans. This process has sought to improve the strategic integration of local regeneration activity with the National Priorities for Community Regeneration, the Closing the Gap Objectives and the Community Planning Partnership Priorities.

1.5 The development plan process has also focussed on ensuring the local activity becomes more outcome driven and is linked to the work of partner agencies. The draft ROA has also built on the experience of BNSF and the development of targeted programmes to address specific community needs.

Analysis of Need and Targeting

1.6 A detailed analysis of local need has been undertaken and baseline information gathered in relation to local communities. Detailed consideration has been given to the analysis of deprivation through the Scottish Index of Multiple Deprivation 2004(SIMD04). Based on this analysis and drawing on the guidance by Communities Scotland, it is proposed that the CRF should be focused on the worst 15% of areas as identified through the SIMD04 index. This would include:

Draft Regeneration Outcome Agreement

- Campbeltown focussing on Dalintober/Milknowe
- Helensburgh focussing on Kirkmichael and Craigendoran
- Dunoon focussing on Ardenslate/West Milton and the Glebe
- Bute focussing on the area of Ballochgoy

Area Regeneration and Thematic Approach

1.7 The focus within the draft ROA is based on the following:

- *Spatially Targeted Area Regeneration* – Attention will continue to be focussed on those areas with the highest concentration of economic and social exclusion as outlined above. The approach will be based on supporting a comprehensive programme of community regeneration. This will include undertaking activity to address both the economic and social needs of the community and ensuring that opportunities are created for the most disadvantaged.
- *Thematic Approach - Individuals and Families* – It is also recognised that the problem of economic and social exclusion impacts on individuals and families who do not live in the designated areas. Activity over the next three years will also focus therefore, on the needs of excluded individuals and families that require support but who live out-with the designated area. Up to 20% of the CRF will be utilised to support this programme of activity.

Target Groups

1.8 The analysis of local needs has also enabled the identification of key target groups that will be assisted through the local regeneration activity. These include:

- Economically inactive and people on low incomes
- Vulnerable families and children
- Young people
- Older people
- People with a drug and alcohol dependency

Transitional Arrangements

1.9 The draft ROA sets out the proposed transitional arrangements including:

- *Completion of BNSF* – The ROA provides for the completion of the existing BNSF programme by March 2006. The BNSF programme during this period will be based on the priorities and outcomes identified within the agreed Local Outcome Agreement. The BNSF programme will be fully integrated as part of the ROA during the period 2006 to 2008.
- *Area Based Regeneration* – The targeting of future regeneration activity results in Soroba (an existing SIP area) being excluded from the CRF funding. It is proposed therefore that transitional funding arrangements will be established for 2005/2006 to provide an opportunity to consolidate and protect the investment through the previous programme. It is anticipated that this arrangement will also provide an opportunity for partner agencies to consider how to sustain future activity within this area as appropriate.

Draft Regeneration Outcome Agreement

Resource Allocation

1.10 A initial resource plan has been prepared that is outlined in section 6 of the draft ROA. This includes arrangements to carry forward and phase CRF expenditure over the three years. Detailed programmes of activity and resource requirements, including contributions from partner agencies, will be prepared as part of the final ROA.

Community Engagement

1.11 Provision is made within the draft ROA to build on the progress that has been made to involve local people in the regeneration process. Future activity will also be based on the guidance for community engagement, and will be designed to ensure that the community is able to play a full and active part in the planning and delivery of local services.

1.12 In terms of structures, it proposed that community involvement will continue to be through the Area Development Groups that have been established within each area. The Strategic Management Group will also continue to operate with representation drawn from the local ADG's.

1.13 Provision is made within the ROA for support to continue to be provided to community representatives. It is also proposed that investment is made in relation to activities designed to widen the existing levels of participation and encourage a greater level community engagement.

The Next Stages

1.14 Work will continue over the next two months to prepare the final draft of the ROA for submission to Communities Scotland by 20th December 2004. Key tasks to be undertaken include:

- Identification of local outcomes and targets
- Development of costed programmes of activity and delivery arrangements
- Identification of baseline data and additional information
- Review of existing spend by mainstream services by partner agencies
- Identification of proposed capital investment programmes
- Development of community engagement structures and programmes of support
- Consultation within local communities
- Sustainable Development
- Equal Opportunities

Section 1 - Strategic Context

Introduction

2.1 This section of the report describes the strategic context in which the Argyll and Bute draft ROA has been compiled. In particular, it will provide an outline of the following:

- A clear statement of the Argyll and Bute Community Planning Partnership's (CPP) strategic regeneration objectives.
- A description of the fit that exists between the key regeneration objectives and existing activity. This activity includes the key strategies of the main local players, the current and proposed provision of mainstream services, the focus of spend in the area.
- An outline of the local regeneration plans that have been developed at a sub-authority level.
- A table highlighting the relationship between the strategic regeneration objectives of the CPP and the national priorities for regeneration.

Context

2.2 The Community Regeneration Fund (CRF) was launched in July 2004 to help individuals and families escape poverty. In replacing the existing Social Inclusion Partnership (SIP) and Better Neighbourhood Services Fund (BNSF) monies it is hoped that a more focussed and targeted approach can be developed.

2.3 The targeting of the CRF requires to be focussed on those areas that fall into the most deprived 15% of areas within Scotland as identified in the Scottish Index of Multiple Deprivation 2004 (SIMD04).

Argyll and Bute

2.4 The SIMD04 lists four of the former SIP areas in Argyll and Bute as being within the bottom 15% of the Scottish data-zones. These areas account for approximately 6% of the population of Argyll and Bute. The SIMD04 data presents measures of the state of employment, income, health, education, training and housing. Detailed analysis of the results for Argyll and Bute are provided in section 2.

2.5 The ROA provides a framework by which positive change can be achieved for those in the most excluded communities. It sets out the scale of the problem, the activities to be undertaken, the indicators and targets used to measure achievement.

2.6 The ROA will build on the existing work being undertaken and the progress being achieved by the SIP and BNSF.

Community Planning Partnership Strategic Regeneration Activities

2.7 Argyll and Bute Community Planning Partnership was established in 1999, and comprises the key providers of public services within the area and representatives from the local community. Membership of the CPP includes:

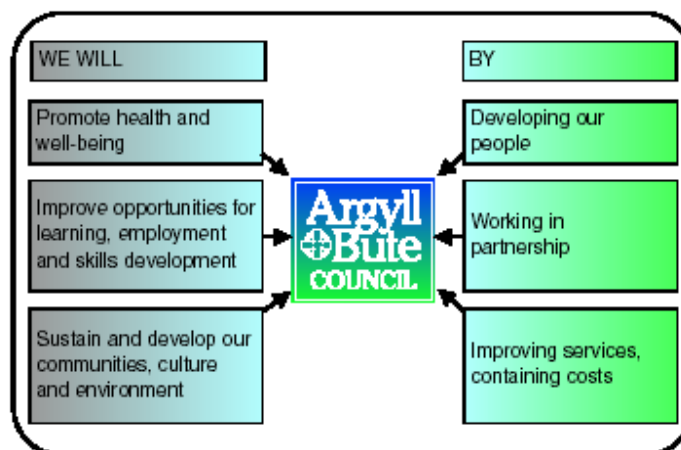
- Argyll and Bute Council
- Argyll and the Islands Enterprise
- NHS Argyll & Clyde
- Argyll, the Islands, Loch Lomond, Stirling and the Trossachs Tourist Board
- Argyll & Bute Association of Community Councils
- Caledonian MacBrayne
- Forestry Commission
- Communities Scotland
- Scottish Natural Heritage
- Strathclyde Fire Brigade
- Scottish Water
- Careers Scotland
- Argyll CVS
- Dunbritton, West Highland Housing Associations and Fyne Homes
- Lomond and Argyll Primary Care NHS Trust
- Job Centre Plus
- Scottish Enterprise Dunbartonshire
- Islay and Jura CVS
- Scottish Environmental Protection Agency

2.8 In addition, a 1000 member strong citizens panel has been established which has input into the CPP plans and strategies on an on-going basis.

2.9 The work of the CPP has been informed by the partners and community representatives, and is designed to be complementary to existing strategies and action plans for the area. Significant effort has been made to ensure strategic integration where possible. An outline of the existing strategies and partnerships that contribute to the work of the CPP is listed at appendix A.

Priority Themes

2.10 The Community Plan identifies three priority themes as follows:



Draft Regeneration Outcome Agreement

2.11 A range of specific actions have been identified based on the above themes as follows:

Priority	Description
Promoting Health & Well Being	<p>This theme acknowledges the challenges that must be met if there is to be an improvement in the quality of life of the citizens of Argyll and Bute. This theme is to be delivered by 5 actions.</p> <ol style="list-style-type: none"> 1 To improve the care of the elderly and other vulnerable groups by developing an integrated home and health care service; 2 To reduce the rate of coronary heart disease, stroke and cancer through encouraging good diet and exercise; 3 To improve road safety; 4 To reduce the availability of alcohol to young people by supporting the proposals of the Argyll and Clyde Alcohol and Drug Action Team; 5 To address crime and anti-social behaviour through the creation of a Community Safety Strategy.
Improving Opportunities for Learning, Employment & Skills Development	<p>This theme recognises the importance of creating employment and having a trained workforce ready to take up the opportunities that become available. This theme is to be delivered by 7 actions. These are:</p> <ol style="list-style-type: none"> 1. To establish a human resource development/business network for Argyll and Bute employers; 2. To create jobs from housing by linking housing investments with employment and training opportunities for local people; 3. To pilot a new model of apprenticeship delivery; 4. To form a Construction Alliance with existing agencies, funders and interested parties who collectively will identify joint working opportunities to maximise employment gains; 5. To promote access to meeting, conference and training facilities by establishing a single booking point for available Partnership facilities; 6. To establish a workplace literacy scheme 7. To provide Continuing Professional Development (CPD) for small and medium tourism enterprises.
Sustaining & Developing Our Communities, Culture & Environment	<p>The third of the priority themes recognises the importance of making Argyll and Bute a nice place to live through investing in the environment, supporting the culture and as a consequence building sustainable communities. This theme is to be delivered by 5 actions. These are:</p> <ol style="list-style-type: none"> 1. To provide adequate and affordable housing 2. To address transportation and accessibility needs by making more flexible use of existing resources 3. To enhance the sense of community participation and community identity through capacity building and community regeneration initiatives 4. To protect and enhance Argyll & Bute's rich environmental assets and diverse habitats and species 5. To address waste management renewable energy and energy conservation issues 6. To enhance Argyll & Bute's rich heritage

Existing investment and services

2.12 Agencies involved in the Community Planning Partnership are actively promoting collaboration as a way of ensuring effective integration and synergy based on the development of joint plans and strategies. It is anticipated that the delivery of the ROA will result in better value for money from spend by all partners as a result of economies of scale from a joint strategic approach.

