

AGENDA

Community Planning Improvement Board

23rd February, 2pm-4pm


VIA Teams


Agenda	
1. Welcome and Introductions	2.00 – 2.05
2. Previous Minute & Matters Arising	2.05 – 2.15
3. Shaping Future CPIB Priorities <i>Paper for consideration and agreement</i>	2.15 – 2.40
4. CPP Readiness for Public Service Reform agenda <i>Update from Kevin Anderson (Scottish Community Planning Network)</i>	2.40 – 3.05
5. The new model of Community Policing <i>Update from Tim Mairs (Police Scotland, ACC Local Policing)</i>	3.05 – 3.30
6. Public Service Reform Strategy and PSR Board <i>Update from Simon Mair (Scottish Government, Public Service Reform)</i>	3.30 – 3.55
7. AOB and DONM	3.55 – 4.00
8. Close	4.00


CPIB Meeting Minute

27th November, Via TEAMS



Attendance	Greg Colgan, Chair (SOLACE); ACC Tim Mairs (Police Scotland); ACC Catriona Paton (Police Scotland); Sarah Gadsden (IS); Paul Johnston (PHS); Jane O’Donnell (COSLA); Anna Fowlie (SCVO); Anthea Coulter (TSI); Lesley Kelly (TSI); Susan Webb (Directors of PH); Helena Gray (Audit Scotland); Liz Manson (CP Managers Network); Kevin Anderson (CP Managers Network); Mary McAllan (SG); Simon Mair (SG); Anthony Standing (SDS); Mark McAteer (SFRS); Emily Lynch (IS); Mark McAllister (PHS, for Item 3); Una Bartley (SG, for item 5); Simon Cameron (COSLA, for item 5)
Apologies	Julie White (NHS D&G); Shona Riach (SG); Blyth Deans (Audit Scotland); Neville Prentice (SDS); Matt Lockley (Scottish Enterprise)

