

SOA Development Plan

Annual progress report 2014-15

Introduction

The Board agreed at its meeting in June 2014, six priorities for improving partnership processes and to support the achievement of outcomes as set out in the Single Outcome Agreement. These priorities were influenced by:

- General advice from the National Community Planning Board;
- Information from an Audit Scotland presentation on their key lines of enquiry for community planning audits;
- Self-assessment carried out by the Board; and
- Actions carried forward from earlier feedback from the SOA quality assurance panel in 2013.

This report sets out for each of the six priorities the progress made in 2014/15, the work currently underway and development areas. Progress with the SOA Development Plan is reported to each meeting of the Board for scrutiny.

In addition, the Board agreed a framework for extending membership within the CPP in December 2014 and since then it has expanded its membership to include Highlife Highland, the Highland Culture Board, the Cairngorm National Park Authority and it has invited Skills Development Scotland to participate in the Board in addition to its involvement in the employability theme group. The Board has considered the redesign of community justice within the partnership governance. New partnership work was agreed to develop the Gaelic language and culture as a regional asset and for partners to support each other in their statutory duties to produce Gaelic Language Plans.

In 2015 content on the Highland CPP structure, membership, delivery plans and minutes and agendas was refreshed on the Council's website making it easier to navigate and download information and to communicate the effectiveness of the CPP's actions.

1. Partnership performance management and reporting

Progress made in 2014/15

During the year delivery plans were refreshed for 6 out of 7 themes within the SOA and for outcomes for children and young people this took into account the revised strategy, For Highland's Children 4. The delivery plan for employability was delayed so that the recommendations from the Wood Commission could be considered.

Progress against seven delivery plans and the SOA development plan is reported to and scrutinised by the Board at each of its quarterly meetings during the year.

The Board undertook self-assessment using the framework provided by the improvement Service in June 2014 with the results considered in October. This highlighted the need to press on with improvements planned, especially relating to joint resourcing, prevention and performance reporting.

The Board considered the findings and implications from Audit Scotland's national audit of community planning in March 2015 'Turning Ambition in Action'. Some of the areas for improvement identified nationally were not seen as problematic for the Highland CPP especially around leadership. Other areas identified nationally had already been identified as areas for improvement in highland e.g. around joint resourcing, prevention and performance reporting. New areas of work arising from the national audit for Highland were agreed as:

- localising the SOA;
- developing new local community planning arrangements;
- conducting locality profiling using partnership data rather than single agency approaches;
- a renewed focus on areas with poorest outcomes.

Work currently underway

Self-assessment is being planned by the end of 2015 for the theme groups dealing with economic growth, health inequalities and physical activity and environment.

The annual report for 2014/15 will be submitted to the Scottish Government by the end of September 2015.

Development areas.

The CPP has been asked to pilot the new local outcomes profile work, led nationally and there is a workshop planned for the Board in December 2015. This will help to inform our performance arrangements for the future, especially in relation to reducing inequalities within Highland.

The CPP Board considered the implications of the Community Empowerment Bill in December 2014 and with the presence of the Minister. A key area flagged for new work is around the new requirement for producing Local Outcome Improvement Plans and how the CPP needs to be accountable for performance against the Plan. During 2015/16 guidance is expected on reporting performance for the new Plans and the Board will agree how best to respond.

2. Maximise the use of collective resources to achieve best outcomes, demonstrating a shift to prevention and the re-allocation of resources between CPP members where this represents best value

Progress made in 2014/15

During 2014/15 partners shared their future budget planning proposals in the Chief Officers Group (COG) and partners shared views on the Council's budget proposals with some taking part in assessing impacts of proposals and the Third Sector Interface gathered third sector views to feed in.

In 2014/15 the CPP established a joint response team in Inverness to deal with antisocial behaviour earlier to prevent escalation of antisocial behaviour and impacts on victims. Core partners are Police Scotland, SFRS and the Council and other partners are involved where required including Housing Associations, street pastors, Inverness BID, APEX, NHS Highland, voluntary groups and the alcohol and drug partnership. This has led to faster responses and reductions in serious incidents.

Work currently underway

The Board agreed that partners would work together in two areas to understand how to work preventatively and join resources further. This is being explored by understanding what public bodies are investing and achieving in the Merkinch area of Inverness (the area with the highest concentrations of multiple deprivation) and in another area focusing on alcohol and drug services. For the Merkinch area a workshop was held with a wide range of service providers. The output was considered by the COG in August and areas for action identified were:

- We need to address the gaps in our preventative approach -- disproportionately high levels of school leavers are leaving the High School without positive destinations;
- If we knew what the total public resource being deployed in the area we could challenge whether there is another way to use it for better effect and this quantification is now to be taken forward;
- We need to be honest about our track record on public engagement with new ideas generated on how to improve the approach;
- HIE is keen to ensure its contribution can be felt with ideas generated.

Further engagement with local service managers in Merkinch is planned and reports will be brought to the Board on what needs to change.

Development areas.

The Community Empowerment Act requires CPP's to reduce socio-economic inequality. Over the next year the mechanisms within the Act will be clearer and we expect this will give the prevention work further impetus.

The Culture Board agreed to focus new partnership activity on encouraging more people to participate in arts and culture activity. Specific proposals are to be developed focusing on areas where outcomes are poorest in both urban and rural communities.

The joint response team approach to reducing antisocial behaviour is to be rolled out to other areas of Highland and in Caithness in 2015/16.

The CPP will ensure a partnership approach to the Prevent Duty relating to partnership action on preventing people from being drawn into terrorism.

3. Engage in dialogue with communities in order to empower them to participate in service planning and delivery

Progress made in 2014/15

During 2014 the Board agreed to support a Community Learning and Development (CLD) Strategic Partnership. It has now produced its strategy and its implementation requires sharing the partnership staffing to deliver it in localities. There is also a focus on supporting CLD in areas that require the greatest support. Quarterly up-dates on the partnership approach to CLD are provided to the Board.

In October 2014 the Board agreed the LEADER programme Development Strategy and Business Plan for the period 2014-20.

In December 2014 the Board considered the implications of the Community Empowerment Bill and agreed that the partners would work together to develop a joint approach to encouraging and dealing with participation requests and in asset transfers.

In March 2015 the Board agreed to a review of local community planning to coincide with a review of the Council's Area Committees. To support that work it agreed principles to use for developing local experiments in community planning. This will affect the operation of District Partnerships.

The Board considered new approaches to participation, considering Participatory Budgeting in March 2015 and Citizens' Juries in June 2015.

The Board agreed to a review and re-launch of the Third Sector Compact and to share lessons on successful community action to ensure further support for third sector activity. The Highland TSI is leading on this work and held seminars throughout Highland on community planning.

Work currently underway

The actions started during 2014/15 all have ongoing action. Key areas for Board consideration are:

- Assurance that we are coordinating local CLD activity better to maximise partnership resourcing for that and in areas of greatest need;
- Agreeing proposals for a CPP approach to asset transfers and participation requests;
- Monitoring progress with the LEADER programme;
- Agreeing where the experiments on local community planning will take place, their purpose, the resourcing of them and the evaluation of them (early ideas were presented in June and proposals are being considered in September 2015)
- Lessons from the participatory budgeting that is proceeding in several areas using Council discretionary budgets initially in 2015 to 2017.
- A review of the Third Sector Compact.

Development areas.

- Further work is planned to understand how citizens Juries could be used in Highland.
- Participating in the Collaborative Leadership approach supported by the Scottish Government in the area of local community planning/ democratic experiments.

4. Collaborate on workforce planning and skills development to meet Highland needs, in the context of the Highlands and Islands Skills Investment Plan and our role as major employers

Progress made in 2014/15

This workstream has been included in the remit of the employability group which reports progress to the Board quarterly.

Following a presentation from SDS to the Board they were invited to participate in the COG and the Board.

Work currently underway

In 2015 the COG agreed to introduce breakthrough achievements that all partners will contribute to and for new breakthroughs to be identified in every second meeting (3 times a year). Two breakthroughs have been made to date and both relate to workforce planning. They are:

- All partners agreeing to offer employment to a Highland care leaver;
- All partners agreeing to support the Scottish Fire and Rescue Service to recruit retained fire fighters from each organisation's staff pool.

Development areas.

Work is underway on a City deal for the Highlands with a focus on infrastructure to support economic development and employment growth especially for retaining and attracting more young people for the region.

5. Tackle deprivation and inequalities including by improving access and connectedness for communities

Progress made in 2014/15

During 2014/15 work was done to develop a CPP approach to rural fragility. This included understanding the separate approaches in use in HIE and in the Council and identifying whether this could be expanded to cover the wider interest among partners, notably regarding health outcomes. The health inequalities group led on this work and proposed the adoption of the SEP index (socio-economic performance index) for rural areas which was used to support the distribution of LEADER funds nationally. This was accepted by the Board in June 2015 and it identifies 16 rural communities and further rural towns with the poorest outcomes.

In November 2014 the COG agreed to collaborate with the DWP, through the employability theme group to reduce long term unemployment in Highland.

In February 2015 the COG agreed to establish a Champions Board that would include COG members to champion the needs of care experienced young people.

Work currently underway

The COG is to raise awareness of the SEP index within their own organisations and to identify how to use the index in partnership. Further proposals will be brought to the Board.

Development areas.

One of the new duties for the CPP from the Community Empowerment Act is to produce locality plans in areas where outcomes are the poorest. The SEP index provides a rationale for where the locality plans should be developed first for rural Highland, complementing the SIMD for areas where concentrated disadvantage are found (urban areas). Further guidance is expected on locality plans, including when the first plans are to be developed.

6. Value and be positive about Highland life to attract people, jobs and investment.

Progress made in 2014/15

It was agreed that this outcome would cut across all partnership business including partnership events and in partnership communications.

During 2014/15 the CPP agreed the Highland Commonwealth Games Legacy Plan.

During 2014/15 reports on the EU regional programmes (LEADER and ESF programmes) were provided with actions agreed.

During 2015 the COG received a presentation on the Inverness West Link.

Work currently underway

Development areas.

Major infrastructure developments the CPP will have a role in are:

- The City/Region deal
- Agreeing the Highland Development Plan

**Single Outcome Agreement
Between the Highland Community Planning Partnership and the Scottish Government
2013/14 – 2018/19**

**Performance Report
Year 2: FY 2014-15**

Economic Regeneration and Recovery Plan

Introduction

Following the work of Glasgow University's Training and Research Unit (TERU) for HIE on CPP reporting, this report follows the same reporting format as Year 1.

SUMMARY of 2014/15

The High Level (HL) Indicators are summarised below:-

	Progress in Year 2 of Plan	Aggregate results to date (2 years)	Full 5-year Target (in aggregate)
Indicator	2014/15		2018/19
HL1: Number of jobs created or sustained through public sector interventions	708	2,501 (50% of 5yr target)	5,000 (in total)
HL2: Number of Business Gateway volume start up clients who have begun trading	253	503 (40% of 5yr target)	1,250 (in total)
HL3: Number of existing businesses accessing advisory services through Business Gateway	518	1,016 (34% of 5yr target)	3,000 (in total)
HL4: Number of VAT/PAYE registered enterprises per 10,000 populations	March 2015 figures due for release Autumn 2015	n/a	Top 4 local authority
HL5: % of working age population (16-64) in employment	77.2	n/a	Top 3 local authority

NB, the figures are an aggregate of activities of HIE, THC and Business Gateway.

HL1 splits out as 544 jobs (FTE) created or retained by HIE and 164 FTE by Highland Council/Highland Opportunities. This is down on the previous year (Year 1) which saw 1,739 FTE created. This was in part due to some very large projects won that year, and related to this a change in State Aids (in June'14) that resulted in projects being pulled-forward in time, ahead of the changes. It is likely that circa 700 FTE per annum is closer to the normal. On that basis, the 5 Yr target remains relevant.

HIE's focus is on those businesses of growth potential, and to give a flavour some notable projects supported in the FY 14-15 were:-

- Maygen's world-leading marine energy project in the Pentland firth and onshore at Caithness; they have completed their onshore directional drilling, and are about to commence the building of equipment to take the power off the proposed tidal array for the Grid.
- The management buyout of the battery factory by Denchi Power Ltd and the inward investment of the battery cell production by AGM Batteries in Caithness is bearing fruit with employment increasing in both companies and first year results being better than expected.
- The development of a new distillery at Torabhaig on Skye, creating employment, and supporting the wider Tourism and Food & Drink sectors in the area.
- The re-equipping of ski-ing centres at Glencoe and Nevis Range, and Natural Retreats taking on the lease to operate Cairngorm Mountain; the combination of these three businesses developing infrastructure should deliver a massive boost to the mountain-tourism product within Highland.

- NSL Ltd's development of new facilities in Dingwall, which should see a significant net gain in employment in the FBS sector in the area.
- Inside Biometrics Ltd's positive progress in the research and development of new digital technology and devices aimed at fitness and well being.

HL2 and HL3 The figures are broadly similar across years 1 and 2. Across the CPP in Highland we have seen continued alignment of activities and priorities, notably around the pursuit and allocation of resource within Business Gateway to identify and support growth business. These, in turn and in part, will become the feedstock for HIE's Business Growth programme.

It is recognised that the new EU programme for Highland offers further opportunities for resources, and HIE and THC/Business Gateway have mutually developed and supporting applications for business support submitted.

HL4 figures are not published yet.

HL5 shows a slightly improved and welcome position comparing Year 2 with Year 1.

It is also noted that there are particularly strong linkages with the Employability strand of the CPP, and the planning and activities of "Highland Works".

The work of alignment across relevant strands will continue in 2015/16.

In conclusion, at the end of Year 2 of a 5 year programme broadly the high level indicators are on track towards the 5-year target. From discussions, there are no indications that the 5 year targets need to be revised, but the wider context remains under review.

As per the Scottish Government's Economic Strategy, the focus for 15/16 is around:-

- Internationalisation; both seeking to attract Foreign Direct Investment into Highland area, and encouraging and supporting businesses within Highland to pursue international trade;
- Innovation; seeking to support and encourage Highland businesses to undertake and commercialise research and development;
- Investment; both directly supporting businesses of growth potential with finance, and encouraging and supporting Highland businesses to be pursuing and attractive for external finance to support continued growth; and
- Inclusive Growth; seeking to ensure that every part of Highland can benefit from economic growth.

For completeness, the appendices below set out the detail of sub-headings within the Highland CPP SOA Economic Growth and Recovery strand. The Appendices are: (1) Enabling Infrastructure; (2) Support for Business; and (3) Creating Successful Places. The fuller table on the High Level Indicators is also set out – the main difference is on benchmark data.

