

Compact Partnership Minutes

Friday 9th June from 09.30am – 12.30pm

Apologies

Linda Irvine – NHS
Wendy Dale – HSCP
Nick Croft - CEC
David Happs – Police Scotland

Attendees

David Girrity – SFRS
Dona Milne – NHS
John Moore – TSSG Representative
Ella Simpson – EVOC
Paul Wilson – Volunteer Centre
Gordon Hodgson - ESE
Jan-Bert van den Berg– TSSG Representative and Compact Chair
Denise Horn – Compact Secretariat

Observer

Jayne Cullingworth

1. **Any other business** – no items
2. **Action meeting notes**

The manifesto has been sent out to new councillors, and it has been agreed that TSI will be part of induction for new councillors. Compact Voice 2018 will be used as part of this induction – to be reviewed later in the meeting. There has been significant discussion around the issues in the manifesto, and keeping these discussions live is key to the next year.

3. **Attendance at meetings**

Jan- Bert reported back on meeting with members of the Compact Partnership – he has no concern that there is a drop off of attendance or interest in the partnership, however we need to look at dates in the future to ensure maximum attendance. Linda Irvine and Dona Milne to agree attendance at meetings.

Action: DH to send out a doodle poll with dates for next meeting.

4. **Priorities**

- 4.1 **Fire Service Priorities**

Currently a new SFRS plan is being developed it is due out in October.

The plan will cover: Reduction in dwelling fires, Reduction in unintentional harm.

Fire & Rescue have the capacity to be more pro-active in wider prevention issues. There is simple link we can make to thematic and locality forums (EVOC) and this has been developed. They need to think about being more specific/practical about what their input looks like so there is an understanding of what can be asked of them.

DM also suggested that work around smoking cessation could also link in with SFRS.

About to introduce NHS falls assessment. Piloting it in the North East of Edinburgh and then will be rolled out. Joint visits with NHS are a possibility, or introductions.

Actions: To identify any small steps to enhance the awareness of the SFRS and their additional remit to be launched in October.

David Girrity – to write a blog for EVOC and Compact.

Third Sector conference and AGM, SFRS to have a stand.

Dona Milne to encourage teams to work with SFRS.

4.2 Third Sector Priorities

SG has carried out a review of third sector interfaces. TSI chief execs have been working together to look at the priorities for the TSIs, to get some common purpose – this work is currently in progress. SG Funding has been confirmed until Sept 2018 (not value), if significant changes are to be made they will be after this date.

Wider third Sector priorities:

- Awaiting the changes in council administration for clarity
 - Localities
 - IJB
- Prevention
- Partnership working

4.3 NHS priorities

Compact Partnership responsibility is to be considered by Linda Irvine and Dona Milne.

- Biggest focus should be on social and health inequalities – doing a lot of work on this. Need to work with those in the community.
- Helping to make connections for people, difficult times to find out the right route for work and connections within the NHS.
- Relationship working and joining people up.

5. Participatory Budgeting

Thinkspace outcomes to feed into the EVOC position paper on PB. Considered a negative experience by those attending the Thinkspace but recognised it has potential.

Generally, the overall principle was considered good – however the operation of PB projects has been flawed. CEC attended the Thinkspace so are aware of issues.

6. Investment in the Third Sector

Need to look at investment mechanisms into the Third Sector – to make money work better for the Sector. Look at investment rather than being on a reductive agenda.

Agreed that Compact Partnership should be bringing forward a clearer investment strategy.

Agreed that a paper should be drafted to take to the 7th December EP board on investment strategy. So that any operational work would complement to investment strategy.

ACTION: Looking at the wider investment strategy. Invitation to people below to have discussions to develop this.

- Ella Simpson – EVOG (to lead)
- Brian Houston - Chair of NHS Board
- Oliver Escobar – What works Scotland
- Donna to find Public Health Practitioner.
- Helen Chambers – Inspiring Scotland
- Nick Croft to find participant for CEC.

7. Compact Voice Report

Compact Voice Report 2018 was agreed for EP board with minor changes. Final version is sent with these minutes.

8. Edinburgh Partnership Priority Paper

Been doing work in NHS to get board to think what their contribution could be to the Prevention agenda. Then took this in a presentation to the Edinburgh Partnership about looking at health inequalities and where we should put our efforts across the CPP. 4 priorities have been identified:

- Housing
- Education
- Employment Income Maximisation

Some work has now started:

- Income maximisation in the council.
- Looking at housing in June with the Housing dept.
- Also started looking at Education,

Work will start working on other areas shortly.

DM is keen to pin down some actions from August – as there is additional resource working with her. DM wants to know where to take this – what partners, and get an idea of how there can be clearer contributions.

One issue that has come up is the need to grow a social care workforce so trying to look at the workforce – to see if they can support young people to get into apprenticeships and support them with housing as a contribution to two of the above priorities

Also recent discussions about community benefit clauses – how to make use of this.

Suggestions of links to make in Third Sector.

In relation to the housing

- Working with the housing associations, linked into the Affordable Housing Network. Homelessness – through SHAPE. Bethany – who have housing. Craig Sanderson from Link Living. The foyer model – might be of interest – Aberdeen.

In relation to employability

- Essential Edinburgh – work with the very far from the labour market. Amount of income is a huge issue – but also how far from the labour market they are already.
- Churn in employability programmes used to be due to teenage pregnancy – but is now mental health and wellbeing. Can we put in the support around that to get people in there.
- The more practical support. Don't just think about projects – but think about universal services – how these can be non stigmatised. Keen to get this right every day in our universal services. Need to look big and small at the same time. More tailored approach with a bigger culture change.

How do we shift the relationship between the Third Sector and Public Sector – so it doesn't seem like a commissioning arrangement.

How can we encourage the different sectors to work together, it feels like there needs to be a closer connection between the public sector activity and third sector.

There is an EP paper due in December reporting back on this

ACTION – for Compact Partners to come back if want to be involved in this. Revisit next agenda. What is the ask? What is the problem. Help people to answer the question.

9. Data Sharing – EVOC

Stef Milenkovic has been working on data sharing through hospital discharge project

Now a memo of understanding is being drawn up with the NHS. We now have some templates for datasharing – that partners are comfortable with.

Useful to ensure that the wider partners are aware of this – Police Scotland, Fire Service, CEC.

Be useful to understand what different databases are around and what purpose that they serve.

Is there too much data around? Can't we just work with what we have. DM mentioned some work going on to identify a series of longer term indicators related to inequalities that could be useful.

Action: Dona Milne to share the inequality indicators that are being developed.

10. Commission for Prevention.

There is a shared understanding that prevention is important and support for EVOC to lead this through a commission/practical project. Gathering info that is already there and do some different analysis on it. Look at spend and analyse it. Are we actually preventing or is it just activity?

EVOC – could get an internship to do some of this work.

Agreed that there should be a steering group to look at this – would like suggestions on who would be interested in chairing this group.

Deadlines – next Spring before producing anything, which will link in with EVOC being 150 years old, maybe a theme around looking back in history to look at where we should go?

NHS can contribute to the steering group.

There are a range of external sources which can help pull focus on this too. Christie Report; collective impact (NESTA, Langkelly, Lloyds TSB); prevention spend calculations (Inspiring Scotland); alternative investment mechanisms (Robertson Trust); improved evidence (What Works Scotland).

Action: For further discussion, next meeting, no lead identified as of yet.