	AGENDA ITEM	Action	Date																								
1.	<p>Welcome and introductions.</p> <p>The Chair welcomed all members, with a special acknowledgement to those who have recently joined the CPIB. He then set the context for the agenda, noting that the session would focus on shaping CPIB’s purpose and priorities for the period ahead, ensuring alignment with the wider public service reform agenda and maximising the Board’s contribution to improving outcomes for communities. He noted that discussion would begin with the paper on community planning’s role in prevention, which sets an important foundation for CPIB’s future direction, and would end with an update on the joint Scottish Government–COSLA workplan to ensure alignment with CPIB’s work.</p>																										
2.	<p>Previous Minute and Matters Arising</p> <div style="text-align: center;">  <p>Item 2 - CPIB Minute 15th May 20</p> </div> <p>The minute was endorsed as an accurate record of the previous meeting. Progress on the matters arising were noted as follows:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Action</th> <th style="width: 40%;">Progress Update</th> </tr> </thead> <tbody> <tr> <td>2. Matters Arising</td> <td></td> </tr> <tr> <td>3.iv. SG will share overview of SG data sharing workstreams including those relating to WFS.</td> <td style="text-align: center;">Complete</td> </tr> <tr> <td>3. National CPP Self-Assessment</td> <td></td> </tr> <tr> <td>i. COSLA/CPIB members support efforts to encourage all CPPs to participate in future self-assessments</td> <td style="text-align: center;">Ongoing – carry forward</td> </tr> <tr> <td>ii. AS to link in with IS to share learning/good practice</td> <td style="text-align: center;">Complete</td> </tr> <tr> <td>4. Fair Funding for the Voluntary Sector</td> <td></td> </tr> <tr> <td>i. Members to continue to highlight/endorse guidance</td> <td style="text-align: center;">Ongoing – carry forward</td> </tr> <tr> <td>5. Whole Family Support</td> <td></td> </tr> <tr> <td>i. SG to invite CPIB members to participate in further discussions re WFS and collaborative leadership.</td> <td style="text-align: center;">Complete</td> </tr> <tr> <td>6. Review of Community Empowerment Act</td> <td></td> </tr> <tr> <td>i. SG to invite CPIB members to engage in further discussions to help shape the role of place directors.</td> <td style="text-align: center;">Complete</td> </tr> </tbody> </table>	Action	Progress Update	2. Matters Arising		3.iv. SG will share overview of SG data sharing workstreams including those relating to WFS.	Complete	3. National CPP Self-Assessment		i. COSLA/CPIB members support efforts to encourage all CPPs to participate in future self-assessments	Ongoing – carry forward	ii. AS to link in with IS to share learning/good practice	Complete	4. Fair Funding for the Voluntary Sector		i. Members to continue to highlight/endorse guidance	Ongoing – carry forward	5. Whole Family Support		i. SG to invite CPIB members to participate in further discussions re WFS and collaborative leadership.	Complete	6. Review of Community Empowerment Act		i. SG to invite CPIB members to engage in further discussions to help shape the role of place directors.	Complete		
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<p>3.</p>	<p>Prevention and Community Planning Briefing</p>  <p>Item 3 - Prevention and Community Plan</p> <p>The Chair introduced the prevention briefing by thanking Mark for the significant work undertaken to revise the paper following comments at the previous CPIB meeting, noting that it provides an important starting point for the Board's discussions on future priorities.</p> <p>Mark McAllister (Public Health Scotland) presented the updated Prevention Briefing, providing an overview of changes made to the draft prevention paper since the previous CPIB. Updates included:</p> <ul style="list-style-type: none"> • A refined working definition of <i>prevention</i> (acknowledging the need to avoid circularity while retaining flexibility). • Clearer exposition of the purpose of the paper and stronger narrative about policy direction. • Inclusion of new national policy developments relevant to prevention (e.g., PSR, PHF, third-sector work). • Expanded return-on-investment section drawing on non-health public-sector examples. • Additional examples of practice from across sectors, added as appendices. • A consolidated visual summarising <i>asks of Community Planning Partnerships (CPPs)</i>. • Commitment to incorporate comments received from members, including recognition of work by Directors of Public Health. <p>The following themes were highlighted in the discussion:</p> <ul style="list-style-type: none"> • It was requested that mental-health prevention funding streams (for both adults and young people) be included, along with a stronger articulation of the risks associated with not investing in prevention. 																						

	<ul style="list-style-type: none"> • It was noted that including justice-focused prevention examples would be helpful, with Tim Mairs offering to share relevant examples for this purpose. • The importance of reflecting forthcoming developments linked to the new Child Poverty Plan and whole-family support was highlighted. • The need for CPPs to contribute local, place-based prevention examples to support a coherent national picture was emphasised. <p>Mark confirmed that he would incorporate all feedback into the paper, noting that while the document should remain iterative, it should not be subject to continual re-drafting. It was agreed that the updated paper would be re-circulated to the Board, and—once endorsed—shared more widely with partners to support collective understanding and build momentum across CPPs.</p> <p>Agreed Actions</p> <ul style="list-style-type: none"> i. Revise the prevention paper to incorporate comments raised, and reshare the revised paper with CPIB members 	<p>Mark (PHS)</p>	<p>Feb 2026</p>
<p>4.</p>	<p>CPIB Shaping Future Priorities</p>  <p>Item 4 - CPIB Shaping Future Prio</p> <p>The Chair noted that this was a timely moment to review CPIB’s priorities, reflecting both the increasing prominence of community planning within national strategies and CPIB’s role as a national partnership board supporting improvement and driving reform amid ongoing pressures. The accompanying discussion paper setting out proposals for the CPIB Future Priorities was introduced as building on previous engagement with CPIB members, including with statutory CP partners. Members were invited to comment on the proposals.</p> <p>The discussion highlighted the following themes</p> <p>a. Purpose and Focus</p> <ul style="list-style-type: none"> • Broad agreement on ambition but caution about balancing <i>strategic oversight vs operational improvement</i>. • Strong view that CPIB must continue to prioritise improvement, not only reform. • Recognition that national partners often perceive CPP performance as inconsistent—improvement work should address variation. <p>b. Membership & Representation</p> <ul style="list-style-type: none"> • Membership should be shaped around CPIB’s core focus on driving improvement, ensuring members bring the strategic leadership, challenge and capacity needed to support this. • The important role of the third sector, nationally and locally, was emphasised, with a reminder that its contribution must remain visible and not be marginalised in future arrangements. • Growing suggestion that Accountable Officer–level engagement across statutory CP partners is missing and may require a separate strategic forum— with agreement that it would be important to avoid creating unnecessary overlap with existing group. <p>c. Political and Board Oversight</p> <ul style="list-style-type: none"> • Strong appetite for strengthened and structured political engagement, not the current ad-hoc model. 		

