

## Update on Scrutiny Report Community Development: Recommendation Tracking

### General

The PCT and Adult Social Services, as well as other Healthy Leeds Partners, welcomed the recommendations of the Scrutiny Report. Although the restructure of the PCT and the Local Authority has had an impact on progressing the recommendations, community health development will be a key component of the new Health and Well Being Plan which will be developed later this year. Both the Leeds PCT and Leeds City Council already make a significant investment in community health development work. However we would like to emphasise the importance of community development for the wider Leeds Strategic Plan and not just for the health and well being theme. The recently published National Institute for Health and Clinical Excellence Guidance on community engagement also needs to be taken into account.

### **Recommendation 1**

**That Leeds Primary Care Trust, jointly with Adult Social Services, progresses immediately the development of a cohesive Community Development Strategy for Health and Wellbeing.**

As both the Leeds PCT Strategy and the Leeds Strategic Plan are near completion, we are now in a better position to develop our strategic approach to community development and to ensure it links strongly to the strategic outcomes we have agreed. All the partners at the HLP in December 2007 agreed the importance of the community development approach and committed staff time to work together to develop a coordinated approach. The Executive, to whom progress planning was remitted, accepted that a strategic approach needed to inform future joint commissioning should be an early issue for the new joint commissioning group for promoting health. Also the PCT and Adult Social Services are currently completing a review of the Healthy Living Centres whose Big Lottery funding has expired together with related community health development projects. Bridge funding has been provided by the PCT until June 2008 and proposals will be brought to the joint commissioning group to provide a basis during the remainder of 2008-9 on which a firmer commissioning approach can be taken over the following two years. However it should be noted that this is in the context of a resource framework which is less than the overall funding previously provided by the Big Lottery.

This recommendation is now included in the objectives of the PCT Health Inequalities Manager (Neighbourhoods) who will work with the Local Authority to take this work forward. The Neighbourhoods Manager has met with the CD lead for Wakefield PCT, and the same post for Bradford PCT and has been offered guidance and access to their CD strategies, which will help inform the work in Leeds. The PCT also joined the Community Development Exchange, as a mechanism to ensure our work is based on best practice regionally and nationally.

We will also draw on earlier work carried out by Leeds Voice on a community development strategy for Leeds.

**Stage: 2 (achieved)**

#### **Recommendation 2**

**We recommend that the Local Strategic Partnership proactively challenges the level of commitment and investment made from all partners towards community development and develops an action plan aimed at further embedding community development values and principles across the partnership.**

The Leeds Initiative Programme Manager for Harmonious Communities started in post in January 2008 and is discussing with organisations and different departments about her future work programme. This will include addressing the embedding of community development values and principles across the partnership.

**Stage: 4 (not achieved – progress made acceptable)**

#### **Recommendation 3**

**That all health and social care service commissioners in Leeds commit to 3 year minimum contracts for community development programmes and that the full cost of delivering these programmes, including contributions to core costs, is recognised with these contracts.**

Commitment was given at the last meeting to take this recommendation forward. Partners are exploring how they will implement this in line with the new commissioning approach.

**Stage: 2 (achieved)**

#### **Recommendation 4**

**That the Health Leeds Partnership champions the Leeds Community Health Development Network (CHDN) and ensures that it provides opportunities for community development projects to share best practice, celebrate achievements and actively encourage joint working initiatives across the city.**

**The Network should also develop a themed training programme based on the needs of community development workers and encourage broader education and understanding of community development across the city.**

The Healthy Leeds Partnership values the Community Development Network and, in relation to the new partnership arrangements, is examining where it would need to be placed to have the most influence.

The Community Health Development Network has identified the need to develop training as part of its future work programme. The future of the CHDN is integral to the development of accredited training for current CD workers as well as the development of induction plans for new workers. The majority of CD work is delivered by CVFS partners, and the aim is to improve the skills and competence of those workers. This development work needs to be supported through the CHDN, which would ensure local staff became competent using the National Competency Standards for CD.

**Stage: 4 (not achieved – progress made acceptable)**

**Recommendation 5**

**That the Healthy Leeds Partnership carries out an evaluation of the Community Health Development Network during its first year and explores joint funding opportunities to maintain the sustainability of the Network in the long term. The results of this evaluation will be reported back to the Scrutiny Board in April 2008.**

The current and potential contribution of the network is recognised at senior level by the Chief Executive of the PCT and the Director of Adult Social Services. In the previous response we agreed that evaluation the Community Health Development Network was important but that it would be too early to do this after its first year. We can give the Scrutiny Board an update on its first year's activity and we are exploring mechanisms to do an independent evaluation at a later date.

A meeting of key officers and Community Health Development Network representatives was convened in January to address the sustainability of the Network. From this a small task group, involving the PCT, voluntary sector and the Leeds Initiative was set up to develop a proposal to secure resources to continue to develop and maintain the Network. The PCT has secured £25K funding for a part time post to support the CHDN and work on the delivery of the recommendations. In the meantime Leeds VOICE is providing interim support for the network.

**Stage: 4 (not achieved – progress made acceptable)**

**Recommendation 6**

**That Community Development is seen as an integral part of any continuing professional development across all partners and particularly within the health and social care sector.**

The PCT recognises that all Public Health staff complete elements of CD training within their PH Masters or Postgraduate Diploma. The new part time post will contribute to training for staff and elected members as well as induction planning for CD staff.

The commissioning approach will take into account the need for capacity building referred to in Recommendation 6. The new direction being taken by Adult Social Care emphasises the need for an understanding of the community development approach which relates strongly to Leeds Strategic Plan objectives (for example promoting independent living). The Council's newly established Strategic Leadership Team for health and wellbeing, together with a joint commissioning structure for wellbeing, which will include other Council services, will enable both service and workforce issues to be taken up more widely. Commissioning will also be informed by the Joint Strategic Needs Assessment being prepared during 2008 and the new Local Involvement Network for which the Council, as local commissioner, has included a community development in the specification.

**Stage: 2 (achieved)**