Draft Regeneration Outcome Agreement

2.13 It is evident from the strategic analysis that has been undertaken, that the CPP has assisted the process of improving the strategic focus and targeting of services. A detailed analysis of investment by mainstream services within the target areas will be undertaken during the next stage of the preparation of the ROA. This exercise will also identify the level of additional resources that will be allocated in terms of large scale capital investment through the public and private sectors.

2.14 At a local level within targeted regeneration areas work has taken place over the last year to prepare local development plans to ensure that the focus of activity reflects the priorities identified in the CPP. These local development plans focus on the following priorities and will form the basis of the activity to be undertaken over the next three years through the CRF –

- Employment training and lifelong learning
- Health and well being
- Community development and capacity building
- Community infrastructure and environment

2.15 Significant effort has been made to ensure that a clear strategic relationship has been established between the Argyll and Bute CPP's priority themes and the National Priorities for Community Regeneration. Furthermore, each of these National Priorities is linked to one of the Closing the Opportunity Gap (CtOG) objectives and provides an overall framework for regeneration activity within target areas.

2.16 The table below illustrates the relationship as follows:

National Priorities for Community Regeneration	Closing the Opportunity Gap Objectives	Argyll and Bute Priority Themes
1 Building strong safe and attractive communities	A Reducing the vulnerability of low income families to financial exclusion and multiple debts – in order to prevent them becoming over-indebted and/or to lift them out of poverty.	Sustain and develop communities, culture and environment
2 Getting people back into work	B Increasing the chances of sustained employment for vulnerable & disadvantaged groups – in order to lift them permanently out of poverty.	Improve opportunities for learning, employment and skills development
3 Improving health	C Increasing the rate of improvement of the health status of people living in the most deprived communities – in order to improve their quality of life, including their employability prospects.	Promote health and well being
4 Raising educational attainment	D Improving the confidence and skills of the most disadvantaged children and young people – in order to provide them with the greatest chance of avoiding poverty when they leave school.	Improve opportunities for learning, employment and skills development
5 Engaging young people	E Relates to all the Closing the Opportunity Gaps objectives.	Relates to all the local priority themes
6 Engaging communities	F Relates to all the Closing the Opportunity Gaps objectives.	Relates to all the local priority themes
7 Rural communities	G To improve access to high quality services for the most disadvantaged groups in rural communities – in order to improve their quality of life and enhance their access to opportunity	Relates to all the local priority themes

Section 2 – Analysis of Need and Targeting**Analysis of Need**

3.1 A detailed analysis of need has been undertaken within the area that forms the basis for the targeting of CRF activity. This has included analysis based on the Scottish Index of multiple Deprivation for 2004 (SIMD04). In addition, the review has been informed by the study commissioned by the CPP that was undertaken by the Scottish Centre for Research on Social Justice. This study examined the extent of deprivation in Argyll and Bute including the particular issues facing rural communities.

3.2 The SIMD04 lists four of the former SIP areas in Argyll and Bute as being within the bottom 15% of the Scottish data-zones. These areas account for approximately 6% of the population of Argyll and Bute. The SIMD04 data presents measures of the state of employment, income, health, education, training and housing. Consideration is also given to distance from services which is particularly relevant to the Argyll and Bute area.

3.3 The study by the Scottish Centre for Research for Social Justice confirms that the highest concentration of deprivation tends to be found within the main townships of Dunoon, Rothesay, Campbeltown, and Helensburgh. However, it also indicates that pockets of deprivation exist across the area within more isolated communities.

3.4 Based on the analysis that has been undertaken and the guidance issued by Communities Scotland, it is proposed that the targeting of CRF should be focussed on the following:

- *Spatially Targeted Area Regeneration* – It is proposed that attention will be focussed on those areas with the highest concentration of economic and social exclusion. This approach is consistent with the requirement to focus resources on the worst 15% of the Scottish data zones and also builds on the previous target areas under the SIP programme. The approach within the designated areas will be based on supporting a comprehensive programme of community regeneration. This will include undertaking activity to address both the economic and social needs of the community and ensuring that opportunities are created for the most disadvantaged.
- *Thematic Approach - Individuals and Families* – As outlined above, it is also recognised that the problem of economic and social exclusion impacts on individuals and families who do not live in the designated areas. The study undertaken by the Scottish Centre for Research on Social Justice indicated that a significant level of deprivation existed across the Argyll and Bute area. Activity over the next three years will also focus therefore, on the needs of excluded individuals and families that require support but who live out-with the designated areas. Up to 20% of the CRF will be utilised to support this approach based on a thematic approach. This element will allow the service developed as part of the regeneration activity to be open to target groups that do not live in the designated area.

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Spatially Targeted Area Based Regeneration

3.5 The target areas as identified through the SIMD04 index are as follows:

- Campbeltown focussing on Dalintober/Milknowe
- Helensburgh focussing on Kirkmichael and Craigendoran
- Dunoon focussing on Ardenslate/West Milton and the Glebe
- Bute focussing on the area of Ballochgoy

3.6 These areas are broadly consistent with the previous SIP boundaries but have been extended in line with the post code areas covered by the SIMD areas. A detailed profile for each of the target areas has been prepared and is included as an appendix to the report. An outline of the areas to be covered and comparative population for Argyll and Bute is as follows:

Age Range	Argyll & Bute	Helensburgh		Campbeltown		Cowal		Bute	
		Pop.	% as whole of Argyll & Bute	Pop.	% as whole of Argyll & Bute	Pop.	% as whole of Argyll & Bute	Pop.	% as whole of Argyll & Bute
0 – 4	4,609	82	0.09	106	0.12	139	0.15	47	0.05
5 – 14	11,381	174	0.19	227	0.25	363	0.4	130	0.14
15 – 29	14,150	252	0.28	255	0.28	355	0.39	200	0.22
30 – 44	19,622	267	0.29	367	0.4	434	0.48	208	0.23
45 – 59	19,069	226	0.25	271	0.3	349	0.38	183	0.2
60 – 64	5,665	66	0.07	74	0.08	118	0.13	55	0.06
65 – 79	14,702	98	0.11	206	0.22	294	0.32	192	0.21
80+	2,108	21	0.02	83	0.09	112	0.12	68	0.07
TOTAL	91,306	1,191	1.30	1,589	1.74	2,164	2.37	1,083	1.18

Chart 1

Target Area Population as % of Argyll & Bute as a Whole

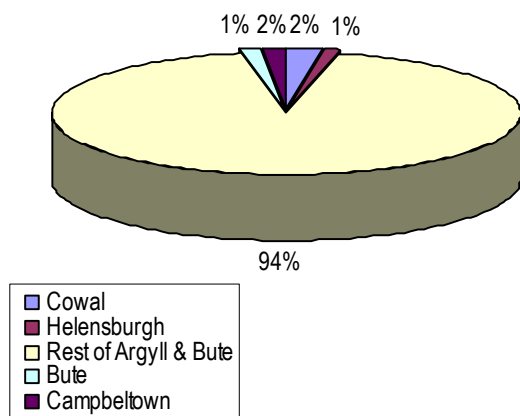
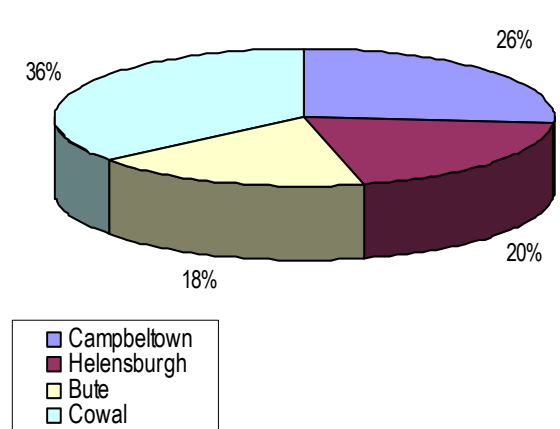


Chart 2

Target Areas - Population Breakdown



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Target Groups

3.7 The analysis of local needs has also enabled the identification of key target groups that will be assisted through the local regeneration activity. These include:

- Economically inactive and people on low incomes
- Vulnerable families and children
- Young people
- Older people
- People with a drug and alcohol dependency

Transitional Arrangements

3.8 In order to progress towards the targeting of CRF activity, it is proposed that transitional arrangements will be established to cover the following :

- *Completion of BNSF* – The draft ROA provides for the completion of the existing BNSF programme by March 2006. The BNSF programme during the period will be based priorities and outcomes identified within the agreed Local Outcome Agreement. This includes the delivery of services within existing target areas as reflected in the LOA. The BNS programme will be fully integrated as part of the ROA during the period 2006 to 2008.
- *Area Based Regeneration* – The targeting of future regeneration activity results in Soroba (an existing SIP area) being excluded from the CRF funding. It is proposed that transitional funding arrangements will be established for 2005/2006 to provide an opportunity to consolidate and protect the investment through the previous programme. It is anticipated that this arrangement will also provide an opportunity for partner agencies to consider how to sustain future activity within this area as appropriate.

Section 3 – Outcomes and Outputs

Local Priorities

Priority One – Employment and Lifelong Learning Programme

4.1 This priority will focus on the development of employment training activity within the area and the promotion of life long learning opportunities. This will include the provision of information, advice, activity to address barriers to learning, and support to enable people to access employment and training. The activity will support individuals and will include activity to increase confidence, develop transferable skills, and improve self-esteem. It will also focus on the development of essential skills and work to address barriers to participation. A key area of activity will also include work to ensure that the employment opportunities for local people are maximised through the proposed housing investment within the area.

Priority Two – Community Development and Capacity Building Programme

4.2 Activity under this area will seek to provide development support to local organisations as part of the work to improve community access to lifelong learning and in relation to the development of the social economy. Activity will also include support to community representatives. Specific initiatives will include development support to local organisations; the provision of general advice and guidance to organisations; and the provision of a capacity building programme.

Priority Three – Infrastructure and Environment

4.3 Activity will focus on a range of work to develop the local infrastructure and improve local community facilities. This will include the development of a new community facilities as appropriate and environmental improvements. Activity will also be undertaken to address crime and fear of crime within local communities.

4.4 It is also envisaged that proposals will be developed by Argyll and Bute Council, Communities Scotland and Local Housing Associations under this priority for the regeneration of the housing stock within the area. This will form part of a wider regeneration programme and investment.