	<ul style="list-style-type: none"> • COSLA welcomed the opportunity for greater political support and offered help in facilitating this. • Scottish Government noted that stronger visibility of feedback from all 32 CPPs would support political buy-in and help provide more coherent insight for national decision-makers. <p>d. Operating Model & Resourcing</p> <ul style="list-style-type: none"> • CPIB currently has 8 hours per year of formal meeting time—felt to be insufficient for ambitions discussed. • Recognition that resourcing for CPIB is currently limited and unstructured, with IS bearing most of the load. • Suggestion to share leadership of CPIB among partners in future to reflect the collective nature of the Board’s work. • Support for a jointly-funded model (Scottish Government + statutory partners), aligned with Verity House principles. • Agreement that improvement work must be sustainably resourced rather than relying on piecemeal secondees. • There was emphasis on using existing assets and expertise better, before seeking additional resource. • Proposal to revisit a national community planning portal as a “once-for-Scotland” digital solution, with IS noting a previous version ended when funding ceased and confirming they are open to exploring a refreshed solution where there is clear need, renewed interest from CPPs and guaranteed funding. <p>e. National–Local Interface</p> <ul style="list-style-type: none"> • Emphasis on strengthening the two-way flow between CPIB and all 32 CPPs so that the Board both reflects local insight and is responsive to local needs. • Recognition that clearer mechanisms are needed to ensure local experience and challenges can directly inform national priorities and wider reform activity. • Recognition that many challenges are shared across CPPs, underscoring the value of coordinated learning and more regular opportunities for national and local partners to come together and build collective momentum. • Proposal to convene CPP chairs annually to support stronger national–local alignment, shared learning, and consistent leadership across Scotland. <p>f. Success Measures</p> <ul style="list-style-type: none"> • Use existing national frameworks; avoid creating new indicators. • Ensure data is available at local level to show collective impact. • Focus on a small set of shared population-level outcomes with a long-term view. <p>Members were encouraged to continue contributing views beyond the meeting to ensure all perspectives were captured. Members were encouraged to send any additional comments or feedback by next Friday. The IS will then work with the Chair to review the full set of feedback, update the priorities paper, and recirculate to members. The intention is to reach a shared consensus on the updated approach, before finalising and agreeing the way forward.</p> <p>Agreed Actions</p> <ol style="list-style-type: none"> i. Provide further feedback on the discussion paper ii. Update the Priorities paper to reflect member feedback and circulate to members 	<p>ALL Chair/IS</p>	<p>5thDec Feb 26</p>
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<p>5</p>	<p>CP Shared Priorities Workplan – SG/COSLA</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Item 5a - CP- Shared Priorities Pla </div> <div style="text-align: center;">  Item 5b - PD_CPP Charter Poster.pptx </div> </div> <p>The Board received an update from the Scottish Government on the jointly developed Shared Priority Work Plan, which sets out four workstreams to strengthen community planning: accountability, legislation and guidance, collaborative leadership, and the Place Director role. The plan is intended as a flexible framework that will evolve in line with priorities and resources.</p> <p>Members were briefed on planned deep-dive work on statutory partner duties, proposals to streamline reporting and refresh statutory guidance, development of a collaborative leadership offer for CPPs, and enhancements to the Place Director role alongside a proposed Place Director–CPP Charter. Early engagement with statutory partners, COSLA and CPP networks was noted as positive.</p> <p>Key themes highlighted in the discussion included:</p> <ul style="list-style-type: none"> • Strong support for leadership development as a critical enabler of improvement and reform, with emphasis on practical, co-designed approaches that build on existing initiatives, involve a broad mix of partners (including business and the third sector), and avoid duplication. • Place Directors seen as pivotal for connecting local and national priorities, with members welcoming the idea of a formal charter to set mutual expectations and provide clarity. • Need for streamlined accountability and integration of locality planning into performance frameworks/accountability workstream. • Importance of inclusivity – ensuring business, third sector, and community voices are part of leadership and improvement initiatives. • Alignment and efficiency – avoid duplication by linking with existing initiatives and leveraging philanthropic funding where possible. <p>Agreed Actions</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; vertical-align: top;">i.</td> <td style="vertical-align: top;">Circulate the draft Place Director Charter for written feedback</td> <td style="width: 10%; text-align: center; vertical-align: top;">SG</td> <td style="width: 10%; text-align: center; vertical-align: top;">Dec</td> </tr> <tr> <td style="vertical-align: top;">ii.</td> <td style="vertical-align: top;">Return to future CPIB meeting to share details of the collaborative leadership when further developed</td> <td style="text-align: center; vertical-align: top;">SG</td> <td style="text-align: center; vertical-align: top;">2026</td> </tr> </table>	i.	Circulate the draft Place Director Charter for written feedback	SG	Dec	ii.	Return to future CPIB meeting to share details of the collaborative leadership when further developed	SG	2026		
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<p>10.</p>	<p>AOCB & DONM</p> <p>Health and Social Care Reform Oversight Board</p> <p>The Chair advised that he has been invited to participate in the Health and Social Care Reform Oversight Board in his capacity as CPIB Chair and will keep members updated on any developments. Future opportunities for CPIB representation in this space will be shared with members to ensure broad engagement.</p> <p>Dates for 2026</p> <p>These will be circulated in due course.</p>										
	<p>Close</p>										

