



THE EDINBURGH PARTNERSHIP

Preventative Approaches in Edinburgh

Purpose of Report

1. This report updates the Executive on recent discussions within the Council relating to prevention and preventative services. The report highlights key messages from recent staff engagement and suggests principles to underpin a wider partnership approach to prevention. It proposes that existing core projects and programmes are acknowledged in a prevention strategy and action plan, and that a limited number of additional priority actions are developed in response to needs, which will be identified through a gap analysis. A partnership steering group is recommended to oversee the development and implementation of the strategy and action plan.

Main Report

Background

2. A decisive shift towards prevention is required, which should be undertaken on a partnership basis across the city. Recent years have seen an increased policy focus on prevention, particularly through the Christie Commission report on the Future Delivery of Public Services (2011). Other references include the Scottish Parliament Finance Committee's Report on Preventative Spending (2011); and the National Group on Community Planning (see: *Embedding Prevention in SOAs*, October 2012).
3. The Christie Commission did much to reinforce the need for prevention and highlighted the link with inequalities. The Commission's report cited previous evidence suggesting that 40-45% of public spending in Scotland is focused on meeting 'failure demand', i.e. reactive spending aimed at addressing acute problems.

Community Plan/Single Outcome Agreement

4. These policy recommendations were taken up through the national guidance on Single Outcome Agreements (December 2012), which confirmed the need for a focus on prevention through these agreements. Edinburgh's Single Outcome Agreement for 2013-16 (the City Community Plan) highlights specific preventative action within each of its main outcome areas. Edinburgh is addressing aspects of prevention through a number of significant policies and programmes, such as the strategies for early years intervention, reducing



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health inequalities, improving employability, reducing domestic violence, tackling drug and alcohol addictions, and tackling poverty and inequality. Further work is required across the Partnership to make a decisive shift in this direction. Ways to achieve shared learning across community planning partnerships in relation to prevention are being considered nationally.

Edinburgh Context

5. Transformational change, including prevention and personalised services, is required in public services. These developments have to balance improved outcomes for citizens with achieving and maintaining financial stability. In Edinburgh, demographic pressures alone pose a massive challenge to city partners, with projected increases in the total population; more young people and families, and more people in the oldest age groups. The public sector is responding to challenging increases in need, while facing major financial pressures, with a sharper focus on service transformation and leaner delivery. Prevention is a key approach to achieve the budgetary and service transformation targets.
6. In preparation for an enhanced partnership approach to prevention, the Council has undertaken a review of the issues for Council services, including those which will become joint provision under the legislation to integrate health and social care.

Prevention Seminar

7. In November 2013, the Council held a seminar for both Council and NHS officers, both to extend the existing discussions on prevention and as a precursor to wider Edinburgh Partnership dialogue involving all partners. Various definitions of prevention were reviewed and a preference expressed for the following:

“Actions which prevent problems and ease future demand on services by intervening early, thereby delivering better outcomes and value for money.”
(Source: Scottish Government/COSLA)
8. In addition, important distinctions were noted between primary, secondary and tertiary approaches to prevention, along a continuum of need. Currently, the definition of these categories reflects health and social care issues, and would need to be broadened to be usable for all partners:



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- **Primary prevention/promoting wellbeing** – aimed at people who have little or no social care needs or symptoms of illness. The focus is therefore on maintaining independence and good health and wellbeing (universal provision).
 - **Secondary prevention/early intervention** – aims to identify people at risk and to halt or slow down any deterioration, and actively seek to improve their situation (targeted provision).
 - **Tertiary prevention** – aimed at minimising disability or deterioration from established health conditions or complex social needs. The focus here is on maximising people’s functioning and independence, and on preventing inappropriate use of more intensive services for people with given levels of need, which could be met by lower cost services or interventions (intensive provision).
- 8 At the seminar, each Council service area presented a summary of their preventative work, including the two “Total Neighbourhood” projects being delivered jointly by partners. Two case studies were also discussed in groups to focus on what preventative approaches could be adopted. The groups then considered a future vision for prevention work in the Council and city. The Council’s Chief Executive concluded the session by emphasising the need to empower local communities and ensure that public bodies work together to address the scale of inequalities in the city.