Priority Four - Health and Well-being

4.5 Activity under this priority will include the range of work being undertaken by the various local initiatives to promote health and wellbeing. This will include the Healthy Living Initiatives and the programme of activity being developed to address a range of health issues; Youth Outreach work and the activity being undertaken to address the problems of young people with a drug and alcohol dependency; support for women who are experiencing domestic abuse; and activity to support young people and vulnerable elderly.

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Horizontal Themes

Community Engagement

4.6 Community Development and Capacity Building has been identified as one of the key priorities to be pursued within each of the designated areas. This will involve identifying specific programmes of support and the provision of capacity building training within each community. Detailed targets, outputs and outcomes will be identified under this priority.

4.7 However, it is also recognized that supporting effective community engagement is an important part of the overall regeneration process. It is proposed therefore, that community engagement activity will also be pursued on a horizontal basis, and will be progressed across all the priority themes and operating structures.

4.8 This approach has been designed to ensure that resources are targeted towards building capacity within local communities, and ensuring that this activity does not become marginalised within the ROA.

Mainstreaming Equality

4.9 The CPP is committed to the promotion of equality and will seek to reduce disparities in terms of gender, ethnicity, disability, religion or any other form of discrimination. This will involve supporting actions to promote equality in all aspects of the work undertaken through the ROA, as well as undertaking positive action projects to address specific inequalities that are identified.

4.10 Work will be undertaken to mainstream equal opportunities as a horizontal theme within the ROA. This will include:

- *Project Design* – Developing a framework to ensure that equal opportunities is considered as a central element of project design and implementation. Guidance will be issued to partner agencies and organisations delivering programme activity in relation to the framework required for promoting equal opportunities.
- *Monitoring and Evaluation* – All project activities supported through the ROA will require to record and assess the impact in relation to equal opportunities. It will be expected that data will be gathered in relation to participation and impact in terms of gender, ethnicity, disability, etc.
- *Programme Development* – Detailed consideration will be given on an ongoing basis to the targeting of services to ensure equality and access by all sections of the community.

Sustainable Development

4.11 The CPP has designed the programme set out in the ROA with the aim of achieving sustainable regeneration outcomes. As part of this process, sustainable development will be pursued as a horizontal theme through the following:

- *Programme Design, Implementation & Evaluation* – Arrangements will be made to ensure that consideration is given to the potential impact that can be achieved in relation to the economic, social and environmental needs of the local communities. This will include developing a framework to assess the potential impact during the programme design, implementation and evaluation stages. All projects and activities supported through the

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ROA will require to demonstrate and monitor the impact they are having across the inter related issues.

- *Community Involvement* – It is recognized that community involvement forms a vital part of developing sustainable communities. Section Four sets out the arrangements for community engagement within the process. Community development and capacity building has also been identified as a specific priority within each area, and will also be pursued on a horizontal basis.
- *Sustainability* – Consideration will be given during the implementation process to the long term sustainability of local activity. This will include the development of structures that can support long term development, and the establishment of funding mechanisms as part of a local sustainability strategy.

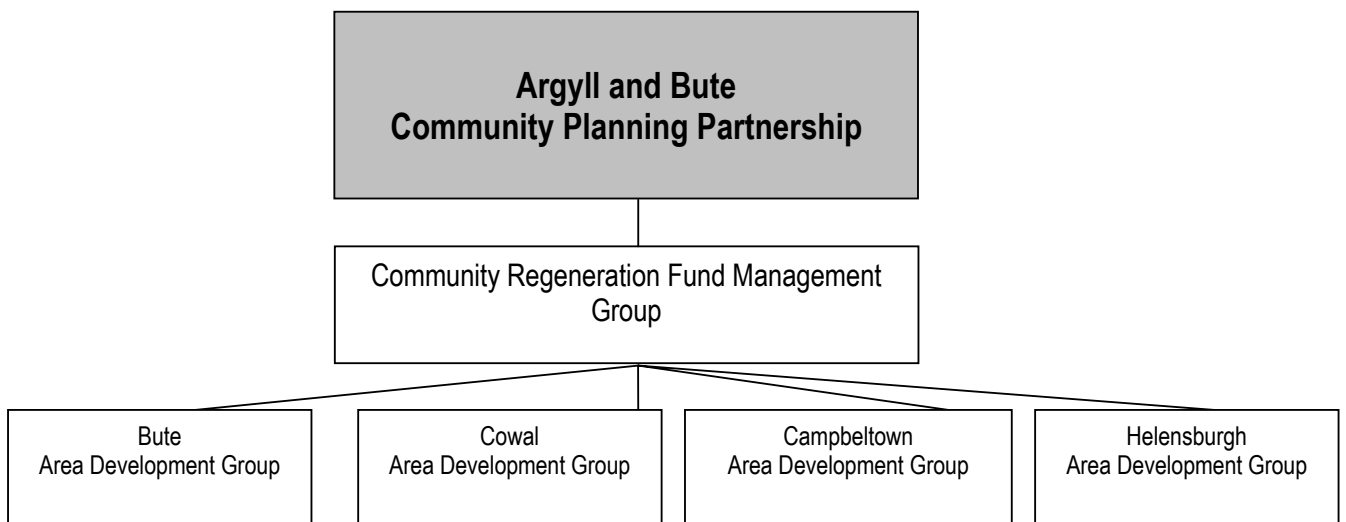
Section 4 – Community Engagement

Introduction

5.1 Argyll & Bute Community Planning Partnership is fully committed to ensuring that arrangements are established for effective community engagement. The CPP structure has been adjusted to ensure that a framework exists that will encourage and support a greater level of community involvement in all aspects of its work.

5.2 In terms of the implementation of the Regeneration Outcome Agreement, arrangements have been made to build on existing structures and opportunities for community involvement in the regeneration of local communities.

Operating Structures



Community Planning Partnership

5.3 The CPP will have overall responsibility for the implementation of the ROA. This will be undertaken through Theme Group 3 – Sustaining our Communities, Culture, and Environment. Community involvement within this theme group will be through representation from the Community Representative’s Forum that has been established as an independently constituted body.

5.4 The CPP will be responsible for reviewing progress against the original targets set out in the ROA.

Draft Regeneration Outcome Agreement

Community Regeneration Fund Management Group

5.5 A new Community Regeneration Fund Management group will be established. This will be based on the SIP strategic group that previously operated. The new group will operate as a multi - agency forum with community representation drawn from each local area.

5.6 The remit of the group will include the following:

- Reviewing strategic direction and progress against targets (regular reports will be provided on the performance of each area).
- Identification of operational issues that require to be addressed across the area.
- Policy development to ensure, as appropriate, that a consistent approach is being taken in relation to the implementation of the ROA in each area.
- Identification and sharing of examples of good practice.

5.7 The CRF Management group will report through the CPP Theme Group 3.

Area Development Groups

5.8 An area development group will be continue in each of the four target areas. These groups will be based on the existing Area Development Groups, and will operate as a multi - agency forum. The groups will also include community representatives that will be elected from the local area.

5.9 The Area Development groups will be responsible for the overall strategy and operational activity being progressed. Arrangements have been made for these groups to establish local structures to drive forward the priorities that have been identified. These will cover Employment Training and Lifelong Learning; Health and Wellbeing; and Community Infrastructure and Environment.

Community Engagement

5.10 Community involvement will form a central part of the implementation of the ROA. The approach that has been developed has been based on the principles and practice guidance in the draft National Standards for Community Engagement. Key elements of the approach include:

Community Representation

5.11 Community representation has been included in all elements of the operating structures. However, in order to ensure effective community involvement, it is proposed that a range of activities will be undertaken covering the following:

- *Roles and Responsibilities of Community Representatives* - A detailed outline of the roles and responsibilities of community representatives within each of the proposed groups will be prepared. This will include a clear remit of each group and an outline of the operating arrangements.
- *Election / Appointment of Community Representatives* – Procedures will be established in relation to the election and appointment of community representatives in order to ensure openness and transparency.

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- *Support Arrangements* – A package of support will be provided for community representatives to ensure that they are able to play a full and effective part in the regeneration process. The support arrangements will also be developed to ensure equality of participation by addressing specific barriers to involvement.
- *Training Support* – An ongoing programme of training will be provided for community representatives. This will include induction training and ongoing provision based upon identified needs.

Community Consultation

5.12 The work of community representatives will be complemented by a range of community consultation activity designed to ensure that as many people as possible have the opportunity to “have a say” in the regeneration process. This will include:

- *Community consultation and survey activity* – This will be undertaken as appropriate and will include household surveys and telephone surveys.
- *Consultation Events* – Regular consultation events will be held as appropriate. These will be designed to use creative ways to encourage as many people as possible to be involved.
- *Community Development and Capacity Building* – Each of the target areas have identified community development and capacity building as one of the main priorities. A programme of support will be provided within each area that will involve community development assistance; capacity building training; development support; etc. This work will form a key part of the Community Learning Strategy within the area.

Section 5 – Managing the Transition

6.1 Detailed consideration has been given to the transitional requirements and the move towards integration of SIP and BNSF activity. The proposed arrangements are set out as follows:

BNSF

6.2 The integration of BNSF activity will be undertaken as follows:

- Over the period 05/06, it is proposed that the existing BNSF programme should be completed as set out in the agreed Local Outcome Agreement. This arrangement will enable the programme to be completed within the existing monitoring framework.
- During the period 06/07 and 07/08, it is proposed that the BNSF activity in relation to older people and support for families with disabled children will be fully integrated and targeted towards designated areas. The ROA includes specific outcomes for these areas of activity as part of the Health & Wellbeing priority.
- Existing management arrangements for BNSF will operate 05/06. Thereafter, a fully integrated management structure will be implemented based on the framework set out in Section 4.

SIP

6.3 The existing SIP arrangements will be fully integrated as set out in the ROA. Transitional arrangements will include:

- *Area Based Regeneration – Soroba* - It is proposed that transitional funding should be provided for 05/06 within Soroba. This funding has been designed to provide an opportunity to consolidate and protect the investment through the previous programme. It is anticipated that this arrangement will provide an opportunity for partner agencies to consider how to sustain future activity within this area as appropriate.
- *Area Based Regeneration – Other Areas* – Progress will be made to build on effective existing structures and develop the programme of activity for each of the designated areas for implementation by April 2005.