Appendix 1 – Enabling Infrastructure

Short Term Outcome	Indicator	Baseline data						Progress in Year 1 of Plan		Target
		2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2018/19
1. Roll out of next generation broadband across the area	E11: % of addresses which are within the coverage area of superfast broadband networks				0.00%	3.30%	3.60%	Not yet available	Awaiting data	90%
	E12: % of homes with broadband currently not achieving 2Mbit/s speeds				17.20%	16.00%	14.60%	Not yet available	Awaiting data	<5%
2. Ensure that the region has access to 3G, 4G and mobile telephony services fit for the 21st century	E13: % of area with no 2G signal						37.7		Awaiting data	<25%
2. Ensure that the region has access to 3G, 4G and mobile telephony services fit for the 21st century	E14: % of area with no 3G signal						69.9		Awaiting data	<50%
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	E15: % roads rated 'red'									
	• A roads						3	-	-	Below Scottish average
	• B roads						8	-	-	Below Scottish average

	<ul style="list-style-type: none"> C roads 						12	-	-	Below Scottish average
	<ul style="list-style-type: none"> Unclassified 						10	-	-	Below Scottish average
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	E16: % roads rated 'amber'									
	<ul style="list-style-type: none"> A roads 						22	-	-	Below Scottish average
	<ul style="list-style-type: none"> B roads 						28	-	-	Below Scottish average
	<ul style="list-style-type: none"> C roads 						30	-	-	Below Scottish average
	<ul style="list-style-type: none"> Unclassified 						28	-	-	Below Scottish average
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	E17: Number of year-round scheduled cross-border/international routes	10	8	7	7	8	8	7	8	10
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	E18: Weekly frequency of scheduled air services to London	33	33	33	33	33	33	21	22	33
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	E19: Weekly frequency of scheduled air services to Manchester	13	13	13	13	13	13	13	20	15
3. Ensure that the region has appropriate connectivity through road, sea, rail and air	E10: Weekly frequency of scheduled air services to Amsterdam	0	0	0	0	7	7	7	7	14

links										
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	EI11: Business Connectivity Index	-	526	522	522	585	585	465	577	662
3. Ensure that the region has appropriate connectivity through road, sea, rail and air links	EI12: Hub Connectivity Index	-	92	92	92	162	162	138	189	236
	EI13: % of adopted Local Development Plans up to date (less than 5 years old)						100%	100%	100%	100%
5. Ensure that the electricity grid infrastructure is fit for purpose to support ambitions for renewable power	EI14: Number of electricity grid upgrade projects completed								3	8 projects to be completed by 2018/19
6. Ensure that the regions ports can play an appropriate role in the Energy sector	EI15: Number of port upgrade projects completed								2	5 projects to be completed by 2018/19
7. Ensure that there is sufficient housing stock to support the region's growth ambitions	EI16: Number of new homes completed (cumulative)						833	1725	2599	5,000 new homes by 2017
	<ul style="list-style-type: none"> Social housing (Council houses and other non-council) social housing) (cumulative) 						127	261	434	688 new homes by 2017
	<ul style="list-style-type: none"> Private sector housing 	1,470	1,065	831	673	749	577	662	Not yet available	

Appendix 2 – Support for Business

	Indicator	Baseline data						Progress in Year 1 of Plan		Target
		2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2018/19
1. Attraction of new inward investment into the region	SB1: Number of inward investment projects (new)						4	11	8	20 (cumulative)
1. Attraction of new inward investment into the region	SB2: Value (£) of inward investments (new)						N/A	N/A	£15.3 million - Net GIA	No target – but track
1. Attraction of new inward investment into the region	SB3: Number of jobs supported FTEs in inward investors (both new and existing)						226 new jobs	158 new jobs	439 new jobs	750 (cumulative)
2. Implementation of sector route maps for key sectors	SB4: Number of jobs supported FTEs in HIE supported businesses by GES growth sector									No target – but track
	• Creative Industries					0	5	16	1	
	• Energy					160	50	1,401	25	
□	– Renewables					11	1	15	1	
□	– Non-renewables					149	49	1386	24	
	• Financial and Business Services					500	5	5	238	
	• Food and Drink					243	60	66	63.5	
	• Life Sciences					7		48	27	
	• Sustainable Tourism					10	40	28	61.5	
	• Universities					0	0	0	0	

2. Implementation of sector route maps for key sectors	SB5: Value of tourism sector							First data will be for 2014	Awaiting data	Increase value by 4% per annum and to exceed Scottish growth rate
2. Implementation of sector route maps for key sectors	SB6: Installed capacity of renewable energy		819	930	1,297	1,330	1,471	5,080	4,756	1,471
2. Implementation of sector route maps for key sectors	SB7: Wave and tidal projects implemented		0	0	0	0	0	0	0	3 projects to be fully implemented by 2017
3. Ensure suitable support to area's social enterprises	SB8: Number of social enterprises supported by HIE					47	35	50	50	55
3. Ensure suitable support to area's social enterprises	SB9: Number of jobs supported FTEs in supported social enterprises					29	14	24	25	100 (cumulative)
4. Ensure that strategy and action plan to support business start up in the area is current and fit for purpose	SB10: Number of Business Gateway volume start up clients who have begun trading			167	243	244	215	250	272	1,250 (cumulative)
5. Enhance access to finance for Highland businesses	SB11: Total value (£) of financial support provided by HIE to businesses					£6.8 million	£4.9 million	£17.4 million	£27.3 million	No target – but track
5. Enhance access to finance for Highland businesses	SB12: Number of Highland Opportunities loans issued						18	25	17	100
5. Enhance access to finance for Highland businesses	SB13: Value of Highland Opportunities loans issued						£326,400	£524,000	£511,785	No target – but track
5. Enhance access to finance for Highland businesses	SB14: % of Highland Council procurement spend with Highland	53.2%	46.7%	42.7%	46.9%	40.6%	42.9%	47%	46%	Increase spend from 2012/13

	businesses									baseline by 5% by 2017
5. Enhance access to finance for Highland businesses	SB15: % of Highland Council procurement spend with Highland SMEs	42.8%	39.9%	36.0%	36.8%	35.2%	32.6%	34%	34%	Increase spend from 2012/13 baseline by 5% by 2017
6a. Create and support initiatives to strengthen status and profile of Gaelic within economic development	SB16: Up-to-date (less than 5 years old) Gaelic Language Plan in place (including 'economic development' theme)						Yes	Yes	Yes	Strategy to be in place
6b. Develop strategies for Gaelic related employment										

Appendix 3 – Creating Successful Places

	Indicator	Baseline data						Progress in Year 1 of Plan		Target
		2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2018/19
1. Inverness and the wider region realise the benefits of the 'Seven Cities' strategy	CSP1: Number of projects completed									6 projects to be on site and/or completed
1. Inverness and the wider region realise the benefits of the 'Seven Cities' strategy	CSP2: Working age population (16-64)					44,828	44,676	44,598	44,592	Growth of 5%
2. Existence of the right environment for Highlands towns, industrial and rural areas to prosper	CSP3: Working age population (16-64)									
	• Dingwall					4,385	4,337	4,312	4,261	Growth of 3%
	• Fort William					7,237	7,160	7,136	7,044	Growth of 3%
	• Invergordon/AInness					7,442	7,360	7,268	7,145	Growth of 3%
	• Inverness					44,828	44,676	44,598	44,592	Growth of 5%
	• Nairn					7,928	7,894	7,813	7,793	Growth of 5%
	• Portree					1,905	1,941	1,927	1,939	Growth of 5%
	• Thurso					5,226	5,111	5,033	4,964	Growth of 3%

	<ul style="list-style-type: none"> Wick 					5,300	5,273	5,208	5,101	Growth of 3%
2. Existence of the right environment for Highlands towns, industrial and rural areas to prosper	CSP4: % of working age population claiming Jobseekers Allowance									Return to pre-recession rates (i.e. 2007/08)
	<ul style="list-style-type: none"> Dingwall 	1.6	1.6	3.2	3.5	3.4	3.3	2.6	1.5	1.6
	<ul style="list-style-type: none"> Fort William 	1.7	1.7	2.7	2.8	3.3	3.4	2.9	1.7	1.7
	<ul style="list-style-type: none"> Invergordon/AInness 	3	3.2	4.8	5.2	4.8	4.7	4	2.9	3
	<ul style="list-style-type: none"> Inverness 	1.5	1.6	3	3	3.1	3.1	2.6	1.3	1.5
	<ul style="list-style-type: none"> Nairn 	1.4	1.7	2.8	2.9	2.9	2.7	2.2	1.1	1.4
	<ul style="list-style-type: none"> Portree 	2.3	2.7	3.6	3.4	4	4.5	4.3	2.0	2.3
	<ul style="list-style-type: none"> Thurso 	2.4	2.3	3.2	3.9	4.3	3.8	3.4	2.8	2.4
	<ul style="list-style-type: none"> Wick 	3.6	3.4	4.8	5.3	5.7	5.3	5.2	3.4	3.6
3. Support large-scale employment growth opportunities	No indicator available									
4. Communities can participate in and benefit from the development of renewable energy across the Highlands	CSP5: Number of developments in Highland that pay community benefits from renewables							23	Awaiting data	30
4. Communities can participate in and benefit from the development of renewable energy across the Highlands	CSP6: Number of communities receiving community benefits from renewables							34	Awaiting data	40

5. Targeting regeneration and fragile areas	CSP7: Total population in the 34 data zones defined as 'fragile' by HIE					24,564	24,444	24,462	24,409	(a) Overall population stable and (b) Increase in population in at least 20 data zones, stable in at least 10
5. Targeting regeneration and fragile areas	CSP8: Number of data zones in worst 15% nationally (SIMD)				16 (SIMD 2009 Update)	-	17 (SIMD 2012)	-	-	12
6. Ensure Caithness and North Sutherland reap maximum social and community benefits from decommissioning	CSP9: Number of new jobs created in Caithness and North Sutherland		50.5	142	281.5	153.5	133.5	140.25	176.5	500 (100 per annum)
7. An attractive region for young people	CSP10: Population aged 16-24					22,253	22,217	22,050	22,003	Growth of 5%
7. An attractive region for young people	CSP11: % of school leavers moving into a positive destination			86.7% (19)	89.4% (=13)	90.7% (13)	93.1% (11)	92.7 (16)	Not available yet	Top 8 local authority
7. An attractive region for young people	CSP12: % of young people (aged 16-24) claiming JSA	2.1	2.7	3.7	3.8	3.8	3.5	2.4	2.0	Return to pre-recession rates (i.e. 2007/08)

Appendix 4 – High Level Indicators

Indicator	Baseline data						Progress in Year 1 of Plan		Target
	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2018/19
HL1: Number of jobs created or sustained through public sector interventions					1,010	387	1,793.30	708 - 544 (from HIE) and 164 (from HC/HOL)	5,000
HL2: Number of Business Gateway volume start up clients who have begun trading						215	250	253	1,250
HL3: Number of existing businesses accessing advisory services through Business Gateway						548	498	518	3,000
HL4: Number of VAT/PAYE registered enterprises per 10,000 populations			467.1	459.6	471.9	471.1	481.5	March 2015 figures due for release Autumn 2015	Top 4 local authority
HL5: % of working age population (16-64) in employment	80.8	79.2	80.9	77.8	79.9	75.4	74.2	77.2	Top 3 local authority

SOA3 ANNUAL PERFORMANCE REPORT – EMPLOYABILITY 2014/15

1. Background

- 1.1 When originally prepared in 2013 the Single Outcome Agreement (SOA) recognised that Highland had historic high levels of economically active people and low levels of unemployment. Prior to the economic crisis in 2008 when the labour market was tighter, employers often turned to skilled and experienced migrant workers rather than to those workers who were unskilled and unemployed. Accordingly the challenge faced then was how to support those furthest removed to progress towards and into employment.
- 1.2 With the onset of the financial crisis, unemployment rose and the challenge changed from one which was focused on supporting those furthest removed from the labour market, to supporting all to secure work. In particular, the high numbers of young people unemployed was a key and high priority. Much of the activity undertaken by partners to date and included in this report relates to this work.
- 1.3 The improving economic climate and improved availability of jobs has therefore again changed the focus and the challenge has returned to supporting those who are furthest removed from the labour market. Allied to this has been a recognition and effort towards a better alignment between skills and employability activity to the current and growing needs of business. Work to this end is underway and while the SOA long-term objectives remain relevant (see below), the SOA requires a refresh to correctly reflect the challenge faced.
- 1.4 The SOA long-term outcomes are:
- to widen participation in the labour market across all client groups and across all Highland geographies; and
 - to enable the regions' young people to have the opportunity to flourish and to contribute to the sustainable economic growth of the Highland economy.

2. Progress

- 2.1 Appendix 1 details the SOA key performance indicators including baseline and trend data where available.
- 2.2 Progress has been made towards the long-term SOA outcomes. The data available to evidence this is however limited or incomplete. Key findings are:
- labour market participation has been increasing but statistical issues mean it is unclear to what degree this improvement has been. Over the period April 2013 to July 2015, unemployment has fallen from 3,703 to 2,144;
 - local area labour participation information, and in particular very localised deprived area information, is either very difficult to interpret with confidence or is no longer available. A mixed rather than a consistently improving picture across Highland is our understanding;

and

- new and robust indicators need to be developed/adopted by partners before it will be possible to report on whether efforts to increase equality of access to the labour market to all client groups, including disabled people has been successful or not. Good progress has been made in increasing young people's employment, accompanied by high levels of positive destinations for school leavers.

2.3 As reported to the Community Planning Board in June 2015 highlighted that during 2014/15 work progressed on three key areas:

- maximising and aligning activity generated by the new EU Structural Fund Programme 2014-2020;
- delivering on Scotland's Youth Employment Strategy; and
- Highlands and Islands (H&I) Skills Investment Plan and in particular, the Highland Action Plan.

2.4 The first stage approval for ESF Employability funding was received on 28 August 2015 and efforts will now progress as soon as possible once the necessary guidance and paperwork is available, to submit the next stage operational applications. The activity to be funded is:

- Positive Pathways: working with identified young people in the final stages of compulsory education and aims to provide continuity post school to ensure engagement in continued learning and progression towards employment or training opportunities post school;
- Work It out Programme: working with adults who have left full-time education who have little work experience, have barriers to employment and who need assistance to return to learning (short courses or learning activities) and the labour market;
- Recruitment Incentive: supporting micro SME's to recruit and provide employment for people who are unemployed and experience additional barriers to employment;
- Work Experience Programme: provision of a range of paid work based learning opportunities; and
- A Challenge Fund approach to enable third sector partners to access the ESF resources will also be progressed.

2.5 Appendix 2 provides the strategic framework; structure and workstreams around which the Highland partner organisations (HC, HIE, SDS, UHI Inverness College/North Highland College/West Highland College/Sabhal Mòr Ostaig, together with the Chambers of Commerce, SCDI and FSB) have developed to progress the Highlands and Islands Skills Investment Plan and to Developing the Young Workforce. Work continues by partners to develop the associated workstream Action Plans which sit behind the strategy and the indicators that will be used to measure progress.

2.6 It is anticipated that across all the action plans, a large number of indicators will be utilised to aid the monitoring and evaluation of delivery. It is not proposed however to capture all when reporting on the strategy but to identify a small number of indicators that usefully report that:

- the skills needs of businesses are being met;
- businesses are able to access the industry relevant training for their staff;
- the people of Highland are securing the skills they need to access the labour market, and that they are able to use these skills to secure work with Highland businesses; and
- that this is been achieved in an equitable manner.

2.7 Once this work is complete, anticipated autumn 2015, this will enable the SOA to be refreshed.

Date: 28 August 2015

Author: Andy McCann, Economy and Regeneration Manager, Highland Council

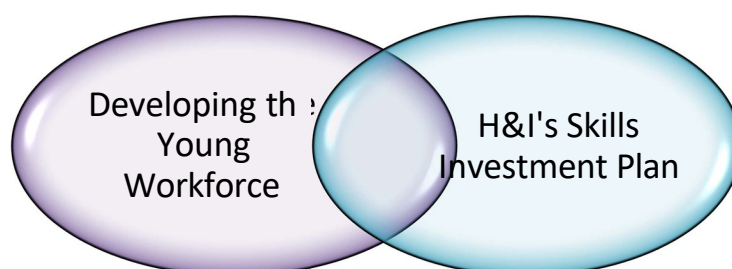
**Appendix 1:
Single Outcome Agreement Annual Report 2014/15
Employment Delivery Plan**

Appendix 2: Workforce Planning

A Highland response to Developing the Young Workforce and the Highlands and Islands Skills Investment Plan

In Highland, partner organisations (HC, HIE, SDS, UHI Inverness College/North Highland College/West Highland College/Sabhal Mòr Ostaig, together with the Chambers of Commerce, SCDI and FSB) have developed a collaborative response to the Skills Investment Plan and to Developing the Young Workforce.

Seeking to capitalise on best practice within Highland and further afield and the unique strength the region has in its ability to offer its students an integrated tertiary educational pipeline, the partners have organised themselves at a strategic Highland level and locally across its College geographies to progress this work.