Community Planning Improvement Board

Prevention Brief

Introduction

Scotland's communities and public services are facing substantial challenges. Our life expectancy is the lowest in Western Europe, and health inequalities are among the highest in the region. Many of our public services remain focused on dealing with the consequences of demand failure and avoidable harm, which leads to considerable human and financial costs.

We recognise that making lasting change is difficult. For over a decade, efforts have been centred on shifting public services decisively towards prevention, yet this has not consistently resulted in better outcomes. Nevertheless, there is renewed momentum for the 'prevention agenda', focusing on helping public services to address issues before they arise.

To achieve this, we need to rethink how we plan, fund, and hold our public services accountable for improving outcomes, with a stronger emphasis on prevention. By tackling the root causes of inequality, we can help reduce disparities and promote the long-term sustainability of public services.

Local partnerships—particularly Community Planning Partnerships (CPPs)—are central to Scotland's ambition to shift resources upstream and tackle the root causes, including action to tackle child poverty and delivery of the Scottish Governments [Child Poverty Delivery Plan](#).

Prevention is not an add-on; it must be hardwired into governance, budgets, and delivery systems across the range of community planning partners including health, local government, and the third sector.

A collective commitment to prevention can drive closer collaboration among community planning partners, national and local government, and communities, helping to build flourishing, thriving communities.

This briefing supports Community Planning Partnerships in prioritising prevention by:

- Providing a clear definition of prevention to help partnerships reshape their approach to planning and redesigning services for better outcomes.
- Reinforcing the vital role of community planning partnerships in reforming public services.
- Identifying opportunities to enhance the approach to prevention within local partnerships.
- Offering examples from Scotland and beyond where partners are rethinking how they work together and focus on prevention.