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Section 7 – Planned CRF Expenditure 2005
– 2008

Budget Allocation

	2004/05	2005/06	2006/07	2007/08
Income (SIP & BNSF)	£3,474,899	£986,000	£740,000	£650,00
+ C/Fwd from previous year		£1,734,675	£500,00	£295,00
- Expenditure	£1,739,224	£2,220,675	£945,000	£945,00
C/Fwd to following year	£1,734,675	£500,00	£295,000	£0

CRF Expenditure

Summary of planned CRF expenditure 2005/06 to 2007/08									
National Priority	Planned 2005/06	CRF	spend	Planned 2006/07	CRF	spend	Planned 2007/08	CRF	spend
Building strong, safe and attractive communities	£ 19,620			£ 19,620			£ 19,620		
Getting people back into work	£ 94,680			£ 94,680			£ 94,680		
Improving Health	£ 88,320			£ 488,720			£ 488,720		
Raising educational attainment	£ 0			£ 0			£ 0		
Engaging young people	£ 57,700			£ 0			£ 0		
Sub-total	£ 260,320			£ 603,200			£ 603,200		
Supporting community engagement	£ 97,380			£ 97,380			£ 97,380		
Transitional Support	£ 52,300			£ 0			£ 0		
Core support and monitoring and evaluation	£ 76,000			£ 244,600			£ 244,600		
TOTAL	£ 486,000			£ 945,000			£ 945,000		

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Chart 3

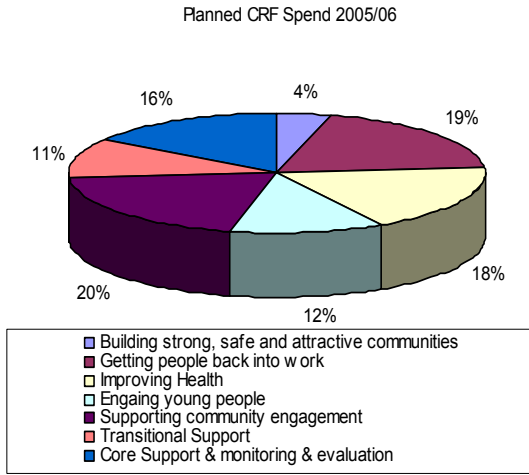
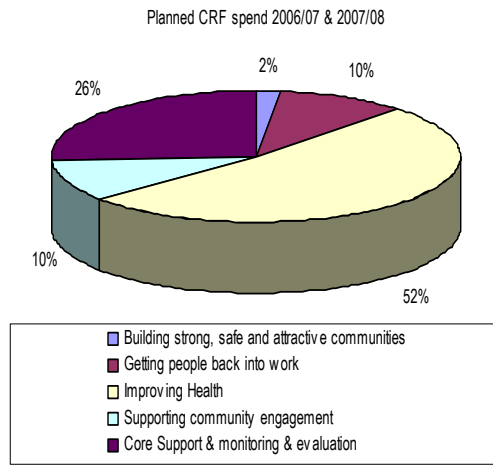


Chart 4



ISSUES TO BE RAISED WITH DR ANDREW GOUDIE FROM THE SCOTTISH EXECUTIVE

As mentioned previously, we received a letter from the Scottish Executive's Performance and Improvement Division stating that "the Executive is looking at how it can best support the Community Planning process, gain a closer understanding of issues facing delivery agencies and to look at how the Executive improves its own approach to joint and cross cutting working".

Dr Andrew Goudie, Acting Head of the Finance and Central Services Department has been designated as the Scottish Executive's contact for the Highland Cluster into which Argyll and Bute has been divided. Dr Goudie has expressed a keen interest to attend a our next Management Committee meeting on 8 December 2004.

In order to enable us to utilise the time meaningfully, the following issues have been identified for discussion with Dr Goudie, namely:

- Argyll and Bute Profile
- Barriers to Partnership Working
 - Boundary issues
 - Stringent Scottish Executive timescales
 - Sustainability of 3 year funding
- Some Successes
 - SIP Projects
 - Better Neighbourhood Services Projects
 - 3 Islands Initiative
- Audit Scotland's Community Planning Indicators
- Implications of the Efficiency Review

The Community Planning Partnership is invited to discuss the above and identify any additional issues that it feels should be raised with Dr Goudie.

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AUDIT SCOTLAND'S DRAFT COMMUNITY PLANNING INDICATORS



DEVELOPMENT OF COMMUNITY PLANNING INDICATORS

PROGRESS NOTE 2

August 2004

This second Progress Note is issued as part of Audit Scotland's commitment to keeping stakeholders informed of progress in the development of Community Planning Indicators and to invite comment.

INTRODUCTION

There are two different aspects of community planning about which we need to gather information to facilitate the Accounts Commission to 'draw conclusions'. These aspects relate to the key processes behind community planning and the impact for communities. We are considering the possibility of assessing these two aspects separately.

Summary of Approach

The proposals are summarised as follows:

- **National menu CPI set** – Existing indicators satisfying the criteria of cross-cutting more than one partner agency, being attributable and measuring impact, listed against each of the 5 national priorities (Building a Better Scotland). Choice for partnerships to select a number of indicators (2 or 3) from each heading to reflect local issues as described in their Community Plan
- **Local menu CPI set** – existing indicators grouped under the 5 national priorities from which partnerships select indicators to support their community plan priorities. These indicators to be reported by each partnership according to their local reporting arrangements
- **A Statement of Intent** – submitted alongside the national indicators detailing which national and local indicators have been selected, the rationale for selection and arrangements for reporting the local indicators
- **Review of the key processes** - In addition to developing indicators to measure service impact, a review of the processes which underpin the effectiveness of community planning, specifically Partnership Working; Community Engagement; and Performance Management, will be undertaken in the autumn.

PROGRESS TO DATE

There are two key success factors for the project; achieving a balance between allowing Community Planning Partnerships to reflect local priorities and ensuring

national objectives are covered; and securing ownership of the proposed indicators by Partnerships.

We have sought to achieve these success factors by working closely with Partnerships to reach a consensus on the most appropriate indicators and audit/reporting arrangements. To this end, we have consulted directly with 23 individual councils and representatives of their partners as part of an ongoing consultation programme.

Issues Arising From Consultation

Consultation with council and partner representatives to date indicates:

- Support for a ***two tier model*** consisting of an annually reported national set and a local menu set to support local performance management and reporting arrangements
- Support for a ***menu approach to the national set*** with no mandatory or fixed indicators
- Support for ***measuring the closing of the gap*** between the area average and the worst performing locale or client group, over time (see below)
- ***Little support for very high level indicators*** e.g. mortality rates etc included within the national CPIs due to long lead-in times, availability of data (in terms of frequency of reporting and timing in year), macro-influences and lack of influence by partnerships
- Support for ***single collection and reporting*** of national data. Partnerships are keen to avoid double submission of information to the Scottish Executive and Audit Scotland

During consultation it became apparent that reporting national indicators over a Community Planning Partnership area could be masking the detailed local picture. For example, educational attainment may be increasing on average but in SIP areas and for looked after children it may be deteriorating. By definition, Partnerships are about identifying and resolving ‘local’ issues together. If we measure the council wide information, then we wouldn’t necessarily be measuring the impact of the Partnership in particular localities or for particular client groups.

We are considering suggesting that partnerships measure and report on the differential between the average and the worst performing locale or client group for each indicator. Measuring the changes of this gap over time would provide an effective assessment of the impact of the Partnership and, to an extent, alleviate the problem of performance data being used (misused) as performance absolutes.

Measuring differentials over time would also align with the Scottish Executive's themes, capturing the hitherto ‘missing’ cross-cutting theme of closing the opportunity gap (Building a Better Scotland). There is no other national framework for attempting to assess this Scottish Executive priority.

Discussions with the Scottish Neighbourhood Statistics (SNS) Unit have determined that the geography by which national data will be provided to Audit Scotland or CPPs will be based on ‘data-zones’, which have been formally adopted by the Scottish Executive as the consistent geography for data reporting to ensure robustness, data confidence and to satisfy confidentiality requirements.

PROPOSED NATIONAL INDICATORS

Draft national indicators were circulated in July prior to the first meeting of the Reference Group. This group has been helping us select appropriate existing national indicators to populate the CPI national set. The group has concentrated on identifying truly cross-cutting indicators which capture all the main areas of activity, found in the 32 Community Plans, under each of the 5 main headings. Written comments were received from 10 Partnerships and these comments have been used to refine the content of the national set.

The Group slightly expanded the 5 theme headings, under which the indicators are grouped, to better capture the work of Partnerships. We have worked hard to identify which indicators should be included as part of the national menu to ensure appropriate coverage of activities whilst rejecting indicators which are beyond the influence of the Partnership or relate to the activities of only one agency.

Attached is the second draft of the proposed indicators for inclusion in the national 'core' menu. We would welcome your informal views on these revised indicators. Please note that these are still only proposals, and everyone will have the opportunity to provide formal comment on them during the Commission's consultation period.

NEXT STEPS

The second draft national set will be discussed with the Scottish Neighbourhood Statistics Unit to identify where data is currently not available at the data-zone level.

A detailed proposal paper will be submitted to the Accounts Commission in October.

Formal consultation will then follow prior to the development of a formal Direction to be issued in early 2005 for collection of data from 1st April 2005.

A draft project brief for the review of key community planning processes will be submitted to the Accounts Commission in October, along with the CPI proposals. If the Commission decides to proceed with such a review a report would be published in 2005.

In the meantime if you have specific comments you would like me to feed into the preparation of the proposals to go to the Commission in October, please send them to me by Friday 17th September:

Carol Calder
Project Manager
Audit Scotland
18 George Street
Edinburgh

0131 477 1234
ccalder@audit-scot.gov.uk

LETTER SENT TO AUDIT SCOTLAND ON BEHALF OF MANAGEMENT COMMITTEE

16 September 2004

Dear Ms Calder

Development of Community Planning indicators

Thank you for the opportunity to comment on the developing work on community planning indicators. We have followed the progress of this debate with interest and would make the following comments as a contribution to your submission to the Accounts Commission. These comments follow a brief discussion at our most recent Management Group meeting on 11/8/04.

How to accommodate diversity across Scotland?

Argyll and Bute is a diverse area covering 10% of the land area of Scotland; 20% of the population do not live in settlements; 16% of the population live on the 25 inhabited islands; there is 4500km of coastline – longer than that of France; and most of the population have to travel significant distances to access services. The mix of island and mainland communities is a unique feature of Argyll and Bute.

With this as a backdrop, we do not feel that a menu of indicators would benefit the community planning process locally. The value in making comparisons across Scotland comes from sharing good practice, which implies more detailed dialogue between partnerships rather than comparison of headline figures.

In order to gain some idea of the scale of diversity across Scotland you could refer to the recently published “Annual Rural Report 2004”, by the Scottish Executive, July 2004. The “Summary of Key Facts on Rural Scotland” on pages 27-28 suggests that whilst some aspects of rural life are worth promoting throughout Scotland such as levels of community involvement there are some serious downsides to living in “remote rural” areas into which classification much of Argyll falls! As described below we need to measure our progress against other rural areas as well as against national priorities but there really also needs to be a set of agreed national standards against which we can judge our service delivery.

How to measure progress?