Joint Vision:

- *Highland businesses have the skills set they need to meet their current needs (3 years) and there is a better understanding/intelligence of their future skills needs and this is shared (young people/parents/training providers etc.)*
- *Everyone (all age) are inspired/informed and getting the services/support they need to gain workplace skills and qualifications, so they have choices in their job/career path*
- *By tackling inequalities the Highland economy will grow and prosper*

Our approach:

- *A three year focus on the young workforce with demonstrable change achieved (whilst recognising the similar need and complementary impact this will have on adult services)*

Guiding principles to inform our work:

- *Celebrate good practice within and outwith Highland and replicate*
- *Listen – what do our young people/parents/business say – and share this across our organisations*
- *Make best use of partner resources – pooled/aligned*
- *Honest evaluation of our (joint) systems to ensure they are fit for purpose*
- *Co-ordinated communications across partners – world of work/education and skills*
- *Embrace new technology to drive new methods of learning*

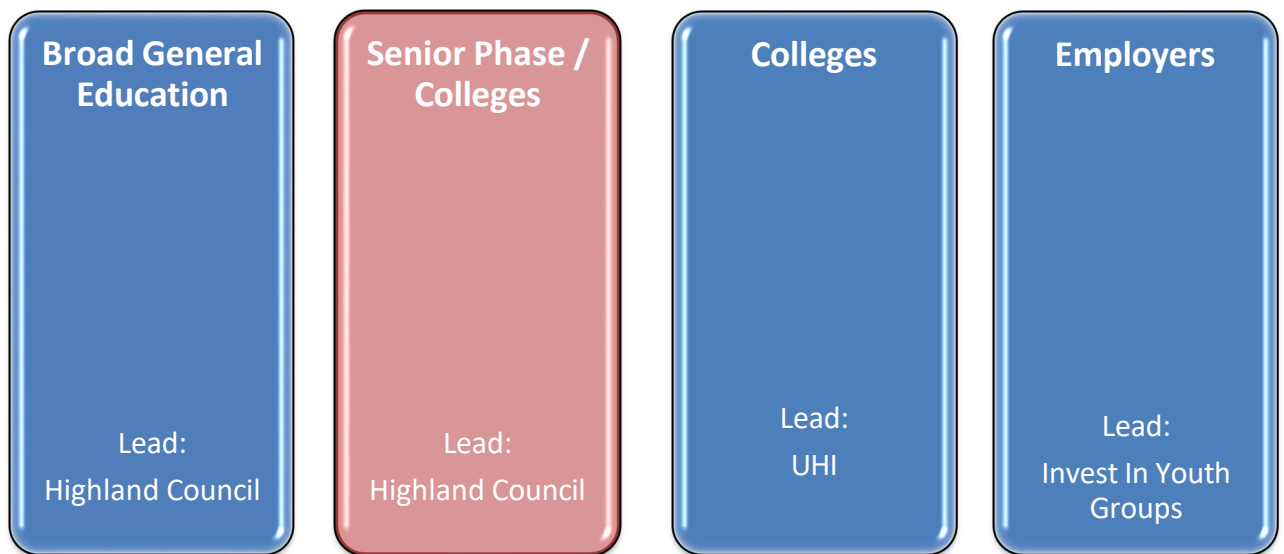
Strategic Programme Board



Strategic cross cutting themes



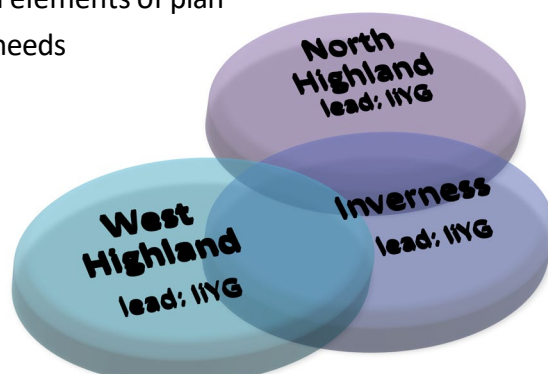
Strategic change themes/workstreams



Local Delivery

Schools, employers and colleges organised around the College areas

- Responsible for coherent delivery of all elements of plan
- Responsive to local opportunities and needs



Appendix 1:
Single Outcome Agreement Annual Report 2014/15
Employment Delivery Plan

Outcome	Indicator	Improvement/ Target	Baseline	Trend
To enable those who are currently removed from labour market, to move towards and into sustained employment	Employment rate (No. of people in employment aged 16-64 years as a percentage of the population aged 16-64 at the Highland level)	Increase	2012/13 75.4%	2013/14 74.0% 2014/15 78.6% Confidence levels are typically + / - 3% so the variation is not statistically significant
Improve equality of access to the labour market for all client groups, including disabled people	Employment rate (at Travel to Work Area)	Increase	See table below	The latest figures available for TTWAs are for the 12 months ending September 2014. Confidence levels for the TTWA figures are wide and the trends are not statistically significant despite some apparently big year on year changes
	Number and percentage of working age population unemployed and living in Highland in the 15% most deprived data zones in Scotland	Reduce	2012/13 740 (8.5%)	Average claimant count during the year Figures are not available for 2013/14 onwards because of the introduction of UC: the UC count is not available for data zones
	Number and percentage of people supported into employment in Highland in the 15% most deprived data zones in Scotland	Increase	Data not available	
	Increased number of people who are furthest from the labour market taking up opportunities in CPP organisations through employment initiatives	Increase	Data not available	
	Disabled employment rate (Percentage of disabled	Increase		2014/15 (first data available) these figures are for male & female combined, a gender breakdown is

Outcome	Indicator	Improvement/ Target	Baseline	Trend
	population aged 16-64, divided by percentage of employed non-disabled population aged 16-64 (3 year rolling average (total/male/female)			also available Employment rate aged 16-64 - EA core or work-limiting disabled -58.6% Employment rate aged 16-64 - EA core disabled – 57.7% Employment rate aged 16-64 - work-limiting disabled – 55.5% Employment rate aged 16-64 - not EA core or work-limiting disabled -82.8%
	Percentage of ESOL learners attending classes to achieve accreditation achievement of specified goals (including completion of courses) or progress to positive destinations	75%		During 2014/15 we remained above target with 87.2% of learners who do not have English as a first language (ESOL) and who attended classes achieving accreditation, specified goals or progress to positive destinations (e.g. employment or further education) (88.5% in 2013/14).
	Percentage of Adult Literacies Learners move to positive destinations	10%	10% (2010/11)	During 2014/15 there were 12% of adult literacy learners who moved to positive destinations. The aim is maintain at least 10% achieving positive destinations.
Ensure that our young people and looked after children progress to further/higher education, training or employment Aim to ensure that every 16-19 year old seeking employment has the opportunity to access a modern apprenticeship or further education	Increase the number of young people leaving school moving into education, training or employment	Increase 3% per annum	91.8% (March 2013)	92.5% (March 2014) 93.9% (March 2015)
	Reduction in the number of young people who are unemployed and seeking work (Youth Claimant Count –	Annual reduction	2012/13 959 (5.7%)	Average claimant count during the year (includes UC from December 2013 onwards) 2013/14 679 4.1% 2014/15 602 3.6%

Outcome	Indicator	Improvement/ Target	Baseline	Trend
	number/%)			
Partners address significant inequalities in Highland through a coherent and individualised approach to post school transition for young people experiencing significant barriers to employment	Look after children leaving school moving into education, training or employment	Increase		Our target is to increase the percentage of young people leaving school moving into education, training or employment by 3% by 2017. We achieved 92.7% in 2013/14 compared to 93.1% the previous academic year. Figures for 2014/15 (as normal) will be available in January 2016.
	<p>Increase attainment levels for children and young people from deprived areas, and increase the number from this group moving into education, training or employment.</p> <p>% pupils from deprived areas gaining 5+ awards at level 5 (SIMD) (LGBF CHN6)</p> <p>% pupils from deprived areas gaining 5+ awards at level 6 (SIMD) (LGBF CHN7)</p> <p>Average tariff scores within SCQF (average total points awarded for all exam results) for S4/5/6 lowest performing 20%</p>	Increase	<p>19.5% (2012/13) (all children 42%)</p> <p>9.5% (2012/13) (all children 26%)</p> <p>151 (2011/12)</p>	<p>The Local Government Benchmarking Framework (LGBF) provided data for two indicators which monitor and make national comparisons on attainment levels for pupils from deprived areas. 2014/15 data will not be available until November 2015.</p> <p>Data for secondary schools average tariff scores for 2014/15 will not be available until mid-September 2015 when it is published at a national level. Data for 2013/14 is available</p> <ul style="list-style-type: none"> • S4/5/6 lowest 20% at 175 (national comparator 163), baseline 151 in 2011/12.
	Reduce the attainment gap between pupils with ASN	Reduce		The proportion of children with Additional Support Needs (ASN) who are able to sustain full

SOA – Early Years - Annual Performance Report 2014/15

Highland Council and NHS Highland have agreed a performance framework for children's services as outlined in *For Highlands Children 4*.

The SOA Early Years framework is consistent with this framework with key outcomes and measures extracted.

The full summary of the Early Years annual review is included at **Appendix 1**. There has been progress in determining baselines and targets, although some data will not be available until later on in the year. In addition, discussions continue to take place with NHS Highland to seek earlier access to child health surveillance information.

Other data for new outcome indicators will only be collected on an annual or other basis, and as a consequence is not yet available.

Commentary is provided below on the following measures where performance is either not on target, or otherwise of note.

Performance Measures

The percentage of schools awarded an evaluation of good or better for self-evaluation in HMI inspections has increased from 20% in 2013 /14 to 47% in 2014/15, and the percentage of schools awarded an evaluation of good or better for curriculum in HMI inspections has increased from 20% in 2013 /14 to 58% in 2014/15.

The number of schools that offer 2 hours (or two 50 minute periods of high quality PE) has increased from 82% in 2013 /14 to 98% in 2014 /15.

An analysis of HMI reports in recent years shows that the percentage of parent and carer responses to the question, "my child is treated fairly at school" has increased from 87% in 2013 /14 to 91% in 2014/15.

The percentage of children who report they have a say in making the way they learn in school better increased from 47% in 2013 /14 to 62% in 2014/15. Also, the percentage of parents & carers who respond positively to question "the school takes my views into account" has increased from 57% in 2013 /14 to 65% in 2014/15.

With regard to the performance target which considers Allied Health Professionals and the 18 week Referral to Treatment Time, work continues with NHS Highland to enable regular reports from the systems used to record Allied Health Professionals work. Plans are in place for physiotherapy and occupational therapy to "test" the validity of the data from system reports and identify any further actions prior to setting up regular reporting. Indicative waiting times at the end of June 2015 are;

Occupational Therapy: 35 weeks

Physiotherapy: 14 weeks

Speech and Language Therapy: 38 weeks (children) and 5 weeks (adults)

Dietetics: 14 weeks

Currently the target for 95% of Highland is for children to receive a 27-30 month review by March 2016. This review is part of the national preschool Child Surveillance Screening Programme (CHSP). The target has not yet been achieved and in order to better understand why this, an audit of health visitor records is being undertaken of the cohort of 411 children born in August and September 2012

The audit is currently underway, and is expected to be completed by the end of August. Records have been reviewed in 5 of the 9 Family Teams, which represents 61% of the audit cohort.

With regard to the measure to increase exclusive Breast-feeding Rates at 6-8 weeks. The Scottish Government breast feeding target for 2006/07 was 25%. Highland successfully reached and surpassed that target. Subsequently a decision was made in Highland to have a stretch aim of increasing breastfeeding rates from 26.6% to 33.3% by 2010/11 and subsequently to 36%. The target for 2010/11 was not met and breastfeeding rates have remained static around 31% since then. In the context of the rest of Scotland, it should be noted that some areas in Scotland have targets for breastfeeding as low as 19%. Highland is significantly above the Scottish average and has made good progress.

With regard to Health Assessment for Looked After Children to be completed within 4 weeks of them becoming Looked After and in the Childs Plan by 6 weeks, the Highland model for health assessments and interventions for all LAC (living at home or away) is implemented within universal services and supported by a designated lead for LAC. This approach is unique within Scotland and responds to the poorer health outcomes within the LAC at home population and the recommendations within CEL16 (2009). The LAC improvement group are looking at options to improve the service, whilst recognising that there are real challenges with Health Visitor and School Nursing capacity.

The exclusion rate for Looked After Children has increased from 98 in 2013 /14 to 146 in 2014/15. Although this is within the range of the target set from a baseline of 155 in 2011 /12, the factors behinds the increase are the subject of review by the Looked After Children improvement group.

I considering the reduction in the number of LAC accommodated outwith Highland the following have been identified as actions which would help reduce the number of children entering residential child care:

- Ensure appropriate education provision to meet needs in mainstream and on/off-site provisions and additional interventions;
- Develop intensive support for families to keep children at home;
- Set up a working group to implement dedicated mental health support for children at risk of residential childcare;
- Improve embedding of Practice Model by focusing on the Childs Plan and improve joint working – earlier and more focused intervention;
- Improve the assessment and management of risk.

All actions will be contained within the Looked After Children Improvement Plan.

With regard to the performance measure to increase the number of children where permanence is achieved through a residence order. In Highland in 2014, 17 children who were previously looked after with kinship carers ceased to be looked after, as their carers had obtained a Section 11 (residence order) for them. There were also 13 children who were placed with kinship carers who returned home. The Kinship care procedures have recently been revised, to ensure continuing good practice.

The delay in the time taken between a child being accommodated and permanency decision has slipped from 9 months to 15 months. This has further increased to 23.3% in June 2015. Albeit these are very small numbers, and there are always critical issues relating to individual children, action has been taken to increase management oversight leading to further actions. We are engaging with a research study led by the Universities of York and Stirling, which will enhance learning from other authorities, and are also adapting an improvement approach which is being promoted by the Scottish Government through the Early Years Collaborative.

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
Safe										
1. Children are protected from abuse, neglect or harm at home, at school and in the community										
1	% children on child protection register previously registered Highland	5.89%	2.80%	5.31%	3.67%	3.66 %	3.43 %	3.43 %	5.89%	Child Protection
2. Children are well equipped with the knowledge and skills they need to keep themselves safe										
2	Reduce the number of RTAs resulting in avoidable injuries to children and young people								Awaiting Data from NHS Highland	Road Safety Unit
3. Young people & families live in safer communities where antisocial & harmful behaviour reducing										
3	The percentage of school staff who have up to date child protection training increases				72%				72%	Schools
Healthy										
4. Children and young people experience healthy growth and development										
4	% of children reaching their developmental milestones at their 27 – 30 month review will increase								EYC Stretch aim – 85% of all children reach all of their developmental milestones at time of review by December 2016 (National aim)	Early Years

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
5	% of children achieving their key developmental milestones by time they enter school will increase								EYC Stretch aim – 85% of all children reach all of their developmental milestones at time of review by December 2016 (National aim)	Additional support Needs
6	Reduce % gap between the most and least affluent parts of Highland for low birth weight babies								NHS data not available	Early Years
7	Improve the uptake of 27-30 month surveillance contact from the baseline of 52% to 95% by March 2016			82,5%Q4	73.0% Q1 66.1% Q2 71.4% Q3				As reported above	Early Years
8	95% uptake of 6-8 week Child Health Surveillance contact			85.7% Q4	81.5% Q3				Health Surveillance contact has two elements (HV & GP) – measure used is number of forms returned by GP. Manual audit suggests HV contact is close to 100%.	Early years
9	Uptake of 6-8 week Child Health Surveillance contact shows no variation due to affluence								Data Available by October 2015 95%	Early years
10	Uptake of 6-8 week Child Health Surveillance contact shows no variation due to LAC status								Data Available by October 2015 95%	Early years
1	Achieve 36% of new born babies exclusively breastfed at 6-8 week review March-17 (annual cumulative)	30.9%	32.4%	31.2%	Data will be released in October 2015				As reported above	Maternal infant nutrition

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
12	Reduce % gap between most & least affluent areas for children exclusively breastfed at 6-8 weeks								Data Available by October 2015	Maternal infant nutrition
13	Maintain 95% Allocation of Health Plan indicator at 6-8 week from birth (annual cumulative)		97.3%	99.5%Q4	99.5% Q1 100% Q2 99.0% Q3				95%	Maternal infant nutrition
14	Maintain the 95% uptake of primary immunisations by 12 months			>95%	>95%				95%	Public Health and wellbeing
15	Maintain 95% uptake rate of MMR1 (% of 5 year olds)	97.3%	94.6%	96.7%Q4	96.6% Q1 96.0% Q2 95.8% Q3 97.1% Q4				95%	Early Years
16	Sustain the completion rate of P1 Child health assessment to 95%	91.1%	93.1%	99.5% Q4	99.0% Q3				95%	Early Years
17	% of children with significant ASN having learning planned for through a child's plan will increase	44.0%	65.0%	70.0%	94%				95%	Additional support Needs
18	The number of 2 year olds registered at 24 months with a dentist will increase year on year			76.8					Awaiting Data from NHS Highland	Public Health and Wellbeing
19	The number of 2 years olds who have seen a dentist in the preceding 12 months will increase			67.3					Data Available by October 2015	Public Health and Wellbeing