What is Prevention

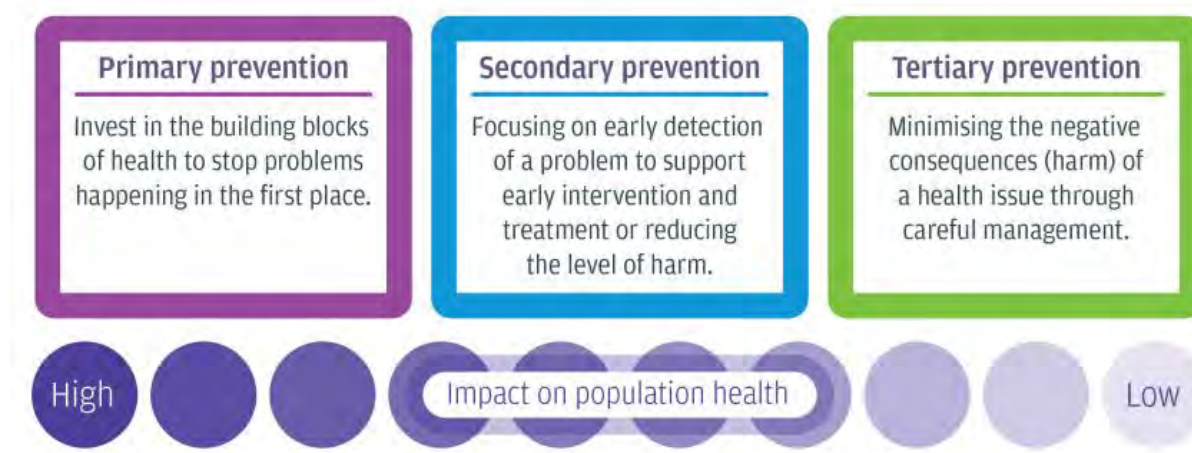
Prevention is about intervening early to make long-term, population level change to improve lives. It means stopping (preventing) the establishment, or escalation, of problems that lead to negative outcomes for people.

We know there is commitment to a preventative approach, and many examples of success, but we have not made sufficient change across our services and systems to ensure we prioritise prevention.

When people and organisations talk about prevention, they often use the same language to talk about different things. The Population Health Framework sets out a definition of prevention across different levels - primary, secondary and tertiary. This definition is

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supported by [partners](#) and can be adapted to reflect the contribution of the wider system to improve outcomes and addressing inequalities.



[Prevention is one of the most cost-effective interventions](#) the public sector can make in relation to improving population health and reducing inequalities. A collective focus on [prevention](#), particularly primary prevention, is important to reduce demand on our public services, putting them on a more sustainable long term footing.

Primary prevention - stopping problems happening in the first place - is the most effective intervention. From a population health perspective it [can be 3-4 times more cost-effective than investing in treatment](#), delivering savings across health, social care, housing, and welfare systems.

Prevention and Reform

[Audit Scotland](#) have been consistent in outlining the need to accelerate the pace and scale of reform across the public sector. While local systems must continue to react to immediate events and financial pressures, this must not distract from the need for broader reform of public services.

Prevention is central to the reform and sustainability of public services, improving population health and creating thriving communities. The [Public Service Reform Strategy](#) recognises that reactive spending will become unsustainable as pressures grow. It commits to preventative budgeting, redesigning accountability around shared outcomes and embedding prevention into how resources are allocated.

The [Population Health Framework](#) sets out the need to establish a prevention focused system and redesign our approach to the funding, planning, governance and accountability, of services and how we work with communities to improve outcomes.

This is consistent with the [Verity House Agreement](#) where Community Planning Partnerships are recognised as a critical mechanism for the alignment of resource locally, focussed on prevention and early intervention, and delivering shared priorities.

There is a growing [body of economic evidence](#) that supports the case for investing in prevention. Reforming public services – including how national and local government, the NHS, businesses, communities, and individuals work together – is dependent on thinking differently to achieve a shift to prevention.