The key to this process for us is the ability to demonstrate that progress is being made – whether with local priorities or for contributions to national priorities. The challenge should be for us to be able to demonstrate this using locally determined measures that reflect local and national priorities. The reporting process then focuses on trends rather than actual data.

We welcome the suggestions for measuring the closing of the gap. This reflects the need to show our contribution to national priorities, but also is something that is

important locally. We would expect this to be a common benefit across all community planning partnerships.

How to highlight issues?

One aspect of our discussion locally that does not appear to be reflected in the national discussion is the need for a mechanism to highlight issues locally that need wider support. For instance, there are issues locally that will need regional or national support to be resolved, because local agencies do not have the resources or power to deal with them effectively.

Development of indicators to facilitate this process is something that would have to happen locally.

Is there a use for the menu of indicators?

Whilst we would not support a national obligation to use the menu of indicators as a library of measures from which we were forced to choose measures, there is potential benefit from the menu locally.

Any debate to develop local measures will be facilitated by examples of indicators, with commentary on the benefits or limitations with respect to data collection, reporting and use of the indicators. The menu of indicators would be a valuable input to any debate we would have on measures to report progress on local and national priorities.

I am sure our Partnership would be happy to engage in further dialogue with you to ensure that any Indicators adopted really do reflect the efforts being made in Argyll and Bute to improve services and “close the gap” as well as realistically reflecting our geography and current state of infrastructure development.

Yours sincerely,

Andrew Campbell

Chair

Argyll and Bute CPP Management Committee

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Shaded - Similar indicators - only one to be chosen if applicable
Bold - Included in Communities Scotland menu of indicators

Community Planning Indicators: National Set						
Indicator	Indicator source	Data source	Level of data availability	Most recent data	Frequency of data	Comments
JOBS & PROSPERITY						
Quality of employment						
Proportion of working age people with low incomes.	Social Justice Milestone 14					Macro influences too significant?
Average earnings / household income (full time male & female)		New Earnings Survey, NOMIS				Macro influences too significant?
Number of, and employment in, Investors In People accredited companies	Smart Successful Scotland 13b					
Opportunity						
The percentage increase or decrease in the number of local jobs	Quality of Life Indicator 5	Annual Business Inquiry, NOMIS	Local authority	2002	Annual	Key priority for Exec. High-level impact. Context will be important re. macro influences. Question reliability of ABI. Community Planning issue may be quality of jobs rather than number.
Survival / closure of VAT registered businesses - three year rate		Small Business Services VAT survival statistics	LEC's	2002	Annual	
The percentage increase or decrease in the total number of VAT registered businesses in the area	Quality of Life Indicator 4	NOMIS	Local authority		Annual	
Proportion of 16-19 year olds who are not in education, training or employment	Smart Successful Scotland 11a	Labour Force Survey, NOMIS	Local authority	Nov-03	Quarterly (Feb, May, Aug, Nov)	Picture of current labour market. Gives indication of future market in terms of equipping young people with skills. Didn't feature strongly in local community plans.
Number of working age people in education, training or employment	Smart Successful Scotland 12b					Gives a better reflection of the market than indicator above, but data availability may be a problem.
The proportion of people of working age in employment	Quality of Life Indicator 1	Labour Force Survey, NOMIS	Local authority	Nov-03	Quarterly (Feb, May, Aug, Nov)	More positive than looking at unemployment rates. Does it account for self-employed / other client groups?

<p>Economic Disadvantage</p> <p>Percentage of unemployed working age people</p> <p>The proportion of unemployed people claiming benefits who have been out of work for more than a year.</p> <p>Ratio of unemployed to unfilled vacancies</p> <p>Employment rates of groups, such as lone parents and ethnic minorities, that are relatively disadvantaged in the labour market.</p>	<p>Sustainable Development Indicator 2</p> <p>Quality of Life Indicator 2</p> <p>Smart Successful Scotland 10c</p> <p>Social Justice Milestone 15</p>	<p>Labour Force Survey, NOMIS</p> <p>Claimant count, NOMIS</p> <p>Jobcentre Plus data (NOMIS) and unemployment data (NOMIS, LFS)</p>	<p>Local authority</p> <p>Local authority</p> <p>Local authority</p>	<p>Nov-03</p> <p>Nov-03</p>	<p>Quarterly (Feb, May, Aug, Nov)</p> <p>Quarterly (Feb, May, Aug, Nov)</p>	<p>Macro influences</p> <p>Long-term unemployment featured strongly in local community plans. Is it valid for core set? May be contextual issues and possible perverse outcomes.</p> <p>Are skills being matched to jobs?</p>
<p>HEALTH IMPROVEMENT</p> <p>Physical</p> <p>Healthy life expectancy</p> <p>Percentage of 5-year-olds with dental cavities</p> <p>Increasing the proportion of women breastfeeding (improving the well-being of our young children).</p> <p>The total number and rate of women breastfeeding at 6 to 8 weeks after the birth of their child averaged over a three-year rolling basis</p> <p>Proportion of women still breastfeeding at 6 weeks</p> <p>Proportion of older people receiving respite care at home.</p> <p>The number of people aged 65+ receiving home care, by type and number of hours</p> <p>Mental</p> <p>Improving the health of young people through reductions in the rate of suicides among young people.</p>	<p>ISD / NHS Scotland</p> <p>NHS Framework 1.14.02</p> <p>Social Justice Milestone 5</p> <p>SIP Core Compulsory Indicator 5</p> <p>NHS Framework 1.04.02</p> <p>Social Justice Milestone 21</p> <p>SPI (Adult Social Work 4)</p> <p>Social Justice Milestone 11</p>	<p>ISD</p> <p>ISD</p> <p>ISD via CS</p> <p>Audit Scotland</p>	<p>Deprivation quintiles / local</p> <p>Local authority</p> <p>Local authority</p>		<p>Annual</p>	<p>Measures the number of years people can expect to live in good health.</p> <p>Is indicative of poor diet. Only indicator focused on children.</p> <p>Improving the well-being of our young children. What would the optimum figure be?</p> <p>How do we measure this - is it reducing suicide and self harm? Are there other mental health indicators?</p>

Mental health - what's the GQ12 score?

<p>Lifestyle</p> <p>Conceptions among females aged 13-15 years</p> <p>Proportion of adults (16-64) smoking</p> <p>Proportion of drug misusers who inject</p> <p>Proportion of men and women aged 16-64 exceeding weekly limits of 21 and 14 units of alcohol</p> <p>Percentage of people eating cooked green vegetables 5 or more times a week.</p> <p>Percentage of people eating fresh fruit once a day or more</p> <p>Proportion of men and women aged 16-64 taking 30 minutes of moderate activity on 5 or more occasions per week</p>	<p>Quality of Life Indicator 12</p> <p>NHS Framework 1.08.02</p> <p>NHS Framework 1.11.02</p> <p>NHS Framework 1.09.01</p> <p>NHS Framework 1.13.01</p> <p>NHS Framework 1.13.01</p> <p>NHS Framework 1.12.01</p>	<p>Scottish Neighbourhood Statistics / Scot Exec</p> <p>ISD and surveys</p> <p>Scottish Drug Misuse Database (SNS)</p> <p>Scottish Health Survey</p> <p>Scottish Health Survey</p> <p>Scottish Health Survey</p> <p>Scottish Health Survey</p>	<p>Local authority</p> <p>Local authority</p> <p>Scotland</p> <p>Scotland</p> <p>Scotland</p> <p>Scotland</p>	<p>2002</p> <p>2003</p> <p>1998</p> <p>1998</p> <p>1998</p> <p>1998</p>	<p>Annual</p> <p>Annual (31 Mar)</p> <p>3 years</p> <p>3 years</p> <p>3 years</p> <p>3 years</p>	<p>This is a 'healthy lifestyle' indicator. It is not ideal (too specific) but there are not many indicators of a similar type to pick from.</p> <p>Should we use an indicator which combines the fruit and veg (above) indicators? E.g. meeting 5 portions of fruit and veg a day.</p>
<p>INFRASTRUCTURE, ENVIRONMENT & SUSTAINABLE DEVELOPMENT</p> <p>Infrastructure</p> <p>The number of dwellings broken down by tenure.</p> <p>Number of unfit homes per 1,000 dwellings</p> <p>Biodiversity & use of natural resources</p> <p>Percentages of Biodiversity Action Plan species and habitats which are identified as stable or increasing</p> <p>The proportion of land stock that is derelict</p> <p>Percentage of main rivers and canals rated as good or fair quality</p> <p>a) Number of days per year when air pollution is moderate or higher for PM10.</p> <p>b) Annual average nitrogen dioxide concentration</p> <p>c) For rural sites, number of days per year when air pollution is moderate or higher for ozone.</p>	<p>SIP Core Compulsory Indicator 12</p> <p>Quality of Life Indicator 14</p> <p>Sustainable Development Indicator 10</p> <p>Quality of Life Indicator 33</p> <p>Quality of Life Indicator 29</p> <p>Quality of Life Indicators 27</p>	<p>Local Authority Housing Investment Programme</p> <p>Scottish Vacant and Derelict Land Survey</p> <p>SEPA</p> <p>Local Environmental Health Dept</p>	<p>Local authority</p> <p>Local authority or LEC</p> <p>Local authority</p> <p>Local authority</p>	<p>2003</p> <p>2003</p>	<p>Annual</p> <p>Annual</p>	

<p>Carbon dioxide emissions by sector and per capita emissions (tonnes per year)</p>	<p>Quality of Life Indicators 28</p>	<p>Local authority (e.g. Energy Mngmnt Team, Environ. Services, Transport Planners, Waste Mngmnt Team). Environment Agency (industrial emissions and waste).</p>	<p>Local authority</p>		
<p>Energy</p> <p>Energy use per household</p> <p>Gas consumed by domestic customers and electricity consumed (TeraWatt hours)</p> <p>Total number of households living in fuel poverty</p>	<p>Quality of Life Indicator 30</p> <p>Sustainable Development Indicator 12</p> <p>Sustainable Development Indicator 20</p>	<p>Gas data provided by Transco. Electricity data not yet available.</p> <p>Gas data provided by Transco. Electricity data not yet available.</p>	<p>Local authority</p> <p>Local authority</p>		
<p>EDUCATION</p> <p>Pre & Primary Education</p> <p>The number of childcare places available per 1,000 population of children under 5 not in early education</p> <p>Percentage of combined P3, P4, P6 and P7 rolls meeting or exceeding the appropriate 5-14 level for their age - reading, writing and maths</p> <p>Secondary Education</p> <p>S4 pupils achieving 5+ standard grades (level 1-4)</p> <p>S5 pupils achieving 3+ higher grades (level A-C)</p> <p>Levels of attendance</p> <p>Adult Education</p> <p>Number of learning centre and learning access point users / frequency of use</p> <p>Increasing the proportion of students from under represented, disadvantaged groups and areas in higher education compared with the overall student population in higher education.</p>	<p>Existing indicator on basic literacy / numeracy?</p> <p>Quality of Life Indicator 20</p> <p>National Priorities in Education 1.1.A</p> <p>National Priorities in Education 2.2.A</p> <p>SPI (Cultural & Community Services 7)</p> <p>Social Justice Milestone 16</p>	<p>Early Years Development & Childcare Partnerships</p> <p>Audit Scotland</p>	<p>Local authority</p> <p>Local authority</p>	<p>2002/03</p> <p>Annual</p>	<p>Are these levels of attainment changing? (Check Scot Exec)</p> <p>SNS measures attainment at SCQF level.</p> <p>This is a problem which is tackled by multi-agency working. Is it an impact indicator?</p>