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
20	The percentage of 5 year olds will have no obvious dental decay will increase to 80%			70.1%	70.1				80%	Public Health and Wellbeing
21	Child Fluoride Varnish Applications: 60% 3-4 year olds to receive 2+ applications per year			14.9%	14.9				60%	Public Health and Wellbeing
22	All nurseries will participate in the Childsmile Programme with 80% of the roll brushing daily			97.6%					80%	Public Health and Wellbeing
23	90% CAMHS referrals are seen within 18 weeks by December 2014		80.0%		95.3%	83%	96%	100%	90%	Mental Health
24	% of statutory health assessments completed within 4 weeks of becoming LAC will increase to 95%	23.3%	70.0%	66.7%	66.7%	66.8%			95%	Looked after Children
25	% of initial LAC health assessments included in Childs Plans within 6 weeks will increase to 95%	73.3%	60.0%	66.7%	33.3%	33.1%			95%	Looked after Children
26	Waiting times for AHP services to be within 18 weeks from referral to treatment by December 2014								95%	Additional support Needs
27	95% of children will have their P1 Body Mass index measured every year	91.1%	93.1%	90.2%	99.6%				90%	Public Health and Wellbeing
5. Children and young people make well-informed choices about healthy and safe lifestyles										
28	The volume of oily fish, vegetables, fruit and salad used in school meals per pupil increases								Data Available by October 2015	Public Health and Wellbeing

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
Achieving										
6. Children & young people have skills, confidence and self-esteem to progress successfully										
29	% of pupils who report "that staff talk to them regularly about their learning" increases			64%	70%				69	Schools
30	No. children with access to learn a second language from P1 and a third from P6 by 2020 increases			0%					5% 2015-16 25% 2012-17 60% 2017-18 80% 2018-19 100% 2019-2020	Schools
31	Increase % young people reporting positive learning environment - Lifestyle Survey			88%					80%	Public Health and Wellbeing
32	No. Gypsy & Traveller children & young people attending nursery, primary & secondary school			86%					90%	Additional support Needs
33	No. children & young people who experience interrupted learning will decrease			50%					45%	Additional support Needs
7. Children and young people are supported to achieve their potential in all areas of development										
34	The percentage of children and young people sustaining full time attendance at school will increase				99.2				99.3%	Additional support Needs
35	The percentage of schools who have a system to monitor achievement increases								5%	Schools

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
36	% schools awarded an evaluation of good or better for self-evaluation in HMI inspections increases			20%	47%				40%	Schools
37	% schools awarded an evaluation of good or better for curriculum in HMI inspections increases			20%	58%				45%	Schools
38	Maintain high levels of performance against National averages and comparator schools								Baseline available January 2016	Schools
39	% schools evaluated as good or better for Meeting learners Needs in HMI inspections increases			60%	63%				65%	Looked after Children
Nurtured										
8. Children and young people thrive as a result of nurturing relationships and stable environments										
40	No. children entering P1 who demonstrate an ability to develop positive relationships increases								Data Available by October 2015 95%	Additional support Needs
41	The delay in the time taken between a child being accommodated and permanency decision will decrease	9.6	12	9	15			23.3	9 months	Looked after Children
42	No. children needing to live away from the family home but supported in kinship care increases	16.5	19.3	18.3	14.6	13.8	14.2	14.4	20% As reported above	Looked after Children
43	The number of children where permanence is achieved via a Residence order increases		67.0	72.0	76.0	75.0	76.0	75.0	82 As reported above	Looked after Children
44	No. audits carried out for LAC who have three or more unplanned placement moves in 3 month period			100%	100%	100%	100%	100%	100%	Looked after Children

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
9. Families receive support, advice and guidance well-matched to their needs										
45	The number of pregnant women screened for substance misuse who are offered support increases								not set	Early Years
46	The number of pregnant women who are at risk of poor mental health who are offered support increases								not set	Mental Health
47	An increase in uptake of Healthy Start scheme to 85% of eligible beneficiaries by 2016				68%				85%	Maternal infant nutrition
48	No. eligible children supported to take up their early learning & childcare entitlement increases								70% by December 2015	Early Years
49	The number of staff trained in the use of approved parenting programmes increases				76				76	Supporting Parents
50	No. areas producing an annual plan for delivering universal & targeted support to parents increases				4				4	Supporting Parents
51	The number of parents attending validated parenting programmes increases								Data available by October 2015 50	Supporting Parents
52	Increase No. parents of severely disruptive 3-4 year olds participating in parenting courses				50				Increase	Supporting parents
53	No. schools offering sessions/information to parents about child development at transition to P1				100%				95%	Supporting Parents

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
54	The proportion of families with children under 8 receiving income maximisation advice increases								Baseline to be agreed by December 2015	Public Health and wellbeing
Active										
10. Children and young people are physically active										
55	The number of children walking to school increases								Data Available by Oct 2015	Road Safety Unit
56	The number of schools who offer 2 hours (or two 50 minute periods of high quality PE) increases			82%	97	98	98	98	14-15 97% 15-16 100% thereafter	Schools
57	The number of provisions who report that children have daily access to the outdoors increases				197				197	Play
58	The number of provisions that are able to provide free access to the outdoor increases				177				177	Play
59	No. children achieving one hour or more moderate activity on 5+ days per week increases								Data Available by Oct 2015	Public Health and wellbeing
Respected & Responsible										
11. Children & young people know their rights and are confident in exercising these										
60	% children responding positively to question "Staff & children treat me fairly & with respect"			80%	84%				84%	Schools
61	The percentage of schools with a model for personal support in place				50%				55%	Schools

		2011/12	2012/13	2013/14	2014/15	April	May	Jun	Target / comment	Imp Group
	increases									
12. Families valued as important contributors and work as equal partners to ensure positive outcomes										
62	% parents & carers who respond positively to question "the school takes my views into account"			57%	65%				63%	Schools
63	% parents who report that the school keeps them well informed of their child's progress increases			74%	76%				77% by June 2015	Schools
Included										
13. Children, young people & families are supported well to develop strengths and resilience										
64	The number of schools with the new equal opportunities policy in place increase								Data Available by October 2015 75	ECS Equalities Working Group
65	The percentage of parent and carer responses to the question, "my child is treated fairly at school"			87%	91%				91%	Schools
66	% of children who report they have a say in making the way they learn in school better increases			47%	62%				56%	Schools
67	No. parents/carers who participate in the parent/carers food & health in schools programme increases								Data Available by October 2015	Public Health and Wellbeing
68	No. families of children with ASN supported by Chip+ through the SLA is maintained or increases			1321					1321 enquiries	Additional support Needs

		2011/12	2012/13	2013/14	2014/15					
						April	May	Jun	Target / comment	Imp Group
69	The number of school staff participating in equality and diversity training increases								Data Available by October 2015 200	C&L Equalities Working Group

Highland Community Planning Partnership

Health Inequalities and Physical Activity Theme Group Annual Report 2014/15

Cathy Steer, Head of Health Improvement, NHS Highland

1. Introduction

Scotland, in common with the rest of the UK, continues to have a widening gap in life expectancy between the richest and the poorest members of society¹, although overall health in the population continues to improve. The underlying causes of these inequalities are increasingly recognised as inequalities in the distribution of income, wealth and power.

Fifty years ago, communicable diseases were the prominent contributors to health inequalities. However, the main contributors to the gap in life expectancy are now cancer, smoking, alcohol-related diseases and injuries. Tackling health inequalities therefore requires upstream work to address the underlying socio-economic inequalities in society.

Inequalities in Highland are similar to those described for Scotland. Population health has improved on most measures between the 1990's and the late 2000's, but health is still improving more slowly for some of our communities. Inequalities in morbidity and mortality outcomes associated with income deprivation have increased or remained very similar over recent periods despite work on improvement the health of the population as a whole. Across Highland not all deprived people live in areas that would be recognised as deprived, but there are a number of areas with higher numbers of income deprived people that consistently have poor population health outcomes. The same geographic areas tend to be found at the poorer performing end of the range on most measures and in all time periods.

Across the Community Planning Partnership, there is a need to maintain a balance between universal services and targeting specific hard to reach groups. Universal service play an important part in improving overall population health, but the inequalities gap may widen if there are not also specific efforts made with those least likely to engage with services. Such an approach is termed "proportionate universalism".

All public sector organisations have a role to play in helping to reduce health inequalities. Proportionate universalism is an approach that can be adopted by all services, where those most in need of services are least likely to access them. Specific services are sometimes available to support particular hard to reach groups, such as the homeless and gypsy travellers, but there is a need to ensure that these are joined up across organisations.

The contribution that the third sector in Highland makes towards reducing health inequality is becoming increasingly clear. The diverse range of services, initiatives and activities that the sector delivers is often targeted at the fundamental 'upstream' social and economic causes of health inequality and is preventative by its very nature. It is often community-led groups and initiatives responding to local needs and gaps in public service provision, particularly in our most isolated and remote communities, that lead to innovative approaches that offer essential support to some of the hardest to reach, most vulnerable and disadvantaged people in Highland.

With this in mind, the Health inequalities theme group has over the past year developed a programme of work that aims to:

- raise awareness of health inequalities, their causes and what can be done to help reduce them
- prioritise action that tackles the upstream causes of inequalities
- align programmes, projects and initiatives across the partnership to try to reduce duplication of effort and add value by working in partnership

2. Health Inequalities Theme Group

Health inequalities is recognised as a cross cutting theme within the CPP. The Health Inequalities Theme Group is tasked with overseeing progress on the health inequalities priorities outlined in the Highland Single Outcome Agreement and overseeing the development and implementation of partnership work to support a reduction in health inequalities in Highland.

Over the past year the group has reviewed and updated the delivery plan within the SOA and developed an action plan which sets out a number of priorities that have been progressed over 2014/15. The following sections provide information about each of these priorities and a summary of progress over the past year.

3. Preventative Spend – Targeting geographical areas of inequalities

The Highland Councils preventative spend targeted funding to support people in deprived communities. Some of the funding has been used to fund four Community Health Co-ordinator posts (CHC) and three Community Food and Health Practitioner posts (CFHP) in our four most deprived urban areas according to the Scottish Index of Multiple Deprivation (SIMD). Work is focused on Wick, Alness/Easter Ross, Inverness (Merkinch, Hilton, Raigmore, Kinmylies and Dalneigh), and Fort William.

Community Health Co-ordinators - The CHCs have now been in post and working with their communities for just over one year. The following summarises the work to date:

- 🕒 **Community engagement and stakeholder analysis** - All CHC's have continued to build and strengthen contacts and key partnerships with a wide range of community groups, organisations and services and attended a variety of meetings, including community councils, resident associations, youth groups, community projects and statutory service meetings such as local health teams, district partnerships and ward meetings. This on-going process of engagement and relationship building is essential to building and maintaining key partnerships and networks for taking forward work

to reduce health inequalities. Identifying the local drivers, partnerships and key forums that are important and active in communities has been essential to understanding how communities work and to making sure that activity makes best use of the opportunities and connections within communities.

🕒 **Local Mapping** - Mapping of local communities has been undertaken and continues to build on community profiles that outline demographics including distribution of age and gender as well as profiling some health issues, housing and economic activity. The mapping activity also identifies local facilities, support and community assets. Local network contact lists have been developed and shared as appropriate.

🕒 **Locally driven activity** - As well as getting to know the communities and undertaking the mapping work outlined above, the CHCs have been involved in specific activities within their communities. These activities have varied according to the issues and priorities of each community, and have included:

- Delivery of Health Issues in the Community (HIIC) training to local partners
- HIIC accreditation from SCDC achieved
- Delivery of training in “Ketso” participatory appraisal toolkit to partners
- Delivery of introductory healthy weight training sessions in schools
- Facilitation of Council Community empowerment workshops
- Development of social media presence on Facebook
- Contribution to Council development local consultation sessions
- Development of the local professional network through delivery of networking events in Merkinch & South Kessock
- Local capacity building to support social enterprise in Merkinch and South Kessock
- Delivery of workshops to tackle self-harm and mental health stigma with young people
- Involvement in a ‘men’s shed’ project
- Development of links with Robertson Trust Women and Family centre
- Delivery of local workshops and events on a number of issues including alcohol and young people, mental health and employability, sexual health and transitions for children from P7 to S1, “Walking Football”
- Use of improvement methodology to study young peoples’ participation in physical activity
- Facilitated meetings/workshops to bring people and organisations/groups that have not worked together previously to plan joint activity
- Development of co-location agreement for joint working and information sharing
- Development of a communication plan for the Fort William work
- Development, delivery and evaluation of UHI partnership Participatory Action Research community capacity building training course and seeding grant pilot

- Development of a community 'seeding' grant scheme for local projects
- Establishment of an equitable Communities seeding grant working group

Community Food and Health Practitioners – The CFHP's like the CHC's have been in post for just over one year. Their role is to develop group interventions to support healthy weight in targeted communities and work with communities to improve access and availability of healthy food and opportunities for physical activity.

- 🕒 **Community engagement and stakeholder analysis** - The CFHPs have continued to work and strengthen links with a number and range of groups and organisations that operate or provide services in the areas covered. They have mapped local assets and built a profile of the communities that is relevant to their work. Part of this process of getting to know their communities has been to find out what kind of action or support people identify that they need in order to support healthy eating and physical activity.
- 🕒 **Local mapping** – Like the CHC's the CFHP's have developed local mapping but have focused specifically on issues in relation to healthy weight and food access and availability, e.g. comparison of availability and price of staple food products in local shops.
- 🕒 **Locally driven activity** – Specific activities include:
 - Work with key stakeholders; community Midwives, Health Visitors and Childcare providers to support and promote uptake of Healthy Start
 - The Early Years Collaborative improvement methodology is being used in small tests of change with nurseries in Wick, and with Health Visitors in Hilton/ Merkinch, to support implementation of Healthy Start pathways
 - Working with Income Maximisation team and third sector partners to increase reach of the Healthy Start scheme
 - Mapping of retail outlets and the comparison of a standard food basket list for the 3 key areas has been completed and reported. This will be used to support discussions and take forward work around access and availability of food in local communities.
 - Focus groups to identify needs of older people in E. Ross around transport and befriending
 - Open event for service providers/ community groups in Inverness using "Ketso" participatory toolkit to explore needs around food and health
 - Contacts made with Befriending Caithness to explore joint working
 - Involvement with Tenant's and Sheltered Housing groups in Wick and Thurso to prepare, cook and eat Christmas lunch
 - Delivery and evaluation of Health Issues in the Community programme
 - Work with Men's shed initiatives and LLCCDC

- Work with partners e.g. RCOP to develop links with Food banks, community cafes and local groups to develop leisure and recreational opportunities in the Seaboard villages of E. Ross
- Exploratory links made with local groups in Thurso about development of a community café
- Meetings held with Thurso allotments and LLCCDC to explore potential for inter-generational growing project
- Confidence to Cook course piloted and delivered in Wick
- Meetings held with THC allotments officer to explore joint support to communities in Inverness
- Contact made with Federation of City Farms and Community Gardens to plan a network and training event in Inverness
- Delivery and evaluation of Explore-Cook-Eat courses in Caithness – further courses planned
- Support for partners e.g. Calman Trust, to run cooking skills courses in Inverness
- Delivery of Food For Thought programme in Inverness and Invergordon – further courses planned to support a mental health hub in Inverness
- Accreditation in REHIS achieved and development of training courses started
- Delivery and evaluation of community partnership project with HLH in E. Ross
- Partnership project with HLH in Caithness to increase PA opportunities for participants of local Well Now programmes
- Work with “Childsmile” around Healthy Start support/ referral
- Delivery of weaning training and support for Health Visitors and EYPs in E. Ross
- Contact made with Community Action Raigmore Estate around environmental improvements for the area
- Delivery of Well now healthy weight courses

Key learning from the work of the CHC’s and CFHP’s so far includes:

- The need to develop understanding of community development methodology and timescales to implement, including expectations of outcomes being visible in the short term
- Recognise and manage the tension between delivering a ‘bottom up’ and a ‘top down’ agenda
- Work to address some perceptions that the work will be remote from the needs of the community
- Acknowledge and work with and through historical and long standing ‘politics’ and relationship barriers
- Need to tackle some apathy to ‘yet another initiative’

- Need to tackle some misunderstanding/ interpretation of the CHC role and perception of duplication of work.