Key Messages from Staff Engagement

- 9 The key issues identified at the seminar fell into eight broad themes, listed below for further consideration through the Edinburgh Partnership. Appendix 1 gives more detailed information.
- **Partnership** – bringing together partners in the city, working together for customers, and working co-productively with customers and communities
 - **Investment in workforces** – staff empowerment, being proactive to address needs, workforce development, agreeing a common purpose
 - **Language** – agreeing definitions, keeping language simple, good communications
 - **Information Sharing** – shared learning, roll-out of existing good practice, using statistical and other evidence constructively, evidencing prevention outcomes and measuring performance
 - **Timing** – the importance of first points of contact and rapid responses, anticipatory approaches, providing the right support at the right time, providing appropriate help across the life course



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- **Building Assets** – building resilience at individual, community and city levels, developing assets-based models in which people want to participate, building individual and community capacity
- **Location** – locally-based services, encouraging local involvement, potential for co-location of multi-agency teams
- **Resources** – targeted resource allocation, doing more with what we've got, developing a model to influence the future structure of public services.

10 Discussions since the seminar have focused on how to take forward a strategic approach to prevention between all city partners, and which will also operate for the Council's own and joint services. As a basis for discussion with city partners, a set of draft strategic principles informed by the initial work and seminar has been drawn together for further consideration:

Suggested Strategic Principles to Underpin a Shift to Prevention

- (a) Prevention will be mainstreamed across all the Edinburgh Partnership's activity, embedded as a priority and a collective responsibility for all city partners and communities.
- (b) A decisive and long-term financial and operational shift to prevention will be made through mainstream services and new initiatives.
- (c) Genuine engagement with citizens and communities, which builds on their assets and establishes trust, is essential to successful preventative action.
- (d) Effective information, advice and communication will be embedded as key elements of prevention.
- (e) Services will focus on building resilience through establishing positive and supportive relationships between providers and service users, families and communities.
- (f) Poverty and inequality will be tackled as priorities in ensuring effective prevention.
- (g) Prevention will be addressed across the life course, from developmental support in early years and to maximising wellbeing in later years.
- (h) Measuring, understanding and sharing what works are key to the successful implementation of an effective prevention strategy.
- (i) A successful and long-term shift to prevention depends on an engaged, knowledgeable and committed workforce, trusted by the community it serves.

11 Edinburgh Partnership Executive members' comments are sought on this initial set of draft strategic principles and how they might be embedded in the work of the Partnership, for example through the development of related work streams.



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Identifying priority preventative actions for the Edinburgh Partnership

- 12 It is suggested that a full 'audit' of all work with a preventive impact across the Council and its partners would be excessively time-consuming. Council service areas have started a high-level mapping of major preventative actions or programmes, indicating how these align to both the Council's own strategic outcomes and the Edinburgh Partnership's Single Outcome Agreement outcomes (see Appendix 2). This mapping covers core prevention initiatives and will be developed to indicate the resources and infrastructure involved. As next steps, it is proposed that:
- the mapping is extended to include the activity of the Edinburgh Partnership member organisations
 - further joint work is undertaken on a gap analysis
 - priority initiatives are identified to address the identified gaps with management and resourcing from identified partners or partnerships.
- 13 The gap analysis should identify opportunities for additional preventative action across the Edinburgh Partnership, which are associated with significant "wicked" or intractable issues. The exercise would establish a manageable number (five or six) prevention initiatives for new or additional effort to address identified gaps. Each initiative would be managed and assessed by a specific partner or partnership across community planning.
- 14 In arriving at these projects, partners or partnerships would be looking to identify areas and opportunities to move interventions 'upstream' to prevent rather than react to crises, and identify existing service gaps, which offer an opportunity for better outcomes. Initiatives should target priority outcomes in terms of wicked issues identified by the Edinburgh Partnership, or from known critical points and pathways into crisis.

