

Date of Meeting	9 October 2018
Report Title	Localities
Report Number	HSCP.19.089
Lead Officer	Sandra Ross, Chief Officer
Report Author Details	Sandra Ross Chief Officer SanRoss@aberdeencity.gov.uk
Consultation Checklist Completed	Yes
Directions Required	No
Appendices	None

1. Purpose of the Report

- **1.1.** The purpose of this report is to seek approval for the intent to move to a three-locality model (covering the whole of the city) for Aberdeen City Health and Social Care Partnership (ACHSCP) that is in alignment with the Community Planning Aberdeen locality partnerships.
- **1.2.** Subject to this approval, it would be intended to include this intent within the refreshed ACHSCP's Strategic Plan.

2. Recommendations

- **2.1.** It is recommended that the Integration Joint Board:
- a) Instruct the Chief Officer to review the locality structure and consult with relevant stakeholders and staff on the proposal to move from a four to a three-locality model and report back to the IJB on 26th of March 2019 with the results of this review and consultation along with the new Strategic Plan once finalised







3. Summary of Key Information

What is a locality?

- **3.1.** Locality planning is a key element of the Public Bodies (Joint Working) (Scotland) Act 2014 in relation to the planning and delivery of our integrated services.
- **3.2.** A locality is defined with the Public Bodies (Joint Working) (Scotland) Act 2014 as a smaller area within the borders of an Integration Authority. The purpose of creating localities is not to draw lines on a map, but to provide an organisational mechanism for local leadership of service planning, to be fed upwards into the Integration Authority's strategic commissioning plan. In the Scottish Government guidance note on localities, localities refer to the group of people in these areas who must play an active role in service planning for the local population, to improve outcomes.
- **3.3.** Localities are intended to be the engine room of integration, bringing together service users, carers, and health and care professionals to plan and help redesign services.
- 3.4. If this approach is to be successful, localities and their leadership teams must have the information they need about the nature of the communities they serve and must be empowered by the Health and Social Care Partnership to allow for local decision making on delivering outcomes against identified need. This requires engagement with all stakeholders within the locality, housing, children services, education and emergency services.

Background

- **3.5.** During the year preceding the launch of the ACHSCP the shadow IJB identified four localities. These were based on alignment with GP structures at that time. Given the early stage of the organisation at that time, an option was identified for this to be reviewed at the appropriate time.
- **3.6.** Although these four localities have been established, staff remain within traditional organisational structures, delivering in localities within some services.







Opportunity to move to three localities

- **3.7.** As the strategic plan is being refreshed this is considered an opportune time to review the current structure of localities. Although the four-locality structure can support primary care, the alignment with other key strategic partners is less evident.
- 3.8. Community Planning Aberdeen (CPA) is our Community Planning Partnership in the City, bringing together public sector agencies who are working together to deliver improved outcomes for those who live, work, visit and do business in Aberdeen. CPA is also required to divide the City into smaller areas, identifying locality partnerships, where people experience significantly poorer outcomes than other people (across the City and Scotland), as a result of socio-economic disadvantage.
- **3.9.** The CPA locality partnerships include the following areas:

	Locality B (pop. Approx. 20,500)	
Torry	Middlefield	Seaton
	Mastrick	Tillydrone
	Cummings Park	Woodside
	Northfield	
	Heathryfold	

3.10. Each smaller locality partnership aligns with three wider operational localities (which include housing and planning functions) which cover the whole of Aberdeen City.

Benefits of moving to three localities

Focus on areas where people experience poorer outcomes

3.11. Household incomes in each locality partnership identified by the CPA are generally significantly less than the City median.

 $^{^{1}\,\}underline{\text{https://communityplanningaberdeen.org.uk/wp-content/uploads/2016/05/Locality-1-Full-Strategic-}\\ \underline{\text{Assessment.pdf}}$







- **3.12.** There are also profound health inequalities between each CPA Locality Partnership when compared with the rest of the city, including:
 - · Lower rates of breastfeeding
 - Relatively poor dental health for children
 - Higher risks of teen pregnancies
 - Higher prevalence of poor mental health
 - Higher rates of alcohol and substance misuse (and more alcohol and drug related hospital stays)
 - More hospitalisations due to chronic obstructive pulmonary disease (COPD)
 - Lower life expectancies for men
 - Higher rates of emergency admissions for over 65s
- **3.13.** Currently, the CPA locality partnership boundaries do not fit within the ACHSCP Locality, as the CPA locality partnership of Tillydrone, Woodside and Seaton is split across Central and North Localities.
- **3.14.** Realigning the localities of ACHSCP to align with the CPA Locality Partnerships will allow ACHSCP to focus on reducing health inequalities in the City, by including and drawing on the CPA Locality Partnerships.

Alignment with key partners

3.15. As we have progressed and developed and as partnership working improves, there are additional benefits that could be achieved if we were to align with three localities based on community planning. These include being able to closer align operational service delivery with community planning partners and making it easier for the public to understand what locality their community falls under.

Public understanding

- **3.16.** A move to three localities will continue to provide key alignment with GP practices and will also facilitate a stronger alignment to other partners within community planning.
- **3.17.** We will engage with other community partners, early intervention, children's services, education and customer services to have alignment of locality boundaries while accepting these are not hard-line boundaries and still allow development of local communities.







- **3.18.** Considerations will be required on how we can have co-located partners to enhance communication, pathways and reduction in duplication and focus on early intervention in localities.
- 3.19. Working within the context that locality membership is set by the Scottish Government we will work with current locality leadership groups to review the number, membership and terms of reference of the locality leadership groups with a focus on the main purposes of Localities are to assess need, prioritise and plan how all resources are used in pursuit of delivering the outcomes of the strategic plan in the locality; involve representatives of a locality in any decisions or planned changes that are likely to significantly affect service provision in that locality.

4. Implications for IJB

4.1. Equalities

It is anticipated that the implementation of the recommendations within this report will have a neutral impact on the protected characteristics as protected by the Equality Act 2010.

4.2. Fairer Scotland Duty

Moving to a three-locality structure in line with the CPA structure will help the IJB to meet its responsibilities under the Fairer Scotland Duty. Designing a reviewed locality structure around the areas of regeneration (CPA locality partnerships) and working more closely with CPA partners will help to ensure that the IJB actively considers what it can do to reduce poverty and inequality when making key decisions.

4.3. Financial

There are no specific financial implications arising as a direct result of this report.

4.4. Workforce







The proposed changes will have a minor impact on some members of the senior leadership team, and discussions have taken place with the affected individuals which will see alternative arrangements put in place, negating any potential negative individual implications as a result of the recommendations in this report. Other wider teams may have minor implications are a result of this report, and full support will be given to those affected.

4.5. Legal

There are no specific legal implications arising as a direct result of this report.

4.6. Other – None identified

5. Links to ACHSCP Strategic Plan

5.1 Localities underpin the majority of the components of the IJB Strategic Plan. The closer alignment with Community Planning Partners localities will strengthen the links between the IJB Strategic Plan and the Local Outcome Improvement Plan.

6. Management of Risk

6.1. Identified risks(s)

There is a risk that the IJB does not maximise the opportunities offered by locality working.

- **6.2.** Link to risks on strategic or operational risk register: Risk 8 (strategic)
- **6.3.** How might the content of this report impact or mitigate these risks:

The recommendations of this report will help to mitigate the risk that the opportunities of locality working will not be realised, as the closer alignment with the localities of our community planning partners will allow for better and more efficient partnership working.







Approvals		
Condragoss	Sandra Ross (Chief Officer)	
Alal	Alex Stephen (Chief Finance Officer)	