An evaluation of the preventative spend initiative is currently underway. A report is expected later this year.

4. Welfare Reform

The health inequalities group have overseen development and implementation of three welfare reform pilot projects over the last year. The projects aimed to demonstrate ways in which the effects of welfare reform could be mitigated for adults who suffer from mental ill-health and adults who misuse substances. The projects received funding from Scottish Government and were developed following consultation events with practitioners from the NHS, Council and Third Sector organisations in all Districts in Highland.

The three projects that emerged were:

- Development of a resource to highlight local employability support and development of referral routes for clients with mental ill-health and/or substance misuse issues who were thought to be ready to get back into the workplace.
- Development of money advice/income maximisation advice to clients attending substance misuse services in Easter Ross through bringing in specialist expertise to the substance misuse clinic sessions in Invergordon and Tain.
- Development of specialist money and other advice services to clients attending mental health services in Wester Ross, Skye and Lochalsh through use of technology.

This work is currently being evaluated by Scottish Government and a report is expected before the end of the year.

5. Health, Housing and Homelessness

A workshop on health, housing and homelessness was held on 6 February 2015, attended by more than 40 delegates from NHS Highland, Highland Council and the Third Sector. The workshop aimed to:

- Identify a shared understanding and priorities across agencies
- Review current issues
- Identify priorities for partnership action

The outcome of the workshop was the development of a new multi agency health, housing and homelessness group that brought together leads from across the CPP to develop a joint

vision and action plan to take forward work on health, housing and homelessness in Highland. The new group has developed terms of reference and have agreed three themes for joint action:

- Improving service delivery and outcomes for clients
- Developing a holistic approach
- Enhancing partnership working

The group have planned to undertake a mapping exercise of existing services, how they are accessed and the type of support provided to inform development of an improvement plan that will identify gaps in provision, referral routes and opportunities to address key issues.

6. Understanding inequalities in remote and rural areas

The CPP recognised that the Scottish Index of Multiple Deprivation does not adequately identify deprived rural areas. In rural areas, poverty and deprivation are more spatially dispersed than in urban areas. In addition other factors, such as population decline, not included as a factor in SIMD, may particularly disadvantage rural areas with dispersed populations.

The Health Inequalities Group was keen to try and develop a partnership understanding of deprivation / inequalities / need in rural areas. Highlands and Islands Enterprise (HIE) and the Highland Council (HC) had separately developed indices to capture factors that impact specifically on rural areas. These 'fragile area' indices brought together indicators that were considered specific to experience in rural areas. The health inequalities group arranged for briefings on this work and the recent work by the James Hutton Institute that brought together 20 indicators to map rural socio-economic performance (SEP) across Scotland.

The group brought in expertise on socio-economic data and constructing indices from HIE, Highland Council and Public Health, NHS Highland to review the pros and cons of the three approaches described above.

The work highlighted 14 small towns and 16 rural communities that could be described as 'deprived' or 'fragile'. A full report was taken to the CPP Board who agreed that the communities and small towns identified in this work should provide the focus for CPP collaboration to reduce inequalities. This would complement the work underway in the four areas of urban deprivation.

The health inequalities group have been tasked with looking at how this work can be used across the partnership in future.

7. Training and awareness raising

A number of awareness raising events and training sessions on inequalities and related issues have been organised and delivered by partners during the past year. These have included:

- A workshop on health and homelessness
- Local briefings/training on the impact of welfare reform
- Health inequalities debate
- Equality and diversity training
- Third sector health inequalities forum
- Inequalities and older people seminar
- Third sector inequalities workshop
- Briefing/workshops on Community Empowerment
- Community Development workshop
- Use of community engagement tools
- Shopping/cooking on a budget

The group have discussed the benefits of developing a partnership approach to training and this will be one of the issues which the group will develop some work on in the coming year.

8. Anti Poverty strategy

A sub group has been set up and are working to plan a partnership and wider stakeholder event to develop an anti-poverty strategy for Highland. Initial discussions with the Poverty Alliance have been positive and the group are exploring opportunities for joint work that will particularly focus on poverty in rural areas.

9. Physical Activity

The CPP recognised the need to develop a new physical activity strategy for Highland since the previous strategy ended in 2014. A new 'Active Highland' group was set up as a sub group of the health inequalities theme group to develop a new strategy based on the revised national outcomes for physical activity in Scotland.

The Active Highland group held a workshop, facilitated by officers from Sport Scotland, on 17 June 2015. At the workshop, the group identified the desired outcomes for the new Active Highland strategy and agreed the structure and content areas of the strategy. A named lead for each outcome was identified along with who will collaborate to develop the contribution and content for each outcome. The agreed outcomes are:

- We encourage and enable the inactive to stay active throughout life
- We develop physical and mental confidence and competence, and personal wellbeing, from the earliest age and throughout the life course

- We maintain and improve our active infrastructure – people, places, including the natural environment
- We support resilience and wellbeing in communities through physical activity and sport
- We improve opportunities to participate, progress and achieve in sport

Throughout the summer months, the group developed a bid for funds from the Legacy 2014 fund for money to develop dance activities and health walks. The group also worked with the Cairngorms National Park Authority to support their legacy 2014 bid to develop health walks in the CNP area. The bid was submitted towards the end of August 2015. We await the outcome of the bid.

10. Progress on Delivery Plan and indicators for measuring progress against agreed outcomes

During 2014/15, the group reviewed the health inequalities and physical activity delivery plan and updated the outcomes and indicators in the plan. However, a technical review was not undertaken and as a result indicators are not currently in a format that will promote consistent reporting of the role of community planning in improving outcomes for physical activity and reducing inequalities for people in Highland.

The existing measures have inadequately defined data sources and lack clear specification. There are issues with sample size and frequency of reporting for some indicators and others require monitoring of long term trends to be meaningful. It has been difficult to provide baseline and monitoring information that tells us what is happening with health inequalities in Highland. Indicators also do not sufficiently make links to agreed outcomes in the delivery plan. This will need to be addressed for future reporting and it is hoped that information from the national local outcomes indicators project will support the Highland CPP to develop this work. The local outcomes indicators project is to be discussed at the CPP Board meeting in December 2015 and further development of indicators will take place over the coming year.

The following information picks up on some of the themes and indicators of the delivery plan using available data that can be monitored routinely.

Indicator - Gap in life expectancy of the most 15% deprived in Highland and the average life expectancy (Target – Reduction)

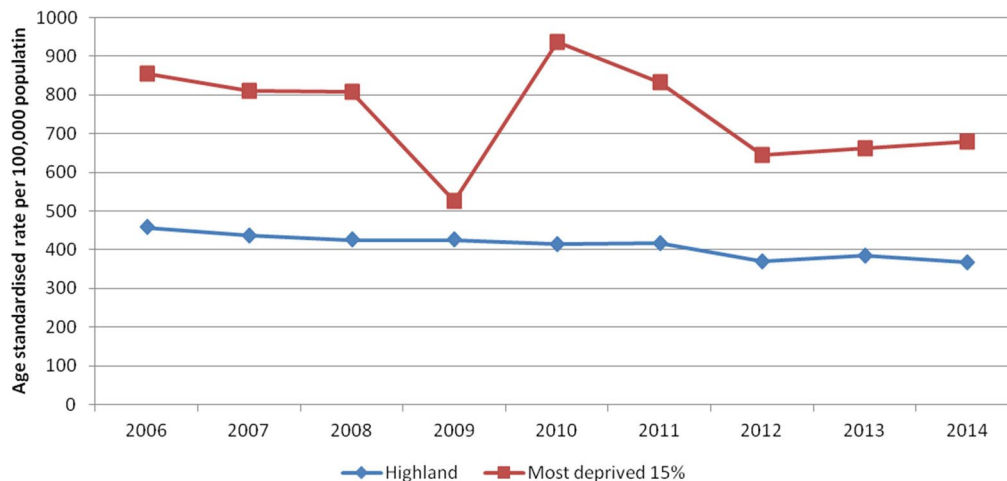
Explored using trends in premature mortality as a proxy

Rationale: Scotland has one of the highest rates of death in Western Europe, and this is mirrored by comparatively low rates of life expectancy. Mortality rates for the whole population have been steadily decreasing in recent years, but there are wide variations in mortality rates and trends. The Scottish Ministerial Task Force on Health Inequalities, as part

of the [Equally Well](#) (2008) strategy, made it a priority to tackle widening inequalities in death rates.

We explore change in the age-standardised all cause less than 75 years of age mortality rate in Highland and the rate in the areas in Highland in the most deprived 15 percent of data zones in Scotland. Rates were age-standardised to the European Standard Population 2013.

Figure 1: Under 75s age-standardised death rates for all causes, Highland and Highland most deprived 15 percent , 2006 to 2014



Data source: NRS Vital events files, NRS Small Area Population Estimates and SIMD2012 – standardisation HIKT, NHS Highland

Comment:

Overall the age-standardised mortality rate in those aged under 75 years has reduced by 23% between 2006 and 2014. This is almost identical to the change in the mortality rate in the most deprived 15 percent of areas in Highland – this was 23.2%. The relative gap in premature mortality remains about 80 percent higher in the most deprived areas. The reason for the drop in mortality in the most deprived areas in 2009 is not apparent from the data extracted and would require separate investigation.

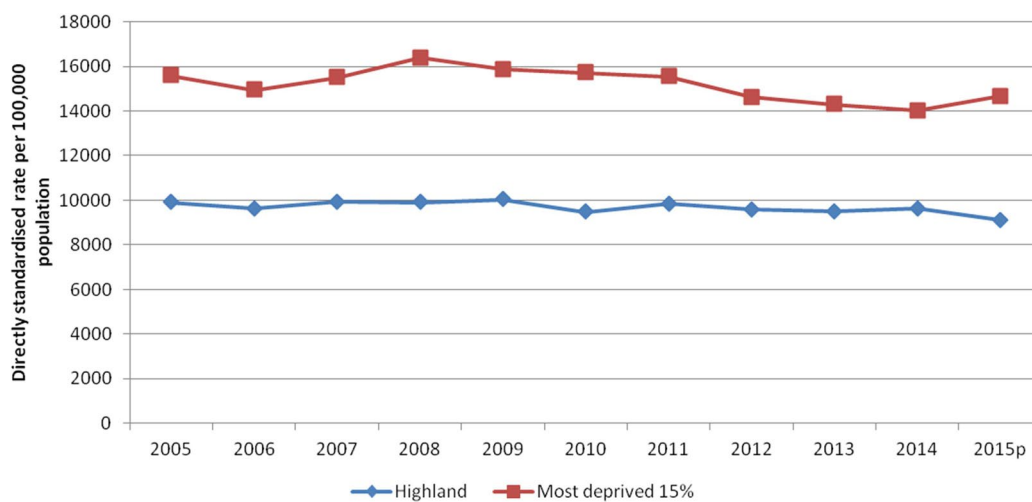
Indicator - Rate of emergency admissions to hospital per 100,000 in the most 15% deprived and the average rate of admissions in Highland (Target – Reduction)

Rationale: For all age groups, this indicator should demonstrate the outcome of improved partnership working between the acute, primary and community care sectors. This includes work to improve health and wellbeing through a wide range of approaches and early interventions, work to reduce accidents and improve safety in the home, work focussed on reducing the incidence of particular health conditions and work on providing support for carers.

Patients from deprived areas are known to use hospital care differently. The main trend displayed is greater use of emergency care. For example, there are more problems relating to mental health, use of drugs and alcohol and complications in pregnancy and childbirth. A larger proportion of admissions for these conditions are not planned in advance.

The emergency admission rate is strongly related to patient age and rates have therefore been age-standardised to the European Standard Population (2013).

Figure 2: Age-standardised emergency admission rate per 100,000 population, Highland and Highland most deprived 15 percent , by financial year end 2005 to 2015



Data source: SMR01, NRS Small Area Population Estimates and SIMD2012 – standardisation HKT, NHS Highland

Comment:

Overall the age-standardised emergency admission rate has reduced by 6% between 2004-08 and 2014-15p. The change in the emergency admission rate in the most deprived 15 percent of areas in Highland was 9 percent over the same period. The relative gap in premature mortality remains about 50 percent higher in the most deprived areas.

Indicator – Percentage of communities with a community council (Target – Increase)

152 community councils are currently in operation in Highland out of 156 (97% of communities). Baseline information for 2013/14 is not available.

Indicator – Percentage voter turnout at Scottish Parliamentary elections (Target – Increase)

Turnout for the last Scottish Parliamentary elections in 2011 for the 3 constituencies were:

Constituency	Percentage turnout
Caithness, Sutherland and Ross-shire	52.1%
Inverness and Nairn	52.8%
Skye, Lochaber and Badenoch	56.2%
Overall turnout	53.7%

The next election is May 2016.

Indicator – Percentage of children in P1 with no obvious dental decay (Target – Reduction)

Rationale: Dental caries (decay) and periodontal (gum) disease are very common and largely preventable and are therefore considered widespread public health issues. The relationship between oral health and general health is well documented. Oral disease can have detrimental effects on a child's health and long-term wellbeing and can impact significantly on school and other daily activities.

The National Dental Inspection Programme (NDIP) surveys each year in Scotland's schools and provides information on trends in children's oral health. A Primary 1 survey is undertaken every second year. Time trend data has not been published for Local Authority areas.

In 2014, 67.5% of children in Highland had no dental decay. This figure is comparable with Scotland (68.2 percent).

Comment

Trends in NHS Highland P1 children have shown an improving picture in the proportion with no dental decay, although the most recent 2014 survey shows no significant difference from 2012. This indicator will not be reported again until 2016.

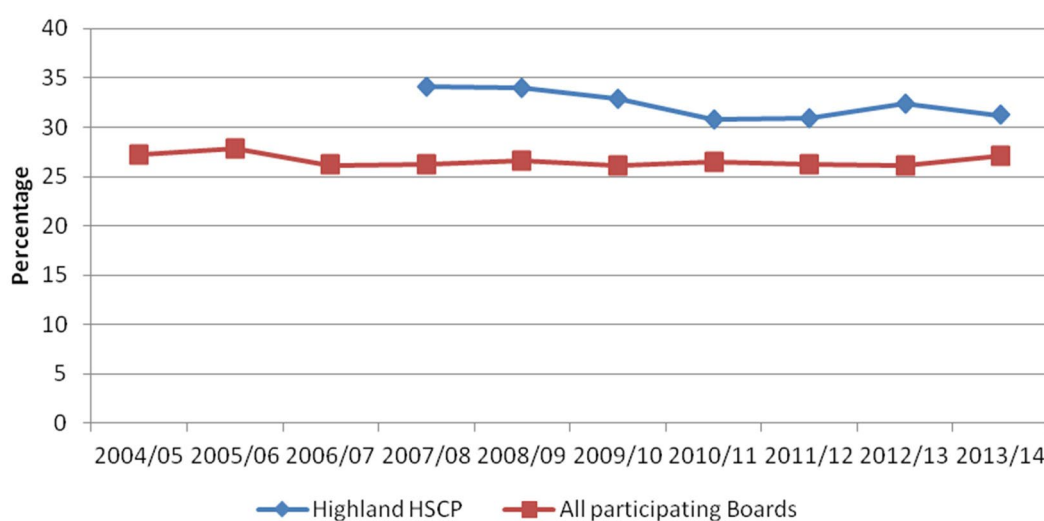
Indicator - Percentage of new born children exclusively breastfed at 6-8 week review (Target – Increase)

Rationale: There is strong evidence of the short and long term health benefits of breastfeeding for both mothers and infants. Breastfed infants have a lower risk of infection, particularly those affecting the ear, respiratory tract and gastro-intestinal tract. Women

who breastfeed have lower risks of breast cancer, epithelial ovarian cancer and hip fracture later in life.