Governance

- 15 A prevention steering group is already in place in the Council, chaired by Michelle Miller, Chief Social Work Officer. The group was established initially to consider Council responses to prevention, including the prevention seminar, and has already made some partner contacts because of the breadth of the issue. There will be a continued need for the Council to manage prevention as a core theme in its own business planning. For initial work to define a prevention strategy and pilot initiatives, the existing group could readily be adapted to include the Edinburgh Partnership. Executive members are asked to consider this as an option for the governance of the Edinburgh Partnership's prevention work streams.



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Indicative Timescales

- 16 To take forward the issues covered in this report, the following initial actions and draft timescales are suggested:

Action	Dates (2014) (weeks from 20/3/14)
1. EP Executive report (6-3-14) to be considered for EP Board discussion (20-3-14).	6 and 20 March
2. Confirm EP governance structures (Steering Group or similar), hold first meeting, agree strategic principles to underpin the EP's prevention approach.	(3 weeks)
3. EP partners to map key or significant prevention projects in line with SOA outcomes and/or partner outcomes (related to existing SOA content).	(7 weeks)
4. Prepare a 1 st draft EP Prevention Strategy and Plan to complement the SOA, which references strategic principles and existing core actions.	(7 weeks)
5. EP partners to develop initial work streams/business processes (e.g. evidence gathering, performance, capacity building) linked to the strategic principles agreed at 2 above.	(9-10 weeks)
6. EP partners to carry out a gap analysis to identify a small set of new prevention projects for collaborative action across the partnership (5 or 6).	(14 weeks)
7. Assemble all information into in 2 nd draft EP Prevention Strategy and Plan, including draft performance framework, for consideration by the EP Executive.	(24-25 weeks)

Summary

- 17 Community Planning Guidance indicates that Partnerships should produce a 'prevention plan' or similar indication of a strategic approach. Currently, a small number of prevention projects are noted in the City Community Plan (SOA) for 2013-16. The Council has started an internal discussion regarding prevention, partly to support its own business planning processes. A staff seminar generated broad discussion and a set of draft principles to help progress a prevention strategy. These are now offered for wider discussion with city partners, together with a governance proposal for strategic oversight of the Partnership's prevention work streams.



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- 18 An Edinburgh Partnership Prevention Strategy and Plan are recommended. These would reference major existing prevention projects or programmes and propose a new set of prevention initiatives, targeted through a gap analysis. The proposed Prevention Strategy and Plan would also address the requirements for a strategic shift to prevention, such as attention to cross-cutting issues and business processes.

Recommendations

- 19 The Edinburgh Partnership Executive is asked to:
- (i) note the initial work on prevention described in this report
 - (ii) establish a Prevention Steering Group to help the Edinburgh Partnership make a decisive shift to prevention
 - (iii) consider and recommend the membership of this group
 - (iv) offer comments on the draft principles set out in this report as a basis for work by the Steering Group
 - (v) agree that partners will commit staff time to support the work of the Steering Group and related work-streams, including the proposed gap analysis
 - (vi) agree that a progress report, with a draft strategy and action plan be presented to the August meeting of the Executive.