Proportion of young people achieving a qualification at level 3 or equivalent at age 25	Smart Successful Scotland 11b	Scottish Neighbourhood Statistics / Scot Exec	Local authority	2002	Annual	
Number / percentage of working age men (16-64) and women (16-59) who did / did not receive job related training in the 3 months prior to interview.						
CRIME & COMMUNITY SAFETY						
Crime						
Total volume and rate of crimes against property - housebreaking	SIP Core Compulsory Indicator 10	Scottish Neighbourhood Statistics / Scot Exec	Local authority	2002	Annual	
Total volume and rate of crimes against property - vehicles	SIP Core Compulsory Indicator 10	Scottish Neighbourhood Statistics / Scot Exec	Local authority	2002	Annual	
Number of recorded violent crimes per 10,000 population	Community Safety Indicator A1	Scottish Neighbourhood Statistics / Scot Exec	Local authority	2002	Annual	
Number of referrals to the Reporter to the Children's Panel for the following reasons: failure to attend school without a reasonable excuse; committing an offence; misuse of drugs, alcohol or volatile substances.	Community Safety Indicator A9	Scottish Children's Reporter Administration	Local authority		Monthly	
Number of adults / children killed or seriously injured as a result of road accidents	SPI (Police 8)	Audit Scotland	Local authority	2002/03	Annual	Addresses an angle of community safety not covered under 'Crime'
Number of children under 15 admitted to hospital as a result of accidental injury per 10,000 population of 0-14 year olds	Community Safety Indicator A5	Info & Stats Division, CSA	Local authority			
Number of adults admitted to hospital as a result of accidental injury per 10,000 population	Community Safety Indicator A6	Info & Stats Division, CSA	Local authority			
Number of accidental dwelling fires per 10,000 population	SPI (Fire 5)	Audit Scotland	Local authority	2002/03	Annual	
Number of incidents resulting in casualties per 10,000 population	SPI (Fire 4)	Audit Scotland	Local authority	2002/03	Annual	
Percentage of residents reporting fear of crime	SIP Core Compulsory Indicator 9	Requires a local survey				
Percentage of residents stating fear of crime is having a moderate or great effect on the quality of life.	SIP Core Compulsory Indicator 9	Requires a local survey				

Will use the new indicator on fear of crime, which will be introduced to the Scottish Household

<p>(a) Percentage of residents surveyed who feel 'fairly safe' or 'very safe' after dark whilst outside in their local authority area</p> <p>(b) Percentage of residents surveyed who feel 'fairly safe' or 'very safe' during the day whilst outside in their local authority area</p>	<p>Quality of Life Indicator 15 & Best Value Indicator 189 a&b</p>	<p>Local survey</p>	<p>Local</p>	<p>Survey in Sept / Oct.</p>
<p>Percentage of people who feel unsafe to some extent walking in the neighbourhood after dark</p>	<p>Community Safety Indicator A13</p>	<p>Scottish Crime Survey</p>	<p>Local authority</p>	<p>Hoping to include new fear of crime indicator in the Scottish Crime and Vicimisation Survey in 2005</p>
<p>Reduce the proportion of drug misusers who inject by 20% by 2005</p>	<p>NHS Framework 1.1.02</p>	<p>Scottish Drug Misuse Database (SNS)</p>	<p>Local authority</p>	<p>Annual (31 Mar)</p>
<p>Proportion of men and women aged 16-64 exceeding weekly limits of 21 and 14 units of alcohol</p>	<p>NHS Framework 1.09.01</p>	<p>Scottish Health Survey</p>	<p>Scotland</p>	<p>3 years</p>
<p>Number of recorded offences of an antisocial nature per 10,000 population</p>	<p>Community Safety Indicator A2</p>	<p>Local police force</p>	<p>Local authority</p>	<p>Will replace these indicators with ones which reflect alcohol / drug related incidents.</p>
<p>The percentage of residents surveyed who are concerned with different types of noise in their area</p>	<p>Quality of Life Indicator 17</p>	<p>Requires a local survey</p>	<p>Local authority</p>	<p>What offences are included in this description?</p>
<p>The percentage of residents surveyed satisfied with their neighbourhood as a place to live</p>	<p>Quality of Life Indicator 18</p>	<p>Requires a local survey</p>	<p>Local authority</p>	
<p>The percentage of residents surveyed who consider their neighbourhood is getting worse</p>	<p>Quality of Life Indicator 19</p>	<p>Requires a local survey</p>	<p>Local authority</p>	
<p>Number and percentage of residents stating satisfied with neighbourhood</p>	<p>SIP Core Compulsory Indicator 11</p>	<p>Requires a local survey</p>	<p>Local authority</p>	

chooselife

A national strategy and action plan
to prevent suicide in Scotland

Argyll and Bute
Local Action Plan

2004- 2006

CORPORATE LOGO's ETC

HERE

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Background:

Suicide is a complex issue influenced by a wide range of social, economic, psychological and other factors. Experience in other parts of the world provides important pointers that have informed the approach that Scotland is now taking to prevent suicide. The causes of suicide are complex. This has implications for action and interventions and for who needs to be involved. The range of influences on suicidal behaviour exceeds the capacity of any single agency. No single intervention is likely to produce the impact desired of reducing suicide. Making a difference will require effort and commitment over the long term to achieve changes of the order required to affect trends in suicide in Scotland’s population.

On 2 December 2002 as part of its aims to improve the overall health of the people of Scotland and achieve greater social justice, the Scottish Executive launched ‘Choose Life’: a National Strategy and Action Plan aimed at addressing the rising rate of suicides in Scotland. This strategy forms a key part of the work of the National Programme to Improve Mental Health and Well-Being in Scotland which was itself launched in October 2001.

This strategy and action plan represents the first phase of a 10 year plan with the goal of reducing the suicide rate in Scotland by 20% by 2013.

In working towards this goal the milestones to be achieved at local level by 2006 are:

- Establishment of effective local alliances with recognised co-ordination
- Local action plans for implementation in place with annual reviews and updates
- Development of local health improvement and community plans incorporating key points of local suicide reduction plans
- Action underway to implement local action plans with additional local investment on top of the ‘Choose Life’ implementation support fund
- Provision of funding support that helps to direct resources to priority groups within mainstream programmes and activities
- Local innovative practice established and undertaken by local community and voluntary groups
- Support given to establish and maintain local self-help groups
- Local training programmes developed
- Local areas provided with effective support and information
- Local developments informed by evidence of effective interventions and by sharing of practical experience

‘Choose Life’ is available to download from the Scottish Executive website at <http://www.scotland.gov.uk/library5/health/clss-00.asp>

From the budget of the National Programme, the Scottish Executive is allocating £12 million over the next three years, £3 million nationally and £9 million locally, to support and complement national and local action in the implementation of ‘Choose Life’. The above website also gives an overview of policy links for the ‘Choose Life’ strategy.

A considerable degree of local flexibility and imagination is being encouraged around the use of these support funds of £9 million over the next three years. One of the findings from the consultation work undertaken in the development of the national strategy was the benefits people said they gained from having local, accessible, flexible and person focused responses, services and supports in place.

Local areas will need to consider what they need to improve upon and develop to meet the objectives and priority areas of the strategy. They should identify what new investments will be made, partnerships for delivery, funding sources and what adjustments/enhancements they will make to existing programmes of work, initiatives, services and supports. Achieving the ‘Choose Life’ objectives will require promotion and awareness raising, prevention and early intervention, on-going care and support for all activities.

Objectives

The National Strategy and Action Plan has seven objectives:

Objective 1: Early Prevention and Intervention:

Providing earlier intervention and support to prevent problems and reduce the risks that might lead to suicidal behaviour

Objective 2: Responding to Immediate Crisis

Providing support and services to people at risk/in crisis, to provide an immediate response and to help reduce the severity of any immediate problem

Objective 3: Longer Term Work to Provide Hope and Support Recovery

Providing on-going support and services to enable people to recover and deal with the issues that may be contributing to their suicidal behaviour

Objective 4: Coping with Suicidal Behaviour and Completed Suicide

Providing effective support to those who are affected by suicidal behaviour or a completed suicide

Objective 5: Promoting Greater Public Awareness and Encouraging People to Seek Help Early

Ensuring greater public awareness of positive mental health and well-being, suicidal behaviour, potential problems and risks amongst all age groups and encouraging people to seek help early

Objective 6: Supporting the Media

Ensuring that any depiction or reporting by all sections of the media of a completed suicide or suicidal behaviour is undertaken sensitively and appropriately and with due respect for confidentiality

Objective 7: Knowing What Works

Improving the quality, collection, availability and dissemination of information on issues relating to suicidal behaviour (and self-harm) and on effective interventions to ensure the better design and implementation of responses and services and use of resources.

‘Choose Life’ also asks local areas to target the **national priority groups** of:

- children and young people (especially looked after children),
- people with mental health problems,
- people who have attempted suicide,
- people affected by the aftermath of suicidal behaviour or a completed suicide,
- people who abuse substances, and
- people in prison

National Statistics:

- In 2003 there were a total of 794 suicides and undetermined deaths in Scotland. This compares to 899 suicides and undetermined deaths in 2002; 887 in 2001; and 878 in 2000. (General Registrar for Scotland, 2004).
- Despite the unexplained and slight drop in 2003, suicide and undetermined deaths remain on an upward trend in Scotland.
- Men accounted for more than three out of every four such deaths. For men under 35, the number of deaths by suicide (including undetermined deaths) exceeds those by accident and is the greatest cause of death among men in this age group.
- The suicide rate in Scotland (including undetermined deaths) is 17.36 per 100,000 population – this is higher than in England (9.3 per 100,000) (figs from year 2000). There is no single known reason for this difference.
- While the overall rise in deaths through suicide from 1982 to 2001 was around 20%, the increase in *male* suicides was over 35%, with the rate for males 15-34 being 56%.
- For women, while the rate of suicide is smaller than that for men, it has increased over the last 20 years.
- Over 7000 people are treated in hospital each year for incidents of non-fatal self-harm.
- Within the general population, 13% reported having suicidal thoughts, 4% had attempted suicide and 2% had committed an act of self-harm at some time in their lives (Office for National Statistics, 2002).
- It is estimated that approximately 1 in 17 (250 000) people are having thoughts of suicide at any one time in Scotland.
- Suicide affects us all. Anyone can be at risk, men and women of all ages, occupations and socio-economic groups.