The data presented below explores the proportion of women **exclusively breastfeeding** at 6-8 week review after birth. The year refers to the child's year of birth. Data for children born in 2014-15 will be published by ISD in October 2015. NHS Highland implemented the Child Health Pre-School surveillance system in May 2007.

Figure 3: Breastfeeding at the 6-8 Week Review and Year of Birth in Highland and Scotland (participating Boards)



Data source: ISD.

Comment

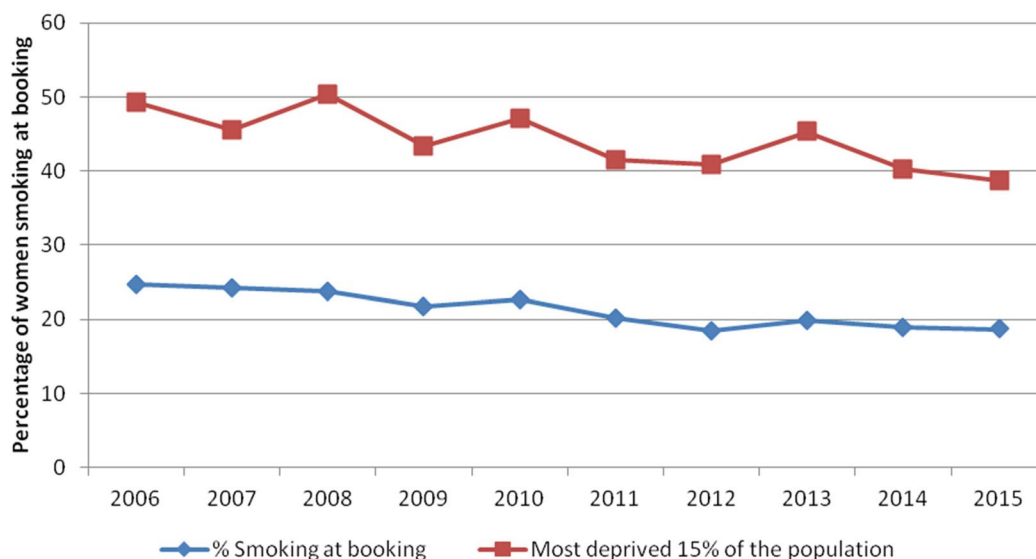
Currently about 31 percent of children are exclusively breastfed at the time of 6-8 week review in NHS Highland. The prevalence of exclusive breastfeeding at the 6-8 week review has remained relatively static in Highland since 2010/11. However, the overall rate has dropped by 8 percent from the start of recording.

Rates in NHS Highland are higher than in Scotland

Indicator - *Percentage of women smoking at first booking (Target – Reduction)*

Rationale: Smoking during pregnancy is harmful to both mother and baby. Maternal smoking is associated with preterm and/or low birth weight babies and with increased risk of miscarriage, stillbirth and Sudden Infant Death Syndrome (SIDS). It also increases the risk of the baby developing a number of respiratory conditions; attention and hyperactivity difficulties; learning difficulties; problems of the ear, nose and throat; obesity; and diabetes.

Figure 4: Percentage of women smoking at antenatal booking in Highland by financial year end, 2006 - 2015



Data source: Data extracted from SMR02 (Maternity Recording) and Scottish Index of Multiple Deprivation 2012 (areas in Highland in the most deprived 15 percent of data zones in Scotland)

Comment

Smoking rates during pregnancy are lower than in the past, but over 19% of women in Highland are recorded as smoking at the time of their antenatal booking. This means that over 400 infants are born to mothers who smoke each year in Highland. There are also marked differences between women of different ages and socio-economic groups in smoking behaviour in pregnancy. Infants born to smokers are much more likely to become smokers themselves, which perpetuates cycles of health inequalities.

Indicator – Percentage of pupils in S4 with 5 awards at SCQF level 5 and above (Target – Increase)

Year	Percentage of pupils in S4 with 5 awards at SCQF level 5 and above
2012/13	55.81%
2013/14	55.55%

Data for the current reporting year (2014/15) will not be available until the end of September 2015.

Indicator – Financial benefit to customers from the Council’s money advice and welfare rights service (Target – Reduction)

Year	Financial benefit
2013/14	£1.635m
2014/15	£3.975m

Indicator – Number of employers engaging with Healthy Working Lives (Target – Increase)

Currently there are **75** employers engaging with the Healthy Working Lives programme in Highland. This will be the baseline for any future reporting of this indicator.

Indicator – Number of recorded hate crimes (Target – Reduction)

Year	Recorded hate crimes
2013/14	146
2014/15	117

Indicator – Number of dwelling fires per 10,000 (Target -Reduction)

Year	No. of accidental dwelling fires	Population estimate	No. of accidental dwelling fires per 10,000 population
2013/14	144	232,910	6.2
2014/15	160	232,950	6.9

Indicator – Proportion of households in fuel poverty (Target - Reduction)

Rates of fuel poverty are collected through the Scottish House Condition Survey. Figures for 2011-13 show:

Households in fuel poverty (brackets = extreme fuel poverty), 2011-13		
Household type:	Highland Council area	Scotland
All households	50% (18%)	36% (10%)
Family households	39% (10%)	20% (4%)
Pensioner households	69% (28%)	54% (15%)
Adult-only households	35% (13%)	31% (9%)

<u>Tenure:</u>		
Owner-occupier	49% (17%)	34% (11%)
Social housing	50% (20%)	40% (7%)
Private rental	48% (14%)	31% (9%)

Source: <http://www.gov.scot/Topics/Statistics/SHCS/keyanalyses/LAtables2013>

Indicator – Number of road users killed or seriously injured

Year	No. of road users killed	No. of road users seriously injured
2013/14	25	83
2014/15	15	65

Indicator – Number of budget scheme users for Highlife Highland scheme (Target - Increase)

Year	Number of budget members
2013/14	7633
2014/15	8386

Indicator – Number of allotments (Target - Increase)

Year	Number of allotments
2012/13	8
2013/14	9
2014/15	9

11. Emerging Issues and Priorities for 2015/16

The following issues are emerging as requiring attention by the partnership in the coming year:

- Develop understanding of and use of the work on rural deprivation/fragility
- Development of an anti-poverty strategy
- Review and development of appropriate indicators for the health inequalities and physical activity delivery plan
- Development of a partnership approach to training and awareness raising on inequalities
- Development and implementation of a new physical activity strategy
- Development of a partnership approach to ESF funding

- Fuel poverty
- Use of local mapping information
- Self assessment

12. Summary and Conclusion

Overall the health inequalities theme group have been able to progress a number of identified priorities that have resulted in improved understanding and partnership working on issues that affect inequalities in health including health, housing and homelessness, welfare reform, rural deprivation and physical activity. This work has contributed to the outcomes within the Single Outcome Agreement to tackle the social and economic determinants of poor health. However there is still much to do if we are to reverse the trend of increasing inequalities. Work is required to review and agree a more appropriate set of indicators for this work that will give us meaningful information about health inequalities and relate to the delivery plan in the Single Outcome Agreement. Work will continue to be developed over the coming year which will build on the successes of the past year and become the focus of improvement/development work for the group. This will include development of an anti poverty strategy and a physical activity strategy.

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**Single Outcome Agreement
Between the Highland Community Planning Partnership and the Scottish Government
2013/14 – 2018/19**

**Performance Report
Year 2: FY 2014-15**

Older People

Background: Since the integration of Adult care in 2012, great change has happened across Highland in relation to the delivery of services for older people. As highlighted previously this is of course within the context of people living longer and many people, as a consequence, living with multiple health conditions.

However the direction of travel remains unchanged focussing on keeping people as close to home as possible and for as long as possible. This is not possible across Health and Social Care alone and the strategic commissioning approach adopted in 2012 has developed valuable relationships across the Public, Independent and Third sectors. These new working relationships are enabling the development of new and innovative models of care delivery, so required in the 21st century and in rural communities.

With a renewed focus on outcomes, it is vital to be able to demonstrate the positive impact of all initiatives that have been tested and expanded such as *My Home Life* in Care Homes, personal outcome planning across community teams and support to carers.

Performance Framework: The partnership is working to a Performance framework that is based on the National Health and Wellbeing Outcomes but is also reflective of what the people of Highland have told us over the years. A number of indicators have been adjusted to reflect this more outcome focussed approach.

There are still some challenges in accessing data when required and in a timely fashion to enable valid analysis.

Results: the table below illustrates progress against the agreed targets with the following summary.

People are healthy and have a good quality of life: Steady progress is evidenced here with the figures relating to the age of admission to care homes indicating the success in keeping people at home for longer. Work continues to redefine reablement as a function at the heart of what we deliver rather than it being seen as a specific role for only a few. There may be a need to revise the indicators as a result but the focus remains on early intervention and anticipatory care to avert crises. This has benefits to the individual but also importantly to their carer(s). Integration has enabled a more holistic approach as well as the streamlining of services delivered in various premises enabling the development of consistency of approach, good working relationships and the sharing of relevant information.

People are supported and protected to stay safe: There has been considerable emphasis on the quality of care delivered in the home and care homes across all sectors. Some of this has been driven by the identification of poor quality care which has had implications for resident's safety and protection. . As a result of the initial concerns raised in some care homes, a large scale investigation protocol was produced and this has received National recognition.

However by working across the sectors, progress is as a result of a pro-active approach to improving quality. Specific posts have been developed within Scottish Care and funded by the Highland Partnership to provide the capacity and expertise to drive up standards. Integrated teams call on a wide range of experts to support care wherever it is delivered and especially in care homes which is resulting in improvements in Care Inspectorate grades. Specific support on Food Fluid and Nutrition, Oral Health Care and Prescribing is showing benefits for residents as it spreads across the Highland area.

People are supported to maximise their independence: Care at home provision remains a high priority with the adoption of a Strategic Commissioning approach to provision in the future. The diverse geography of the Highlands has driven the need to explore new models of care delivery that are not only affordable but sustainable. In some of the more rural or remote areas innovative solutions have been found that have enabled local carers to provide care to local people, and in other areas a more flexible approach has been identified enabling the combination of roles across facilities and services e.g. hospital, care home, community, to sustain a reasonable wage. Work continue with Education and further education to explore the development of a Care Academy to ensure that young people are attracted into the care services and given opportunities to develop further skills should they wish to do so.

Through this close working across the sectors, Highland has become the first area to pay the Living Wage to carers. This has been agreed and will be confirmed in contracts, with quality indicators incorporated into contract monitoring.

With the launch of the Carer's strategy- Equal Partners in Care, Connecting carers and other partners have been progressing an implementation plan focussed on improving support for carers and ensuring their needs are met. This has resulted in a number of reviews most importantly a review of respite. Recognising that this means many things to many people, Connecting Carers are gathering views from a wide range of stakeholders and a final report and recommendations is expected later in the year. However this is one of a suite of measures which includes Carer support plans now focussed on personal outcomes, better access to information and improved training for the basics such as moving and handling.

The Public Bodies(Joint Working)(Scotland)Act 2014 requires local authorities to delegate specific Housing functions which relate to care and repair in support of shifting the balance of care and enabling more people to stay in their own home for longer as they age. Work continues to refine performance indicators and targets to support this. A key plank of this is the further development of support through Telecare and home health monitoring applications. The Highland Partnership is in receipt of specific Scottish Government funding aimed at building up Telecare usage, testing new home health monitoring equipment and extending progress made through the Living it Up initiative. This work being progressed over the next year will need to evidence the added benefits of technology in assisting care provision for the future and enabling independence. In readiness for the further promotion of Telecare ,the service has been reviewed and new contracts established with the Handy Person's Schemes to ensure a consistent approach.

People and their carers are informed and in control of their care – The Self Directed support approach continues to be promoted across Highland with an increased uptake in Options 2 and 3. Operational staff are supported in this new approach at a local level by members of the team who have built up considerable knowledge and expertise. Individualised funds have been used collectively to secure care within a rural community in a style of pop-up provision which has now been replicated 80 times over. This provision delivered by local enterprise is supported by the independent sector so that the right level of training and support is put in place. The use of the SDS approach in this way is not only

innovative but supports communities to support themselves and provides a longer term option than traditional services who may struggle to recruit and sustain a service.

People are supported to realise their potential: With the appointment of a volunteer services manager in NHS Highland, there has been a renewed focus on the added value a volunteer can bring to the care of older people. Although there have been pockets of good practice involving cancer care and spiritual care, volunteering has not been widespread across care premises. Consequently the priority of the manager has been to recruit volunteers to support in hospital and care home settings focussed on befriending and communication. This is now widely evidenced across Raigmore hospital and volunteers are beginning to feel part of the ward teams. The number of people regularly volunteering continues to rise but there remains an added challenge of recording and tracking numbers. The Scottish Health Council and Scottish Government have developed a National Volunteering system which is aimed at recording the relevant data and enabling the tracking of developments locally and across Scotland.

Through the Technology Enabled Care workstream, Living it up continues to be promoted and developed. This also offers volunteering opportunities and signposts those interested to further information. Those who have a long term condition are particularly valuable in volunteering to support those with a new but similar diagnosis and feedback from the public is that this role is very beneficial to those who volunteer **and** those who they support.

An evaluation of the role of Community Networkers whose posts were funded by the Change Fund has demonstrated the added value brought through the work of these postholders. However there was a variety of approaches taken and although the posts have not been continued in their original format, they have morphed into new roles with an emphasis on the support to those with a long term condition. They will continue to be deployed through the Third Sector Interface linking into local communities and working across all organisational boundaries. There will be ongoing evaluation of the contributions they make to the health and well being outcomes.

People are socially and geographically connected: Specific work here is less easy to evidence as it is reflected in a number of approaches across community capacity building and befriending etc. However the rollout of the Personal Outcome Plan enables the recording of outcomes in relation to socialisation. One of the hidden risks of caring for people in their own homes is that people can become isolated and the meet and greet associated with traditional day care is lost. With the demise of natural communities around a Post Office or village shop this isolation can become compounded.

The person centred approach and focus on outcome planning is aimed at identifying individual needs and tailoring that to community life. In some communities Men's Sheds have become popular offering the kind of activity that may be more reminiscent of the man's working life. Many older people wish to support child development, passing on skills in gardening for example in schools. It is envisaged that the Community Empowerment Bill may give local communities wider opportunities to personalise support and activity in their community. All services need to be open to support this and ensure that people who wish to engage with their communities – no matter the size of that community, are able to do so.

We deliver Community care Services effectively, efficiently and jointly: One of the anticipated outcomes of integration is improved efficiency although this is only likely after a period of redesign and improving outcomes. The Highland Partnership has embarked on a considerable programme of redesign using a number of tools such as LEAN, PDSA, Kaizen events, and small tests of change. All of these are geared towards improving quality by reducing waste and duplication and managing the variation that creates additional work. There is a need to ensure that communities or departments or indeed teams undergoing

change are committed to testing out new ways and can realise the benefits to enable the change to deliver sustainable improvements. The Strategic Commissioning Approach puts all partners and stakeholders from all sectors at the heart of the redesign, building ownership and capturing solutions. This enables small tests of change which can then be spread further or which can grow within a community. This recognises that one size does not fit all and has proven to be a more sustainable approach.

The Partnership Agreement that outlined the integration of Health and Social Care was supported by a five year plan. This reflects the need for continual improvement work to evidence the outcomes that have been agreed and that are desired by the people of Highland.