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Appendices:

Appendix 1: Key Messages from Staff Engagement

Appendix 2: Extract/Example of Mapping Template (Draft)



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Appendix 1

Key Messages from Council Staff Engagement Seminar – November 2013

<p>Partnership:</p> <ul style="list-style-type: none">• <i>Bringing together communities and professionals</i>• <i>Everyone's responsibility</i>• <i>Communities are there long term</i>• <i>Establishing trust and building relationships</i>• <i>Sharing</i>• <i>Joined up</i>• <i>Community support</i>• <i>Collective responsibility</i>• <i>It's about community as well as services</i>• <i>Role of volunteering and education opportunities</i>• <i>Acting together with communities earlier to support good outcomes</i>• <i>Customers in common</i>• <i>All staff and services working to common understanding</i>• <i>Positive relations with community</i>• <i>Partnership</i>• <i>Co-production</i>• <i>All in this together</i>• <i>Joined Up/Partnership/Collaborative</i>	<p>Ways of Working:</p> <ul style="list-style-type: none">• <i>Enable staff to have the freedom to share concerns without fear of working outwith their processes/boundaries</i>• <i>Learning from elsewhere – e.g. GIRFEC (a 'common purpose' is identified for a child)</i>• <i>..not new roles or teams, but acting at different times and different ways</i>• <i>Proactive not reactive</i>• <i>Need to empower our staff</i>• <i>...holistic solutions to minimise crisis and work to build relationships with our citizens</i>• <i>Co-ordinate</i>• <i>Clear pathways</i>• <i>Devolved teams</i>• <i>Actions to stop poor outcomes</i>• <i>Supporting good outcomes</i>• <i>Positive outcomes on a small scale win hearts and minds and generate enthusiasm for more</i>• <i>Need a case management model</i>• <i>Personalisation</i>• <i>Culture</i>• <i>Workforce Development</i>• <i>Risk Aversion</i>• <i>Permeable service boundaries (no wrong door)</i>• <i>Flexibility v structural constraints</i>• <i>Work out how to agree a common purpose in situations</i>• <i>Person centred but also consistent</i>• <i>Whole systems approach</i>• <i>Named person for all vulnerable people</i>• <i>Reducing Inequalities</i>• <i>How will prevention strategy fit with commissioning arrangements?</i>• <i>Mainstreaming of preventative agenda</i>• <i>Preventing negative impacts on families and communities</i>• <i>Stop inventing more and more specialist services to fill perceived gaps.</i>• <i>Invest in managers</i>• <i>Integrity</i>• <i>Anticipating needs</i>
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	<ul style="list-style-type: none"> • <i>Cut down on fire fighting</i> • <i>Prevent further crisis after first crisis</i>
<p>Language:</p> <ul style="list-style-type: none"> • <i>Keep it simple</i> • <i>Emphasise positives</i> • <i>Opportunities for everyone</i> • <i>Right communication with people</i> • <i>Agree a 'common purpose' rather than a vision?</i> • <i>Definition will have to be succinct and cover all of the Council</i> • <i>Get the actions/content in place first and then worry about a vision?</i> • <i>SOA vision good enough – just use this?</i> • <i>Win hearts and minds</i> 	<p>Timing:</p> <ul style="list-style-type: none"> • <i>Those at first point of contact can make a big difference</i> • <i>Planning for the future</i> • <i>First point of contact – confident and knowledgeable; signposting people on to Social Care Direct</i> • <i>Anticipation</i> • <i>Forethought</i> • <i>Acting earlier – individuals, services</i> • <i>Sooner rather than later</i> • <i>Doing something about it before it happens</i> • <i>Support at the right time</i> • <i>Focus on long term outcomes act earlier to support them</i> • <i>Early intervention</i> • <i>Proactive</i> • <i>Relevant through the life course</i> • <i>Right services at right time</i>
<p>Information Sharing, Evidence, Performance:</p> <ul style="list-style-type: none"> • <i>Use statistics constructively (look for patterns)</i> • <i>Performance culture needs to move</i> • <i>Evidence Based</i> • <i>How will we know prevention is working?</i> • <i>Eligibility criteria are a barrier to early intervention and prevention</i> • <i>Encourage and ensure genuine learning from significant case reviews, which leads to system change</i> • <i>Effectiveness</i> • <i>Information Sharing</i> • <i>GIRFEC model/approach...seeks out information which may be missing and promotes understanding of the full picture – develop something similar for adults and communities?</i> • <i>I.T. fit for purpose</i> • <i>How do we predict what is needed?</i> 	<p>Capacity Building/Resilience/Assets Based:</p> <ul style="list-style-type: none"> • <i>Community, family and individual capacity is the basis</i> • <i>Resilience issues need to be built through the individual, community and city</i> • <i>Maximising abilities</i> • <i>Building Capacity – Service users</i> • <i>Social and personal capital</i> • <i>See old people as resource</i> • <i>Promoting independence</i> • <i>Empowering people and communities to deal with issues themselves</i> • <i>Promote independence rather than dependence</i> • <i>Stronger more resilient communities</i> • <i>A model...which is assets-based and in which people will want to participate</i> • <i>A model....to assist in smoothing age and stage service pathways</i> • <i>Focus on what is needed for individuals and communities to thrive (person centred rather than service-centred)</i> • <i>Resilient communities</i> • <i>Empowerment of staff/service users/communities</i>



