



## Localities

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### Edinburgh Integration Joint Board

**17 July 2015**

#### Executive summary

1. This report recommends the approval of four localities within Edinburgh in order to meet the requirement of the Public Bodies (Scotland) (Joint Working) Act 2014.

#### Recommendations

2. It is recommended that the IJB:
  - i. approves the proposed four localities for the purposes of completing work on the Strategic Plan
  - ii. notes that other community planning partners are committed to a 'best fit' approach to these localities across the city
  - iii. notes that, if approved, the operational management arrangements to be developed under the Chief Officer/Joint Director will adopt a 'best fit' approach to these localities to align planning and service delivery.

#### Background

3. The Public Bodies (Joint Working) (Scotland) Act 2014 requires that the Strategic Plan prepared by the IJB must cover at least two localities, and it is for the IJB to determine these areas.
4. Scottish Government released informal guidance in 2013(1) outlining their expectations with regard to working at a locality level and in particular the levels of engagement with practitioners, service users, carers and the community. While informal, the Joint Improvement Team strongly

recommends taking account of the guidance in any locality development work.

## **Main report**

5. In light of these requirements, work was undertaken in 2014 to examine the impact for health and social care services.
6. There are similar policy drivers affecting the rest of the Council and other community planning partners within the city. As a result of the ensuing dialogue and feasibility work, a proposal was made to the Edinburgh Community Planning Partnership in March 2015 for four locality areas for planning and operational work, on a best-fit basis.
7. This was approved, with an agreed target date of 1 April 2016. This date was intended to be flexible depending on organisational complexity, etc.
8. The Shadow Health and Social Care Partnership was briefed on the proposals at the time, and approved the use of the four localities in the development of the Strategic Plan, subject to formal approval of the Integration Joint Board (IJB) once established.
9. Work has progressed on the Joint Strategic Needs Assessment and Strategic Plan preparation on the basis of the four areas.
10. Partners across the city have engaged very positively with the opportunities that 'best-fit' coterminous boundaries offer for joint working, beyond health and social care.
11. The Council's Transformation Programme is actively engaging with partners to examine opportunities for integrated planning and operational management at the level of four areas. This is progressing well and offers a huge opportunity to rise to the challenges within the Christie Commission report (2).
12. The principles of locality operational management have been agreed between the Council and NHS Lothian in the development of an integrated operational management structure, and it is possible and practical to develop an integrated structure around the four areas, which will also align with the intentions of a range of partners across the city.
13. It is recommended that the IJB adopt the four localities for the purposes of its Strategic Plan and notes that the Council and NHS Lothian have agreed to adopt these localities for the purpose of operational management.

## **Key risks**

14. If the IJB does not adopt at least two localities for the purposes of its Strategic Plan, it will not be compliant with statute.
15. If the IJB wishes to adopt other locality arrangements, these may not align with the direction of travel across other community planning partners in the city.

## **Financial implications**

16. There are no immediate financial implications of this report. However, in the longer term, the guidance is clear that localities should have a measure of appropriate influence over resources linked to the planning of delegated functions. This will take time to develop.
17. The work ongoing by partners, and within the Council on the Transformation Programme will consider resourcing arrangements as part of the transition process.

## **Impact on inequalities, including health inequalities**

18. There are no immediate impacts on inequalities.
19. In the longer term, co-terminosity of planning and operational management across the city will make it easier for a range of public sector managers to work together and with their local communities, across the same 'patch' to support those who experience inequality in a much more holistic way.

## **Involving people**

20. As part of the dialogue during 2014, a range of practitioners were engaged in the feasibility of the four areas. Engagement also took place with the third sector partners and with local communities, through the Neighbourhood Partnership arrangements.

## **Impact on Plans of other Parties**

21. NHS Lothian acute functions work on a North/South split across the city. This can generally be maintained within the new arrangement, however, there may be some slight adjustments in the community health and social care arrangements in terms of managers and staff and GP alignment. This will be worked through in detail, and a 'best-fit' approach adopted to minimise disruption.

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**Appendices**

Appendix 1: Proposed Four Locality Areas.

**Background Papers**

(1) [Scottish Government Guidance on Localities](#)

(2) [Christie Commission Report on Future Delivery of Public Services](#)

## Four Sector Model Aligned to Neighbourhood Partnership Areas