Older People's Delivery Plan Update as linked to Adult Balanced Scorecard				
Long Term Outcomes	Intermediate Outcomes	Indicators Adult Balanced Scorecard (OPIG)	Targets	2014/15 Outcomes
19b People are healthy and have a good quality of life	People's health needs are met at the earliest stage and at the most local level possible	Adult Balanced Scorecard Ind. No. 1 Providing targeted Reablement services through Integrated District Teams	40% of people receiving Reablement interventions do not require ongoing care interventions after initial 6 weeks	2014/15 data not yet available.
	People's health needs are anticipated and planned	"Adult Balanced Scorecard Ind. No. 5 Increase the age of admission of older people to long-term residential and nursing care"	Increase % in older age groups	A total of 680 admissions in 2014/15 65-74 – 10.29% 75-84 – 34.12% 85+ - 55.59%
		SW4 SPI SOLACE Percentage of adults satisfied with social care or social work services	Comparison against national trend These are based on annual published data and represent previous years data	54% 2013/14. Scottish average 55%
		SW5 SPI SOLACE Net Residential costs per Capita per week for Older Persons (over 65)	Comparison against national trend These are based on annual published data and represent previous years data	£436.93 (awaiting audit verification). Scottish average £368.30.
People are supported and protected to stay safe	People are supported to stay safe through the operation of our policies and procedures	Adult Balanced Scorecard Ind. No. 14 Improve people's perceptions of their levels of safety	Increase from baseline of 92.9%	96.7%
People are supported to maximise their independence	People remain at, or return, home with appropriate support	SW1 SPI SOLACE Home Care costs per hour for people aged 65 or over	Comparison against national trend These are based on annual published data and represent previous years data	£30.07 2013/14. Scottish average: £20.25

		SW3 SPI SOLACE Percentage of people aged 65 or over with intensive needs receiving care at home	Comparison against national trend These are based on annual published data and represent previous years data	21% for 2013/14. Scottish average 35%
	Carers feel able to continue in their caring role	Adult Balanced Scorecard Ind. No. 27 Increase the number of Carer Support Plans through the Highland Carers Centre	Increase 1 st year of operation 2012/13 63 care plans 2013/14 208 care plans Target for 2014/15 250 care plans	364 care plans during 2014/15
		Adult Balanced Scorecard Ind. No. 29a Increase the number of new requests for information through the Highland Carers Centre service	Increase from baseline of 393 2012/13	1425 requests for information during 2014/15
		Adult Balanced Scorecard Ind. No. 28 Increase the proportion of available placements within residential care homes to support intermediate care.	Increase from baseline	This is linked to redesign at local level with alternative models of intermediate care being tested
		Adult Balanced Scorecard Ind. No. 25b number of respite bednights provided 65+	Maintain 2010/11 levels of provision - 9975	10,011 bed nights in 2014/15
		Adult Balanced Scorecard Ind. No. 26b number of respite dayhours provided 65+	Maintain 2010/11 levels of provision 78,857 day hours	78,032 hours provided in 2014/15 A review of respite in all it's forms is underway to rectify any anomalies in data collection and definitions
		Adult Balanced Scorecard Ind. No. 29c Increase the number of carers in receipt of training by the Highland Carers Centre service	Increase from baseline – 70 carers	197 carers in 2014/15
		Adult Balanced Scorecard Ind. No. 29b Increase the number of peer support sessions facilitated by the Highland Carers Centre service	Increase from baseline - 61	106 sessions during 2014/15
	People have access to appropriate housing which maximises their independence and wellbeing	Adult Balanced Scorecard Ind. No. 16b Number of enhanced telecare packages 65+	Increase from baseline – 248 in 2013	269 Redesign of Telecare and a re-launch with new technology being tested

		Adult Balanced Scorecard Ind. No. 17b Number of people receiving care at home service 65+	Increase from baseline- 2355 in April 2014	2407
		Adult Balanced Scorecard Ind. No. 18b Number of people receiving care at home service evenings/overnight 65+	Increase from baseline – 925 in April 2014	949
		Adult Balanced Scorecard Ind. No. 19b Number of people receiving care at home service weekends 65+	Increase from baseline- 1859 April 2014	1907
		Adult Balanced Scorecard Ind. No. 20 Number of hours of home care provided to older people 65+ per 1,000 population	Increase from baseline (254.8 March 2012)	254.1 @ March 2015
People and their carers are informed and in control of their care	People are in control of decisions that are made about their care and the care that they receive	Adult Balanced Scorecard Ind. No. 34b number of people receiving SDS option 1 65+	Increase from baseline levels – 83 in April 2014	135 people as at March 2015
		Adult Balanced Scorecard Ind. No. 62b number of people receiving SDS option 2 (65+)	First year of operation, baseline being established	50 people receiving Option 2 as at March 2015
	People know about the services we provide and how to access them	Adult Balanced Scorecard Ind. No. 39 Advocacy Highland – Independent Individual Advocacy Service	The Organisation to provide a Service to a minimum of 550 cases per each year of the Contract in place with NHS Highland and The Highland Council	710 cases in 2014/15
People are supported to realise their potential	People have access to training, employing and volunteering opportunities	Adult Balanced Scorecard Ind. No. 46 Increase, by age band, the number of people stating that they volunteer on a regular basis	Increase 2013 cumulative figure was 38%	16-24 – 35% 25-44 – 35% 45-64 – 39% 65+ - 46% Cumulative figure – 39%
	People have access to a range of community-based development opportunities	Adult Balanced Scorecard Ind. No. 47 Increase the number of community-based activities in each area	Increase	Update to be taken from Community Networkers evaluation for 2014/15

<p>People are socially and geographically connected</p>	<p>People do not become socially isolated</p>	<p>Adult Balanced Scorecard Ind. No. 33 People perceive themselves to be socially and geographically connected</p>	<p>Increase from baseline</p>	<p>74.1%</p>
<p>We deliver Community care Services effectively, efficiently and jointly</p>	<p>Care is delivered using joined-up, core processes</p>	<p>"Adult Balanced Scorecard Ind. No. 55 Improve service delivery through service review and redesign"</p>	<p>Number of RPIW's & Kaizen events completed (50 by March 2016) No. of certified lean Leaders (13 by March 2015)</p>	<p>31 @ March 2015 19 @ March 2015</p>
	<p>Decisions about the allocation of resources are made jointly</p>	<p>Adult Balanced Scorecard Ind. No. 60 The number of people who have their hospital discharge delayed</p>	<p>no hospital discharges delayed by 4 or more weeks (by April 2013 then 2 weeks by April 2015)</p>	<p>49 @ March 2015</p>

Highland Community Planning Partnership - Single Outcome Agreement

Report on Environmental Outcomes for 2014/15

The Board is invited to note the progress which has been made during the year to 31st March 2015 as set out in the table below. In general significant progress has been made across the range of improvement/targets set out in the Single Outcome Agreement for the period to the end of March 2019. This is in spite of the challenges of achieving this during a period of declining resource availability – time and money. As will be noted a number of the targets have been achieved or even surpassed.

Stakeholders across Highland are engaged in many formal and informal ways. In particular the Highland Environment Forum has evolved to:

- Foster and coordinate activity on environmental matters, both within and at the Highland level
- Take forward relevant actions identified in the Single Outcome Agreement and be a valuable source of practical advice on the joint delivery of Single Outcome Agreement outcomes
- Identify and respond to emerging environmental agendas and provide a link between local groups and national strategies, action plans and reporting procedures
- Raise awareness and promote good practice on environmental issues across Highland

The Forum meets formally twice a year but is also used as an ongoing communication vehicle and has developed a number of working groups taking forward action on a range of issues including – biodiversity; invasive non-native species; wildlife crime; development of a Highland Land Use Strategy; and, action to reduce the incidence of and effectiveness of fighting wildfires. Particularly large events have been held in relation to Biodiversity, Carbon Clever, Wildlife Crime and Invasive Non-native species management.

I would draw your attention to the following achievements/issues:

Wildlife Crime – this has been a high profile issue nationally but particularly in the Highlands with the poisoning of a significant number of Red Kites and Buzzards in one incident on the Black Isle during 2014. Significant progress has been made, led by Police Scotland, which should lead to reducing the incidence of and increasing the detection of wildlife crime within Highland in future.

Highland Home Energy Initiative – the Home Energy Efficiency Project – Area Based Scheme was recognised at the UK level by being awarded “National Green Deal & ECO Project of the Year”. This project has reached around 1,111 homes in the Highlands. It has saved in excess of 63,000 tonnes of carbon, employed around 98 people and secured a £4.9 million contribution in ECO funding

Green Infrastructure – this refer to the creation of networks of natural and semi-natural areas, which are designed and managed for wide range of ecosystem services, biodiversity and active travel. It is increasingly recognised as beneficial to the prevention of physical and mental health inequalities. The ‘Space by the Water’ project in and around Merkinch is very likely to be included in the ERDF Programme to improve ‘green infrastructure’ in major towns and cities. ‘Space by the Water’ will improve active travel routes between Merkinch and the city centre, and improve and promote access to Merkinch Local Nature Reserve.

The Plantation Community Association formally opened a new play area, mountain bike track and fitness area within the most deprived area in Fort William. This green infrastructure project was funded by Highland Council and Heritage Lottery Fund, but was led by the Community Association.

Green infrastructure is being recognised as a key component of the new suite of Highland Local Development Plans.

The Scottish Rural Development Programme 2014-20 – this national programme jointly funded by European and domestic funds is the primary public funding route for rural businesses and communities. It was launched early in 2015. It will be a key component in delivery of a wide range of environmental and other outcomes within the Single Outcome Agreement. It includes the following schemes: the Forestry Grant Scheme; the Agri-Environment Climate Scheme; the Environmental Co-operation Action Fund; Less Favoured Areas Support Scheme; New Entrants Scheme; the Crofting Agricultural Grants Scheme; LEADER; and the Broadband Scheme.

In conclusion, under the auspices of the Highland Environment Forum, there is significant partnership activity underway to achieve the environmental outcomes set out in the Single Outcome Agreement. A number of the improvements/targets set out there have been achieved, most are on target for achievement and only a few are not progressing or will not be achieved. The latter in particular will be pursued during the 2015/16 year.

George Hogg
Scottish Natural Heritage

9.4 Table 18 : Delivery plan for environmental outcomes

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
<p>The environment will be managed sustainably in order to optimise economic, health, natural heritage and learning benefits</p>	<p>The land, coast and marine area under designation will be maintained and the condition of designated features will be improved.</p>	<p>In 2013/14 the number of notified features within Sites of Special Scientific Interest, Special Protection Areas, Ramsar sites and Special Areas of Conservation was 1647 and 1621 of these had been assessed.</p> <p>In 2013/14 the % of features in 'favourable condition' within these designated sites was 79.6%.</p>	<p>The number Sites of Special Scientific Interest, Special Protection Areas, Ramsar sites and Special Areas of Conservation will be maintained.</p> <p>By 2016 all 1647 notified features within these designated sites will be assessed.</p> <p>80% of features into favourable condition by March 2016.</p>	<p>TARGET MET - The number Sites of Special Scientific Interest, Special Protection Areas, Ramsar sites and Special Areas of Conservation has been maintained.</p> <p>TARGET ONGOING - By 2016 all 1647 notified features within these designated sites will be assessed.</p> <p>TARGET MET - The % of features in favourable condition has increased from 79.6% in 2013-14 to 80.0% in 2014-15.</p>
	<p>Wildlife crime in the Highlands will be reduced through:</p> <ul style="list-style-type: none"> • Promoting and enhancing positive working relationships between multi-agency partners to ensure a collaborative approach to tackling wildlife and environmental crime in Highland. • Raising the profile of reporting mechanisms in relation to wildlife crime with a view to increasing confidence in reporting and enhancing quality intelligence gathering. • Maintaining specialist officers within Police Scotland to deal with wildlife crime. 	<p>There is currently no formal, multi-agency forum for addressing wildlife crime in Highland.</p> <p>There is currently no formal and co-ordinated approach to the reporting of wildlife crime in Highland.</p> <p>There are currently 8 wildlife crime liaison officers within Highland</p>	<p>An annual Wildlife Crime Conference will be co-ordinated, commencing March 2015. This will review on-going work and seek to address emerging trends and issues. By March 2016 an action programme will be developed that will address the issues raised</p> <p>A review of the various methods of reporting will be undertaken by March 2015. A plan to ensure that wildlife crime reports are efficiently co-ordinated will be developed and implemented by March 2016.</p> <p>The network of suitably trained and skilled WCLO's in Highland will be maintained and geographically spread so that reports of wildlife crime</p>	<p>TARGET MET - A Wildlife Crime Conference took place in March 2015 with positive feedback from all agencies in attendance.</p> <p>TARGET ONGOING - By March 2016 an action programme will be developed that will address the issues raised.</p> <p>TARGET NOT MET - A review of the various methods of reporting was not undertaken by March 2015.</p> <p>TARGET ONGOING - A plan to ensure that wildlife crime reports are efficiently co-ordinated will be developed and implemented by March 2016. Area commanders have all been briefed and are aware of the importance of Wildlife Crime and their responsibilities regarding Wildlife Crime. There is a clear, documented, command structure both within Highland & Islands Division and Police Scotland.</p> <p>TARGET MET - The network of suitably trained and skilled WCLO's in Highland has been maintained and geographically spread so that reports of wildlife crime can be effectively acted upon. There are now 20 Wildlife officers stationed across the Highland and Islands Division within all Divisional Business Areas. WCLO's were provided with training in July and further training is</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
			can be effectively acted upon.	planned for December 2015.
	<p>A Highland land use strategy will be implemented that will set out how to:</p> <ul style="list-style-type: none"> • Ensure the responsible stewardship of natural resources in the Highlands. Ensure that land-based businesses work with nature to contribute to the prosperity of the Highlands. • Ensure the responsible stewardship of natural resources in the Highlands. • Deliver more benefits to the people of the Highlands. • Better connect urban and rural communities to the land, with more people enjoying the land and positively influencing land use. 	<p>There is currently no Highland land use strategy.</p> <p>[There are a number of strategies that will inform a Highland land use strategy (e.g. the Scottish Forestry Strategy; the Scottish Biodiversity Strategy; River Basin Management Plans under the Water Framework Directive; Wild Deer: A National Approach etc.)]</p>	<p>A Highland land use strategy will be put in place by 2018 through a stakeholder process under the auspices of the Highland Environment Forum.</p>	<p>TARGET ONGOING - a stakeholder working group has been formed. The national Land Use Strategy is being reviewed and the implications of this for Highland are being assessed/monitored. Progress has been reported to and discussed with the Highland Environment Forum which has an overview of this work.</p>
	<p>Projects will be delivered to address the key strategic issues identified in the Highland Biodiversity Action Plan.</p>	<p>The Highland BAP (2011-2013)</p> <p>In 2013 projects were underway to address 3 of the 10 key strategic issues identified in the Highland BAP.</p>	<p>Review the current Highland BAP and produce a new BAP (for 2015-2020) by end 2014.</p> <p>Projects underway to address all key strategic issues identified in the new Highland BAP by end 2016.</p>	<p>TARGET MET - The current Highland BAP was reviewed and the new BAP (for 2015-2020) was approved in summer 2015.</p> <p>TARGET ONGOING - Projects to address the key strategic issues identified in the new Highland BAP will be underway by end 2016.</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
	<p>Projects to address priority Invasive Non-Native Species in Highland will be carried out.</p>	<p>In February 2013, the area of rhododendron infected National Forest Estate was <i>circa</i> 13,143ha with mature bushes being treated within 3,049ha of that area.</p> <p>In 2013 none of the four priority zones outwith National Forest Estate was under control.</p> <p>In 2013 there were no breeding mink in the control zone.</p> <p>In 2013 Invasive Non-Native Plant Species (INNPS) eradication programmes were underway in 3 catchments covered by the West Sutherland Fisheries Trust (18 sites), the Cromarty Firth FT (7 sites) and the upper and middle catchment of the Findhorn-Nairn-Lossie FT (12 sites).</p> <p>There is currently no rapid response mechanism for dealing with new INNPS.</p>	<p>National Forest Estate free from rhododendron by 2025.</p> <p>In 2016, three of the priority zones outwith National Forest Estate will have rhododendron clearance underway.</p> <p>No breeding mink in the control zone will be maintained in 2016.</p> <p>In 2016 the INNPS eradication programmes will be maintained and invasive plants will be kept at low levels or eradicated. A further 4 control sites will be established within the Cromarty Firth FT catchment area.</p> <p>By 2016 a rapid response mechanism will be in place to deal with newly established INNPS.</p>	<p>TARGET ONGOING - National Forest Estate will be free from rhododendron by 2025. Work on-going to refine the exact area of Rhododendron in the NFE. £6 million national control programme scheduled for the next 4 years starting from 2015/16.</p> <p>TARGET NOT MET - No progress on rhododendron clearance within three of the priority zones outwith National Forest Estate and no obvious means to achieve this. SRDP funding for rhododendron control and other woodland Invasive Species such as grey squirrel, amounts to £3 million per annum for all of Scotland. This is less than what is required and as it is provided through the SRDP, there is a risk that the funds will be distributed to individual, small sites rather than large areas of multiple ownership where control measures are likely to be the most effective.</p> <p>TARGET MET – There are no breeding mink in the control zone and this will be maintained.</p> <p>TARGET ONGOING - In 2016 the INNPS eradication programmes will be maintained and invasive plants will be kept at low levels or eradicated. There has been a significant reduction (or eradication) in invasive plant infestation intensity at all treated sites. A further 4 control sites will be established within the Cromarty Firth FT catchment area and funding is actively being sought to consolidate effort in existing treatment areas and to expand the number of affected catchments and sub-catchments to be targeted for invasive species control.</p> <p>TARGET ONGOING - By 2016 a rapid response mechanism will be in place to deal with newly established INNPS. This will be developed for all of Scotland, at the national level.</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
The effects of climate change in the Highlands will be minimised and managed	The development and use of renewable energy will be increased through investment in appropriate opportunities, particularly wave and tidal power.	In 2013 the current installed capacity of renewable energy was 1471 MW. In 2014 it was 5080 MW. (NB These figures do not distinguish between large and small schemes or between onshore and offshore).	The current 2017 target for installed capacity of renewable energy is 2908 MW. Three wave and tidal projects will be implemented by 2017.	TARGET MET - The current 2017 target for installed capacity of renewable energy is 2908 MW. This target has already been surpassed. THC is reviewing the target and the SOA will be updated accordingly. TARGET AT RISK - it is looking increasingly challenging for three wave and tidal projects to be implemented by 2017.
	A carbon neutral Inverness will be achieved in a low carbon Highland by 2025. The Highland Climate Change Declaration will be refreshed in line with other national programmes and there will be improved networking to better share, develop and implement good practice on climate change across all sectors.	The indicator organisations for this outcome are SNH and THC. In 2003-04, SNH set a target to reduce the 2000-01 CO2e emissions by 42% by 2019-20. For Highland the 2000-01 baseline was 987 tonnes CO2/year from work-related emissions. In 2011-12 the CO2/year from SNH work-related emissions was 640 tonnes i.e. a reduction of 35% for this time period. THC emissions base-line for 2011/12 was 63,374 tonnes CO2e.	SNH expects to achieve its 2019-20 target during 2014-15. SNH will achieve a reduction of CO2/year from work-related emissions of 50% between 2000 to 2020. Between 2011 to 2020, SNH will reduce work-related CO2e emissions by 23%, as well as what is achieved from decarbonisation of the grid electricity, public transport networks and other wider social changes. An update on THC carbon emissions will be presented to committee in November 2014. Indicative figures indicate a 6% reduction in CO2 emissions over the past two years. THC will reduce emissions by 21% by 2020 - this equates to a reduction in emissions of 1,901 tonnes CO2e per annum.	TARGET MET - SNH has reduced the carbon emissions from its own operations (throughout all of Scotland) by 49% since 2000, so reaching our 2002 target five years early. Our emissions fell from 2900 tonnes in 2000 to 1507 in 2014-15, with a fall of 25% since 2010-11. TARGET MET - An update on THC carbon emissions was presented to committee in November 2014. TARGET MET - The Council's carbon emissions decreased by 5% between 2011/12 and 2013/14 against a target of 3% per year. In 2011/12 Council emissions were 66,552 tonnes CO2 and in 2013/14 were 63,401 tonnes CO2. Data for 2014/15 will be presented to committee in November