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<p>Location:</p> <ul style="list-style-type: none">• <i>Locally based services (co-location and developing)</i>• <i>Good strong community hub (civic centre)</i>• <i>Libraries – having more information</i>• <i>Importance of localism</i>• <i>Encouraging local involvement</i>• <i>Co-location of multi-agency teams</i>	<p>Money/Resources:</p> <ul style="list-style-type: none">• <i>Doing it better will save money</i>• <i>Targeted resource allocation</i>• <i>Social Return on Investment</i>• <i>(A model/framework/methodology for intervention to agree a common purpose e.g. building on that used in GIRFEC)... could support and influence discussions on the future structure for council services – be BOLD</i>• <i>Maximise investment</i>• <i>Equality/focus/target/use Scottish Index of Multiple Deprivation</i>• <i>Commit to a ‘percent to prevent’ to shift resources/move a percentage upstream</i>• <i>Doing more with what we’ve got</i>
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Executive Meeting

6 March 2014

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Appendix 2

Mapping of Core Prevention Projects, Links to SOA and Council Outcomes
(best fit): *Examples for illustration only – work in progress*

SOA Outcomes	Council Outcomes (NB other EP partners can add their own outcomes)	Core Prevention Projects/Initiatives (Examples)
Edinburgh's children and young people enjoy their childhood and fulfil their potential	Edinburgh's children and young people enjoy their childhood and fulfil their potential	<ul style="list-style-type: none"> • <i>Early Years Change Fund</i> • <i>GIRFEC (Getting it Right for Every Child)</i> • <i>Edinburgh Guarantee</i>
Edinburgh's citizens experience improved health and wellbeing, with reduced inequalities in health	Health and wellbeing are improved and there is a high quality of care and protection in place for those who need it.	<ul style="list-style-type: none"> • <i>Welfare Reform Strategy</i> • <i>Health Inequality Programme</i> • <i>Personalisation Programme</i> • <i>Carers' Strategy</i> • <i>Older People's Change Fund</i>
Edinburgh's communities are safer and have improved physical and social fabric	Edinburgh is an excellent place in which to live, study, work, visit and invest	<ul style="list-style-type: none"> • <i>Homelessness strategy</i> • <i>Housing Strategy</i> • <i>Community Safety Strategy</i>
Edinburgh's economy delivers increased investment, jobs and opportunities for all	Edinburgh's economy delivers increased investment, jobs and opportunities for all	<ul style="list-style-type: none"> • <i>Economic Development Strategy</i> • <i>Community Learning and Development</i> • <i>Volunteering Strategy</i>
	The Council is an efficient and effective organisation and a great place to work	<ul style="list-style-type: none"> • <i>Employee health and wellbeing initiatives</i> • <i>Total Place and Total Neighbourhood</i> • <i>Communications Strategy</i> • <i>Better Outcomes through Leaner Delivery (BOLD)</i>