Local Information

1. Background

Argyll and Bute is a large and varied area covering more than 2,700 square miles, with a population of approximately 91,390. As the second largest Scottish local authority by geographical area, it is faced with a number of challenges in delivering services to its inhabitants. The distribution of the population is complex, as population numbers and sparsity figures do not adequately convey the physical distribution of the Argyll and Bute population. There are also wide local variations arising from factors like the landscape, local transport networks, affordable housing, access to services and employment opportunities.

The Argyll and Bute Community Planning Partnership, which has twenty four members, is ultimately responsible for the implementation of Choose Life locally. This is important as it means that a broad range of stakeholders have made a commitment to support the implementation of our local action plan. On a day to day level this responsibility has been devolved to the Choose Life Sub Group which will monitor progress and feedback to the partnership.

It is vital that we get across the message that the successful implementation of our local action plan depends on us developing a shared vision and a shared sense of responsibility for its implementation. The action planning seminar along with our informal discussions with individuals and groups have helped us to begin this process. We intend to build on this by identifying people who want to be involved by joining local reference groups, completing questionnaires and attending future seminars.

2. The rate of suicide and self-harm in Argyll and Bute

(Figures to be supplied)

3. Development and review of our local Choose Life Action Plan

We held an action planning seminar on the 9th of September in Inverary, this was attended by 75 people. The aims of this seminar were to increase awareness about Choose Life, identify gaps and priorities for development and also people who would be willing to be involved in the implementation and review of our action plan.

We plan to develop reference groups in up to seven local areas. These groups will help us to raise awareness about Choose Life, develop closer links with communities across Argyll and Bute, identify local ‘champions’ and therefore build in sustainability for the future.

We will hold two seminars focussed on reviewing, updating and assessing the impact of our local action. No dates or venues have as yet been identified but they are likely to take place around May 2005 and March 2006.

4. Choose Life activities to date

- The Choose Life Project Manager (full time) and Project Worker (part time) came in to post in May 2004
- Pace Theatre company wrote and performed 4 stories for us in 8 high schools and 9 community venues across Argyll and Bute
- Training of 2 ASIST Instructors for Argyll and Bute
- Delivery of 3 ASIST training programmes attend by a total of (figures to be supplied)
- Delivery of 2 Mental Health First Aid courses attended by a total of (figures to be supplied)
- Regular articles in local papers
- Action planning seminar in September, attended by around 75 people

5. Priorities for Development

Based on the issues raised at the action planning seminar and other discussions we have had with a variety of people we have identified six main strands of work.

a) Awareness Raising

We need to get across the message that reducing the incidence of suicide and self-harm is everyone’s business and that there are simple, practical things that we can all learn about recognising and responding to people at risk. Action 5.5 outlines how we plan to address this issue.

b) Information

We need to make sure that there is easy access to information about

- The help, advice and support available (locally and nationally)
- Signs and risk factors
- What you can do to help

- The scale of the problem
- What works (based on local, national and international evidence)

Actions 1.1, 1.2, 1.4, 1.5, 2.1 outline how we plan to address this issue

c) Co-ordination and Networking

We need to make sure that we make best use of the resources (people and skills as well money) available across Argyll and Bute, develop effective ways of sharing good practice and avoid duplication of effort where possible.

The feedback from our action planning seminar made it clear that people valued the opportunity to network with people from a broad range of sectors and organisations and would welcome more opportunities to do this. In an area like Argyll and Bute bringing people together can involve a significant amount of their time and so we need to be sure that maximum benefit possible is made of these opportunities. We are in the process of checking out with people what would be most useful and practical for them. Once we have this information we will plan a range of networking opportunities. Actions 1.8 and 3.3 outline how we plan to address this issue.

d) Training

Increasing the capacity of people across Argyll and Bute to respond appropriately and effectively to people at risk of suicide or self-harm is a vital element to the implementation of Choose Life locally. We therefore plan to run the following training programmes for as broad a range of people as possible.

General Mental Health Awareness Training

Improving mental health awareness and tackling stigma will provide a valuable foundation for the implementation of Choose Life. We are in the process of identifying an appropriate training package.

Applied Suicide Intervention Skills Training (ASIST) – Is designed to help participants become more ready, willing and able to help people at risk. Suicide can be prevented through the actions of prepared individuals.

Just as “CPR” skills make physical first aid possible, training in suicide intervention develops the skills used in suicide first aid. ASIST is a two-day intensive, interactive and practice-dominated course designed to help participants recognize risk and learn how to intervene to prevent the immediate risk of suicide.

Dealing with Self-Harm

It is important for us to get across the message that suicide and self-harm are very different issues and in particular that self-harm isn't necessarily about suicide. Sometimes people harm themselves because they want to die but often it is a coping method to help them get through a difficult time. We are in the process of identifying an appropriate training package. For each of the above training programmes we will be running training for trainers courses as a way of increasing capacity and ensuring sustainability. Actions 5.1-5.4 identify how we plan to address this issue

e) Supporting Local Voluntary, Community and Self-help Groups

We plan to offer this support through

- Access to training, conferences etc
- Direct Financial support to support innovative activities that address the gaps identified in action 1.5
- Development support for groups

Actions 1.6, 3.1 and 4.1 identify how we plan to address this issue

f) Policy/Protocol Review and Development

We have identified three key areas where policies/protocols need to be in place and shared (as appropriate) across statutory, voluntary, private and community sectors. These are

- A clear referral route in to mental health and other relevant support/services – to ensure an integrated approach and reduce the risk of people ‘falling between two stools’
- A discharge protocol that ensures appropriate follow up for people being discharged from hospital (general as well as psychiatric), care, prison etc
- An integrated procedure for recording incidents of self-harm or suicidal behaviour and feeding any relevant information into local planning processes

6. Monitoring and Evaluation

The Action plan table below outlines in very general terms how we will monitor and evaluate the implementation of Choose Life Locally. We have as yet to decide on a specific evaluation process. This will be addressed at the next Choose Life Sub Group meeting.

Argyll and Bute Choose Life Action Plan 2004/2006

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time Scale	Monitoring/ Evaluation
1. Prevention and early intervention	1.1	Produce local information Sheets	<ul style="list-style-type: none"> Increased knowledge and confidence in responding to people at risk Clear and accessible information about the support, advice and information available locally and nationally 	Whole Community	Existing materials Health Promotion staff £1000pa to purchase materials or develop new ones	First information sheets produced January 2005	<ul style="list-style-type: none"> Annual Choose Life Survey Review June 2005 Number of information sheets distributed
	1.2	Develop and maintain a resource library	<ul style="list-style-type: none"> Improve early identification Increased knowledge and confidence in dealing with people at risk Promote good practice 	<ul style="list-style-type: none"> People at risk of suicide/self-harm People who care for or about someone at risk Front line/staff 	Publications £700 year 1 £800 year 2	January 2005 - then ongoing	<ul style="list-style-type: none"> Annual Choose Life Survey Frequency of use
	1.3	Compile and publish a directory – audit formal and informal services to identify good practice and gaps in provision	<ul style="list-style-type: none"> Mapping of existing provision and gaps in each locality Identify and encourage good practice 	Whole Community	Attempt to recruit a student/volunteer to undertake the audit – this would go beyond simply mapping provision to consider the impact (current and potential) on meeting Choose Life objectives	First directory in place and audit completed by June 2005 Update of directory ongoing	<ul style="list-style-type: none"> Annual Choose Life Survey Frequency of directory use Service development/i improvement as a result of the audit

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
1. Prevention and early intervention	1.4	Develop a website	<ul style="list-style-type: none"> • Accessible information • A forum to discuss issues relating to suicide or self-harm • Increased awareness of mental health and wellbeing in general and Choose Life in particular • Identify and encourage good practice 	<ul style="list-style-type: none"> • Whole Community 	Website Development £1000 in year 1 ongoing costs £200pa	Basic website December 04 Interactive website March 2005	<ul style="list-style-type: none"> • Annual Choose Life Survey • Frequency of use
	1.5	Identify gaps in provision and feed this information in to the community and mental health planning processes	<ul style="list-style-type: none"> • Agreed priorities for development and local resourcing 	<ul style="list-style-type: none"> • People at risk of suicide/self-harm 	<ul style="list-style-type: none"> • Directory • Annual Survey • CHP's (when in place) 	March 2005	<ul style="list-style-type: none"> • Increase/changes in local resourcing/provision
	1.6	Support voluntary, Community and self-help groups <ul style="list-style-type: none"> • Providing access to training/conferences etc • Direct financial support for innovative activities that address the gaps identified in 1.5 • Development support for groups 	<ul style="list-style-type: none"> • Extension of valued local service/support provision • Increased confidence in responding to people at risk of suicide/ self-harm • More responsive local services/support • Improved co-ordination 	<ul style="list-style-type: none"> • People at risk of suicide/self-harm 	Existing voluntary, Community and self-help groups £20000 year 1 £45000 year 2 criteria for allocation still to be agreed	November 2004 – agree funding available and criteria December 2004/ January 2005 – invite proposals	<ul style="list-style-type: none"> • Annual survey • Update of the directory – are new/extended services/support in place

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
1. Prevention and early intervention	1.7	Develop clear referral route in to mental health and other relevant services	<ul style="list-style-type: none"> Improved co-ordination Relevant support and care services more integrated and accessible within local communities 	<ul style="list-style-type: none"> People at risk of suicide/self-harm 	Health, local authority, voluntary and community groups, service users and carers	June 2005	<ul style="list-style-type: none"> Feedback from service users and referrers Update of Directory
	1.8	Provide regular networking opportunities	<ul style="list-style-type: none"> Improved co-ordination 	<ul style="list-style-type: none"> Existing statutory, voluntary, community and self-help groups 	£2000 year 1 £4000 year 2	December 2004 circulate programme of networking activities	<ul style="list-style-type: none"> Number and range of people involved in networking opportunities Feedback following networking sessions
2. Responding to an immediate crisis	2.1	Develop a crisis card with relevant local and national sources of support	<ul style="list-style-type: none"> Quick and easy access to help and support People encouraged to seek help early 	<ul style="list-style-type: none"> People at risk of suicide/self-harm 	£1500 (potential to share costs with the Police)	January 2005	<ul style="list-style-type: none"> Annual survey Impact on uptake of local services
	2.2	Develop procedure to ensure immediate referral to appropriate services and recording of unmet need	<ul style="list-style-type: none"> Quick and easy access to help and support Clearer picture of unmet need 	<ul style="list-style-type: none"> People at risk of suicide/self-harm People presenting with suicidal/self-harming behaviour 	NHS, LA, Vol orgs, community and self-help groups	Review current procedures by February 2005 Update as necessary June 2005	<ul style="list-style-type: none"> Annual survey Uptake of services Feedback from service users/carers Feedback from local services