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
		<p>There were 21 public, 3rd sector and private bodies signed up to Highland Climate Change Declaration before the review in 2013.</p> <p>Allocate £1 million of capital projects per annum from the Carbon CLEVER Highland Council capital budget allocation from 2014/15. These projects will be in-line with the Carbon CLEVER objectives.</p>	<p>The Highland Climate Change Declaration was refreshed and rebranded as the Carbon CLEVER Declaration in 2013/14. There will be 50 public, 3rd sector and private bodies signed up to Carbon CLEVER Declaration by September 2014.</p> <p>THC will monitor progress towards a Carbon CLEVER Highlands through a survey of Highland residents by 2015.</p> <p>For 2014/15, the full £1 million capital budget allowance is expected to be fully committed by October 2014 for in financial year spend. From 2015/16 this will include a £200,000 allowance for a Carbon Clever community grant fund.</p>	<p>2015.</p> <p>TARGET MET – The Highland Climate Change declaration was refreshed and rebranded as the Carbon Clever Declaration in 2013/14.</p> <p>TARGET MET - There are currently 66 organisations signed up to the Carbon CLEVER Declaration which was re-launched in April 2014.</p> <p>TARGET ONGOING – THC will monitor progress towards Carbon Clever Highlands through a survey of Highland residents in 2015.</p> <p>TARGET MET - the full £1million capital budget was allocated for 2014/15. A wide range of projects were funded including: cycle paths; LED street lighting; the UHI Low Carbon Institute; improving active travel facilities; installing solar powered real time bus stop displays; and an electric bus charging post. This £1million has attracted and enabled an additional £1.8m of match funding investment across the Highlands. A further £1 million has been allocated from the Highland Council's capital budget for 2015/16 and decisions are currently being undertaken on projects to be funded. £200,000 has been apportioned for the Carbon CLEVER community grant fund. This fund will enable communities to develop and implement projects which are important to them and that reduce carbon emissions. Arrangements around the Carbon CLEVER community grant fund have been formalised and applications are currently being received.</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
	<p>Carbon emissions from domestic dwellings will be reduced by:</p> <ul style="list-style-type: none"> Increasing the carbon efficiency of the Highland housing stock. Helping householders change their behaviour so that they use energy more efficiently. Reducing fuel poverty as a result of awareness-raising through good quality information and advice. 	<p>On 31st March 2014, 72% of the Highland Council domestic housing stock passed the Scottish Housing Quality Standard (SHQS).</p> <p>In 2013 there were zero private households receiving measures under the Home Energy Efficiency Programmes for the Highland Area-based Scheme.</p> <p>The estimate baseline CO2 emissions for domestic Highland properties in 2014 is modelled using Home Analytics v3 at 593,000 tCO2 pa.</p> <p>The number of unique Highland households where advice was provided in y/e 31st March 2014 was 4,801.</p> <p>In Highland, the EPC ratings of domestic dwellings is modelled using Home Analytics v3 at: A and B: 1,288 C: 22,039 D: 42,271 E: 25,506 F and G: 16,721</p>	<p>By December 2015, 100% Highland Council social housing stock will pass the SHQS.</p> <p>The target number of private households receiving measures under the Home Energy Efficiency Programmes for Highland will be: Area-based scheme year ended 30th September 2014 - 300 External wall insulation; Area-based scheme year ended 30th September 2015 - 500 External wall insulation; 500 Cavity wall insulation; Energy Assistance scheme year ended 31st March 2015 - 350 installs.</p> <p>Achieve 30,000 lifetime CO2 tonnes savings for year ended 31 March 2015 through mix of domestic renewable installs and energy efficiency measures in private homes; and implementing energy saving behaviours.</p> <p>Provision of energy saving advice to 4,850 unique households during the year end 31st March 2015.</p> <p>Review Home Analytics data modelling for Highland homes with an aim to improve the accuracy of model for EPC ratings by March 2018.</p>	<p>TARGET MET - By December 2015, 100% of Highland Council's social housing passed the SHQS excluding several hundred properties including tenant opt-outs.</p> <p>TARGET MET - The target number of private households receiving measures under the Home Energy Efficiency Programmes for Highland was: Area-based scheme year ended 30th September 2014 - 300 External wall insulation; Area-based scheme year ended 30th September 2015 - 500 External wall insulation; 500 Cavity wall insulation; Energy Assistance scheme year ended 31st March 2015 - 350 installs.</p> <p>TARGET MET – 53,000 lifetime CO2 tonnes savings (estimated) achieved through mix of domestic renewable installs and energy efficiency measures in private homes; and implementing energy saving behaviours. There were 282 Energy Assistance Scheme installs achieved at 30 April 2015.</p> <p>TARGET MET - More than 7,600 unique householders in Highland have received advice from Home Energy Scotland during 2014/15 on one or more of the following topics: domestic energy efficiency measures and behaviours; water advice; micro-generation advice.</p> <p>TARGET MET - There have been significant improvements made to Home Analytics: EPC Rating v3.1.1 at 2 May 15 A-B 1,701 C 22,551 D 41,375 E 26,528</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
				F-G 15,980 Unknown 0 Total 108,135 NO DATA PROVIDED
	<p>The number and severity of accidental wildfires will be reduced through increased awareness, pre-planning, incident liaison and engagement with stakeholders.</p> <p>SFRS will promote partnership working through the creation of wildfire groups and increase pre-planning in preparation of peak wildfire periods.</p> <p>Private land owners and managers will support SFRS through the identification of human resources and physical assets.</p>	<p>In 2013 there were 2 local wildfire groups known to the SFRS in Highland.</p> <p>In 2013 there were 120 wildfire plans held by Operations Control.</p> <p>There has been a Scottish Wildfire Forum in place for 10 years but it requires re-energisation following the creation of the Scottish Fire and Rescue Service</p>	<p>The number and location of active wildfire groups will be quantified by March 2015.</p> <p>In 2014/15 the SFRS will promote and collate the coverage of wildfire groups so they will be sufficient to deal effectively with accidental wildfires should they occur.</p> <p>In 2014/15 the number of local Wildfire plans held along with those submitted by stakeholders will be reviewed to ensure they are accurate, up to date and tested.</p> <p>The Scottish Wildfire Forum will be re-energised by October 2013. By 2014 the Forum will create strategic priorities and activities for Scotland - including for Highland - and these will relate to promoting wildfire reduction through specialist training, education, awareness raising and communication.</p>	<p>TARGET MET – There are still two known wildfire groups at Shildaig and Badenoch & Strathspey.</p> <p>TARGET ONGOING - Liaison with deer management groups has been constructive but to date no further wildfire groups have been identified through this avenue, the SFRS continue to promote the importance of having groups in Highland.</p> <p>TARGET ONGOING - The Deer management groups are compiling fire plans and will share these with the SFRS when complete. The original 120 wildfire plans held in Control have been continually reviewed and added to with approximately 200 plans now available. Operations Control are liaising with further landowners so that plans are in place plans and assets declared.</p> <p>TARGET MET - The Scottish Wildfire Forum has been re-energised and the Forum has created strategic priorities and activities for Scotland - including for Highland.</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
<p>People will have greater outdoor access and volunteering opportunities across Highland</p>	<p>The number of access/health related projects in Highland and/or in the 4 most deprived areas including Green Gyms and all abilities access will be increased.</p> <p>The Highland Core Path Implementation project (HCPIP) will be implemented and completed.</p> <p>There will be an annual increase in physical activity levels.</p>	<p>In 2013 there were approximately 2500 km of Core Paths in Highland Council area.</p> <p>In 2013 there was no baseline for the length of signed Highland Council Core Paths.</p> <p>In 2013 there was no baseline of the number of access projects in the 4 most deprived areas.</p> <p>In 2013 there was no baseline of the participation rate in access/ranger related events in the 4 most deprived areas.</p>	<p>Maintain the length of the core path network and improve the quality of these paths with both revenue and capital investment.</p> <p>Establish a baseline of the length of Highland Council Core Paths currently signed by 2015 and increase this by 20% by 2018.</p> <p>Establish a baseline of the number of access projects in the 4 most deprived areas by 2015 and increase this by 10% by 2018.</p> <p>Establish a baseline of the participation rate in access/ranger related events in the 4 most deprived areas by 2015 and increase this by 5% each year to 2018.</p>	<p>TARGET MET/ONGOING – The length of the core path network has been maintained. The improvement of these paths through revenue and capital investment is ongoing. The core path plan review in Caithness and Sutherland (reaching completion) is likely to add further core paths.</p> <p>TARGET MET/ONGOING – The length of Core Path Network is 2576 km. Currently 62% of the Core Paths are signed. This represents a total of 1606 km.</p> <p>TARGET NOT MET – There have been no access projects delivered in Deprived Areas.</p> <p>TARGET MET - 14 ranger events took place in the deprived areas in 2014/15 with an average of 37.4 attendees per event. This is mainly working with school from deprived areas.</p>
	<p>The Council will support allotments, especially in the 4 most deprived areas.</p>	<p>In 2013 The Highland Council supported 9 allotment sites, with 314 allotment plots.</p>	<p>By May 2015, the Council will review the allotment policy in the light of the Community Empowerment Bill and new improved targets will be set.</p>	<p>TARGET ONGOING - The Community Empowerment Bill has recently passed through the Scottish Parliament. THC is awaiting accompanying policy guidance and will review the allotment policy when this is available.</p>

Long Term Outcomes	Intermediate/Short Term Outcomes	Indicators & Baseline info	Improvement/Targets	Annual Report - 31st March 2015
	<p>The number of environmental volunteering opportunities will be increased in 4 most deprived areas.</p> <p>The number of people involved in environmental volunteering will increase.</p>	<p>The indicator organisations for this outcome are TfL, TCV and SWT.</p> <p>TfL created 536 environmental volunteer opportunities in 2013. Within this overall figure, 4 opportunities were taken up by people from one of the 4 most deprived areas.</p> <p>In 2013 TCV created 544 environmental volunteer opportunities in Highland. In addition, 376 opportunities were created through the green gym projects in Merkinch and 120 in Newcraigs.</p> <p>In 2013 SWT enabled 97.5 volunteer days worked.</p>	<p>In 2017, TfL will create 767 volunteer opportunities. This will include 41 opportunities being taken up by people from one of the 4 most deprived areas.</p> <p>TCV will seek to secure long term and sustainable funding to maintain and increase the number of volunteer opportunities they offer.</p> <p>In 2015 TCV will explore the possibility of developing a Service Level Statement with THC to deliver agreed volunteering targets in Highland.</p> <p>By May 2015 SWT will review the 'Canal College' programme, currently working well in the central belt canal systems and it will</p>	<p>TARGET ONGOING - In 2014 (Jan to Dec) TFL created 717 volunteer opportunities. In 2015 from January to June 2015 TFL created 331 opportunities. The number of opportunities within the deprived areas has not been quantified.</p> <p>TARGET ONGOING - TCV have established six new green gyms in the Highland Area: Lochaber, Strathspey, Inverness, Easter Ross, Wester Ross and Caithness. There are no major issues in relation to our ability to deliver and who we can link with to enhance that delivery, our only current issue is funding. SWT fundraising/management team are working to fill the funding gap and make this project happen.</p> <p>TARGET NOT MET - TCV have not developed a Service Level Statement with THC but will pursue this in the future.</p> <p>TARGET ONGOING - SWT have undertaken a great deal of planning in relation to the canal college programme in Highland and the central belt (employability/skills/healthy living/conservation outputs). A delivery plan and project objectives have been built with local and head office SWT and Scottish Canals staff that relate to the opportunities for delivery in Inverness. This is now in full draft</p>

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			<p>investigate development of same for the Caledonian Canal based at Muirtown, Inverness. Promotion and delivery on the edge of Merkinch. Aims - to increase employability and provide skills and motivation. Possible 12 people on 12 week rolling programme. Potential of 720 volunteer days per programme.</p> <p>2016-2018 continue to offer innovative and useful short term volunteering opportunities for mutual benefit to canal and community. Aim to increase volunteer days to 200 per annum in this period.</p>	<p>form and shows potential for a three year programme of canal college starting in Autumn 2016. SWT staff (including Falkirk based CEO and fundraisers) have been developing the plan to include full finance requirements and are now engaged in a series of targeted applications for funding.</p>