Together they provide a clear policy focus for prioritising prevention and set out the importance of collective leadership and shared accountability with a refreshed focus on the role of Community Planning Partnerships who are best placed to:

- **Deliver upstream, place-based action** focused on early years, housing, income security, and healthy environments to reduce inequalities and improve long-term outcomes.
- **Reduce demand through prevention and early intervention** across health, social care and justice by shifting investment from reactive services to community-led supports.
- **Design and implement whole system approaches to improving outcomes** that join public health, NHS, local authority services and the third sector around shared population outcomes.
- **Implement Data-driven, evidence-based planning** and evaluation to target interventions where they will most reduce inequality and future cost pressures.

Prevention is a strategic priority for improved outcomes. It is not about preventing harm but as a key element in establishing, thriving, flourishing communities. The Community Planning Improvement Board has an important role in supporting that shift and working with partners to address the drivers of demand on public services and support closer integration of services to improve local outcomes and address inequalities.

Prevention Works

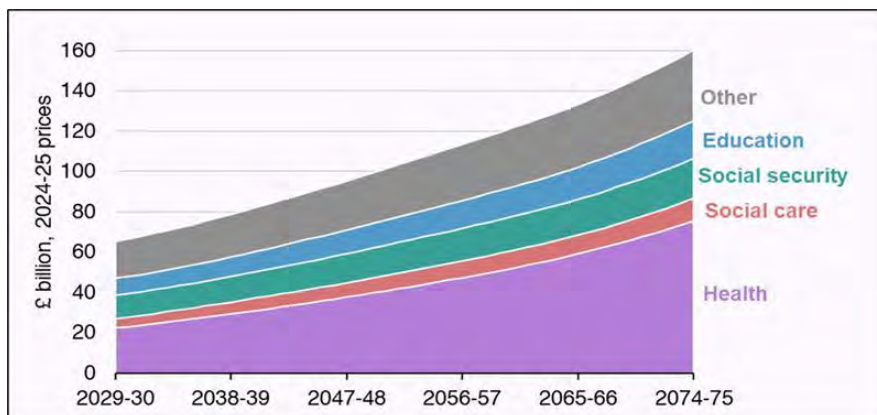
The Scottish Burden of Disease study has estimated that 35% of years lost to ill-health and premature mortality are preventable. Shifting investment to primary prevention is necessary if we are to reverse poor health trends, improve population health outcomes and deliver sustainable public services. This includes poor mental health which costs Scotland – on a conservative estimate - [£8.8 billion in additional expenditure every year](#). That figure could be dramatically reduced by implementing cost-effective, evidence-based mental health prevention initiatives.

Even though we know prevention can be the most cost-effective way to maintain the health of the population and tackle inequalities, concerns about upfront costs all too frequently lead more reactive, short-term responses, with [resources being targeted](#) towards immediate problems. This can result in the exclusion of longer-term initiatives and a failure to focus on beneficial, preventative investment. [For example](#):

- Investing in prevention can be significantly more cost-effective than in treatment, with an extra year of good health costing an estimated £3,800 via means of prevention, compared to £13,500 via treatment
- Reductions in preventable ill health could increase tax receipts, reduce welfare payments, and generate efficiencies. For example, a reduction of 10% in obesity prevalence could reduce annual spending on unemployment benefits by £400 million.
- The cost of lost productivity to the UK economy due to preventable ill health has been estimated to be nearly £70 billion per year.

Return on Investment

The Scottish Fiscal Commission has described how challenges in [funding healthcare](#) will become more acute over the next twenty-five years.



If current trends in population health aren't reversed, then demand for services will increase and healthcare funding will continue to increase as a proportion of the total Scottish budget. This will lead to significant pressures on Scotland's public sector.

Without a shift toward prevention, public services will become increasingly unsustainable and leading to deteriorating outcomes and widening inequalities. Prevention is a strategic priority.