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
3. Longer term work to provide hope and support and recovery	3.1	<p>Identify</p> <ul style="list-style-type: none"> current provision and gaps potential sources of funding (e.g FUSIONS, Implementation of Mental Health Act, Choose Life local funds) investigate possibilities for altering/extending existing provision and/or developing new services 	<ul style="list-style-type: none"> Increased availability of support, counselling and psychological services Extension of valued local service/support provision 	<ul style="list-style-type: none"> Priority children and young people People at risk of suicide/self-harm People presenting (to any agency) with suicidal/self-harming behaviour 	<ul style="list-style-type: none"> Existing services Potential counselling in schools pilot in Oban High 	<p>First meeting of Oban working group 10/04</p> <p>Gaps in provision identified March 2005</p>	<ul style="list-style-type: none"> New/extended services in place Feedback from service users
	3.2	<p>Identify/develop discharge protocols</p>	<ul style="list-style-type: none"> Effective follow-up for people discharged from hospital (general as well as psychiatric), prison etc 	<ul style="list-style-type: none"> People presenting with suicidal/self-harming behaviour 	<ul style="list-style-type: none"> NHS, L.A, Scottish Prison Service Existing protocols Good practice from elsewhere 	<p>Review current procedures by February 2005</p> <p>Update as necessary June 2005</p>	<p>Agreed, integrated protocol in place</p>
	3.3	<p>Develop effective mechanisms for providing support and advice to people working with anyone at risk of suicide/self-harm</p>	<ul style="list-style-type: none"> Increased confidence Improved co-ordination 	<ul style="list-style-type: none"> Staff/volunteers working with people at risk of suicide/self-harm 	<ul style="list-style-type: none"> Local advisors with skills knowledge, and ability to offer advice and support Networking opportunities 	<ul style="list-style-type: none"> Local advisers in place February 2005 Review June 2005 	<p>Feedback from advisors and people who contact them for advice</p>

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
4. Coping with suicidal behaviour	4.1	<p>Identify</p> <ul style="list-style-type: none"> current provision and gaps potential sources of funding (e.g Carers Strategy, Choose Life local funds) possibilities for altering/extending existing provision and/or developing new services 	<ul style="list-style-type: none"> Appropriate support, counselling and services for families and others effected by suicide and self-harm 	Families and others effected by suicide and self-harm	<ul style="list-style-type: none"> Existing carers groups 	<ul style="list-style-type: none"> Gaps identified February 2005 Pilot May 2005 Review December 2005 	
5. Public awareness and training programmes	5.1	<p>Deliver ASIST courses</p> <ul style="list-style-type: none"> 4 in year 1 and 6 in year 2 	<ul style="list-style-type: none"> Increased capacity to respond effectively and appropriately to someone at risk of suicide or self-harm <p>Year 1 – 72 people completed ASIST course and 4 instructors trained</p> <p>Year 2 – 144 people completed ASIST courses and 2 instructors trained</p>	Whole community but with priority to front line staff (voluntary as well as statutory)	<p>Year 1 - £13305 (£1900 covered by course fees)</p> <p>Year 2 - £16830 (£11400 covered by course fees)</p>	<ul style="list-style-type: none"> 1st ASIST course June 2004 Diaries in place November 2004 	<ul style="list-style-type: none"> Analysis of diaries of ASIST participants Feedback from participants and where appropriate their employe Feedback from instructors

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
5. Public awareness and training programmes	5.2	<p>Deliver general mental health awareness (GMHA) courses, plus training for trainers</p> <p>Year 1 – 2 Mental Health First Aid Course and 1 GMHA course</p> <p>Year 2 – 6MHA course and 2 T4T</p>	<ul style="list-style-type: none"> Reduce stigma Increased understanding of mental health issues Increased capacity to respond effectively and appropriately to someone at risk of suicide or self-harm <p>Year 1 – 45 people completed course</p> <p>Year 2 – 75 people completed the course and 24 trainers trained</p>	Whole community	<p>Year 1 £1800 met by (£500 course fees)</p> <p>Year 2 £6600 met by (£3000 course fees)</p> <p>1st Mental Health First Aid Course August 2004</p>	<p>Decide on appropriate training resource by January 2005</p> <p>T4T course May 2005</p>	<ul style="list-style-type: none"> Feedback from participants Feedback from trainers
	5.3	<p>Deliver 6 dealing with self-harm courses, plus 2 training for trainers courses</p> <p>Year 1 – 1 Dealing with Self-harm course and 1 T4T</p> <p>Year 2 – 6 Dealing with self-harm courses and 2 T4T</p>	<p>Increased capacity to respond effectively and appropriately to someone at risk of suicide or self-harm</p> <p>Year 1 – 15 people completed the course and 12 trainers trained</p> <p>Year 2 – 75 people completed the course and 12 trainers trained</p>	Whole community but with priority to people working with young people	<p>Year 1 £2100 met by (£500 course fees)</p> <p>Year 2 £6600 met by (£3000 course fees)</p> <p>Dialogue Youth</p> <p>Other Youth work agencies</p>	<p>Decide on appropriate training resource by January 2005</p> <p>T4T course February 2005</p> <p>1st training course March 2005</p>	<ul style="list-style-type: none"> Feedback from participants Feedback from trainers Feedback from youth groups

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
5. Public awareness and training programmes	5.4	Develop and deliver general mental health and dealing with self-harm training to S3/4 pupils	<ul style="list-style-type: none"> Increased awareness about mental health Reduced stigma Improved coping skills Increased confidence in responding to people at risk of suicide or self-harm 	S3/4 pupils	Education, Dialogue Youth work Other youth work agencies	Develop/buy materials by February 2005 Sessions in place by May 2005	<ul style="list-style-type: none"> Feedback from pupils Feedback from parents
	5.5	Ongoing programme of suicide and general awareness talks	<p>Greater public awareness</p> <ul style="list-style-type: none"> Positive mental health and well-being Suicidal behaviour Potential problems and risks for all groups <p>Year 1 10 people recruited and 4 talks given Year 2 – 15 people recruited and 40 talks given</p>	Whole community	£600pa preparation seminar £500 pa travel costs	December 2004 – identify people to deliver talks February 2005 – preparation event March 2005 – first talks	<ul style="list-style-type: none"> Feedback from participants Feedback from people delivering talks
6. Supporting the media	6.1	Encourage local journalists to adopt NUJ guidelines	Appropriate reporting about suicide and self-harm	Local journalists and editors		Circulate guidelines and our contact details by December 2004	<ul style="list-style-type: none"> Feedback from journalists Monitoring of reporting in local papers
7. Knowing what works	7.1	Develop integrated procedure for recording suicide, suicidal behaviour and self-harm	improved quality of information in relation to the incidence of suicide and self-harm	<ul style="list-style-type: none"> NHS, LA, voluntary organisations 	Recording procedure in place by May 2005 Review November 2005	Recording procedure in place by May 2005 Review November 05	<ul style="list-style-type: none">

Choose Life Objective	Action Number	Planned Action	Expected Outcomes	Target Groups	Resources and Partners	Time scale	Monitoring/Evaluation
7. Knowing what works	7.2	Gather and share information about the application and impact of ASIST training	<ul style="list-style-type: none"> Improved information about the effectiveness of ASIST Information about any additional support necessary to ensure that the skills gained can be used to their optimal level 	<ul style="list-style-type: none"> ASIST participants and instructors 	ASIST participants and instructors £600pa for ASIST seminars	<p>Issue diary to participants November 2004 and to participants on all future courses</p> <p>Analyse and amend (if necessary) diary proforma January 2005</p> <p>Seminar for ASIST participants March 2005</p>	<p>Analysis of diaries</p> <p>Discussion at seminar</p> <ul style="list-style-type: none"> Annual survey

Action Plan Team Profile:Full Name (*of Planning Group*):

Remit:

Chair

Name: Ann Campbell

Designation: Public Health Practitioner

Organisation: Lomond and Argyll LHCC

Number and dates of Meetings held 2004/5:	
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Members

Name	Designation	Organisation
Dave Bertin	Mental Health Project Lead	NHS Argyll and Clyde
Shirley Mcleod	Health Development Officer	Argyll and Bute Council
Grace Ferguson	Acting Clinical Director	NHS Argyll and Clyde
Gwilym Gibbons	Kintyre Healthy Living Co-ordinator	
Carol Muir	Islay Healthy Living Co-ordinator	
Yenni Bute		
Maureen Beaton	Service Manager – Health	Argyll and Bute Council

Linking with National Policy at Local level:**** to be completed locally ****

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Choose Life Budget 2003-2006

	2003/4	2004/5	2005/6
INCOME			
Scottish Executive	76000	79000	83000
Income in Kind (Argyll and Bute Council)		1000	1000
Income from Training	0	2400	17400
Carried Forward		76000	46819
Total Income	76000	158400	148219
EXPENDITURE			
Employment Costs			
Project Manager	0	33231 (11 months)	35000
Project Worker	0	10000 (11 Months)	14500
Administrator	0	2000 (4 months)	4117
Sub Total	0	45231	53617
Operating Costs			
Rent, heating and lighting	0	1000	1000
Staff Training and Conferences	0	1600	2000
Travel and Subsistence	0	8500	10000
Postage	0	700	800
Stationery and Office Supplies	0	1500	1700
Telephone			
Landlines	0	420	450
Mobiles	0	1200	1300
Broadband	0	275	285
Publicity/Campaign Materials	0	700	700
Seminars and other events	0	2000	4000
Information Services			
Publications	0	700	800
Information Sheets	0	1000	1000
Newsletter	0	750	1000
website	0	1000	200
Capacity Building			
Training Delivered Internally	0	15505	16830
External training/conferences		1000	1500
Development Support For groups		17000	41000
IT/Office Equipment	0	3500	500
Fees to non-NHS agencies	0	6000	3000
Contingencies	0	2000	2000
Sub Total	0	67350	89065
TOTAL	0	112581	142682
Projected Surplus	76000	46819	5537

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