We know prevention works in reducing demand and delivering a return on investment. There is good evidence that investment in primary prevention delivers substantial economic and social returns with case studies showing returns from £6.60 to £46 per £1 invested across housing, education, and community interventions. For example:

Intervention	Description	ROI (£ per £1 spent)	Key Benefits
Adapting Homes to Prevent Falls	Modifying homes to prevent serious falls	£34.80	Prevents injuries, reduces hospital admissions, saves social care costs
Cold Home Adaptations	Improving insulation and heating	£17.10	Reduces respiratory illness and winter mortality, lowers NHS and social care expenditure
Training Professionals to Give Physical Activity Advice	Brief interventions by trained staff	£23.70	Increases activity, lowers chronic disease risk and future healthcare costs
Free Leisure Services	Community-based physical activity schemes	£20.70	Improves health outcomes, reduces long-term demand

			on health and social care services
Early Years and Education Interventions	Programmes for child development and school readiness	£6.60 (median)	Reduces future costs in health, justice, and welfare systems
Co-location of Advice Workers in Medical Practices	Co-location of advice workers in medical practices	£39.00 (social and economic impacts)	improved health and wellbeing, less stigmatisation better and earlier access to services

Change is possible, but we need to work differently to deliver improvement at pace and scale to support the long-term sustainability of public services into the future, Community Planning Partnerships are central to that ambition. Examples of prevention focused collaborations from Scotland and across the UK are summarised in **Appendix A**.

Creating the conditions for prevention

It can be hard to adopt a more preventative approach. Community Planning Partnerships need to work together to create the conditions for local systems to focus on prevention. Community Planning Partnerships (CPPs) play a pivotal role in translating national priorities into locally tailored prevention actions.

By adopting a prevention-focused approach, CPPs can drive improvements in outcomes, reduce inequalities and support resilient communities, while ensuring resources are used efficiently and sustainably. Key enablers for Community Planning Partnerships to prioritise are summarised below:



The Community Planning Improvement Board will work with partnerships to strengthen its leadership and improvement support across these enablers, working with Scottish Government and national partners to provide support. Further information on these enablers is summarised in **Appendix B**.

Collaboration for Prevention

Fundamental to prevention is collaboration but we know that collaboration and system change are challenging and complex. Working with others and creating the right conditions for prevention is difficult but Community Planning Partnerships are key to delivering the necessary shift. The [Edinburgh Futures Initiative](#) has described seven collaboration challenges that are important if we are create the systems change to deliver on prevention.



As part of this approach, work being led through [the Scottish Prevention Hub](#) looks to address these challenges by applying a framework for collaboration based on a [four-principle approach](#). Only by looking to alternative and more effective way of working together can we strengthen collaboration and create the conditions for prevention in Scotland.

The Scottish Prevention Hub is a national partnership between Public Health Scotland, Police Scotland, and the Edinburgh Futures Institute at Edinburgh University. The Hub takes a whole-system public health approach focused on primary prevention, with a focus on the use of data and capacity building.

For further information visit: [the Scottish Prevention Hub](#)

Find Out More

Public Health Scotland is the lead national body for improving and protecting the health and wellbeing of all of Scotland's people. Directors of Public Health provide public health leadership in local systems, including Community Planning. Focusing on prevention and early intervention, we aim to work together as a public health system – nationally and locally - to increase healthy life expectancy and reduce inequalities by responding to the wider determinants that impact on people's health and wellbeing and an increased focus on prevention.

For further information visit [Public health Scotland](#)

Appendix A: Delivering Prevention

Scotland and the UK has firm foundations to build from, with work underway to strengthen collaboration and support local systems deliver a prevention focus. This includes innovative programmes to address challenges to prevention, focus on innovation or focus on collaboration. Examples of preventative programmes from across Scotland and the UK are summarised below:

Initiative	Purpose	Key Features / Focus	Participating Councils / Areas	Further Information
Planet Youth – Scottish Prevention Model	Reduce youth substance use and improve wellbeing through environmental change	Data-led collaboration, Community coalitions, Upstream thinking, Protective factors	Highland, Angus, Clackmannanshire, Argyll & Bute, Dundee, West Dunbartonshire	https://www.winningscotland.org/planet-youth
Whole Family Approach	Integrate services around families to improve outcomes and reduce poverty	Community-based approach, Service integration, Toolkit for planning	Implemented across Scotland via Community Planning Partnerships	https://thepromise.scot/
Gateshead Council – The Liberated Method	Bespoke support for individuals through relational casework	Individual empowerment, Caseworker-led, Focus on long-term goals	Gateshead Council	https://www.gateshead.gov.uk/article/14166/Liberated

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Collaboration for Health Equity in Scotland	Reduce health inequalities through local partnerships and shared learning	Local plans, Overcoming barriers, Dedicated learning system	Aberdeen City, North Ayrshire, South Lanarkshire	https://www.instituteofhealthequity.org/
Changing Futures Programme	Improve outcomes for adults facing multiple disadvantages	Whole person approach, Partnership working, Data-driven policy	15 local partnerships across England (not Scotland-specific)	https://www.gov.uk/government/publications/changing-futures
Fairer Futures Partnerships	Support families in poverty through collaborative local initiatives	Child poverty reduction, Service reform, Expansion to multiple councils	Inverclyde, Clackmannanshire, Dundee, Glasgow; expanding to Aberdeen City, East Ayrshire, North Ayrshire, Perth & Kinross	https://www.gov.scot/policies/poverty-and-social-justice/
Clackmannanshire Voice Led Transformation Space	Drive system reform and prevention to reduce failure demand	Prevention focus, leveraging funds, Aligning local resources	Clackmannanshire	https://www.clacks.gov.uk/
VOW Project	Address drivers of violent	Peer mentors working with young people who are either	Edinburgh	VOW Project – Police Scotland - Community Justice Scotland

COMMUNITY PLANNING IMPROVEMENT BOARD PREVENTION DRAFT VERSION 2

	offending behaviour.	involved in criminal behaviour or the criminal justice system.		
Greater Manchester Model	Shift from reactive to relational public services with integrated place-based teams	Geographic alignment, Leadership, Shared resources, Tackling barriers	Greater Manchester	https://www.greatermanchester-ca.gov.uk/
Community mental health and wellbeing support	Community-based mental health and wellbeing support for children, young people and their families.	Whole system support and services focused on prevention and early intervention.	Scotland	Wellbeing and prevention - Mental health - gov.scot

Appendix B: Prevention and Community Planning Enablers

Integrating Prevention into Local Outcome Improvement Plans

- Position prevention as a central pillar in Local Outcome Improvement Plans (LOIPs), with explicit prevention indicators and measurable targets related to population health and inequality reduction.
- Ensure LOIPs clearly demonstrate investment in early intervention and upstream supports, enabling systematic tracking and monitoring of prevention efforts and their impact over time.

Strengthening Accountability and Reporting Frameworks

- Develop streamlined assurance and reporting frameworks that prioritise outcomes and improvements, rather than excessive input or process reporting.
- Introduce shared accountability mechanisms, including joint reporting and independent evaluation, to monitor prevention progress and drive continuous improvement across partners.

Embedding Prevention in Funding and Spending Plans

- Reprofile and consolidate funding arrangements to enable local flexibility, allowing partners to deploy resources for prevention rather than managing fragmented, ring-fenced budgets.
- Establish pooled, multi-year prevention budgets across health, social care and community services, offering the certainty needed to fund programmes that reduce demand and address inequalities over the longer term.
- Protect and prioritise prevention spending, with robust evidence of long-term savings and positive outcomes from the shift to prevention-focused investment.

Enhancing Governance and Performance Monitoring

- Embed prevention priorities within performance frameworks, using interim metrics to track progress and inform decision-making.
- Simplify governance structures to focus on delivery and results, supporting agile response to local needs and enabling effective partnership working.

Fostering Learning and Innovation

- Promote a culture of learning by facilitating information sharing and collaborative piloting of innovative prevention models.
- Encourage the evaluation and scaling of successful interventions, supporting the adoption of best practice across all CPP partners.

Developing Collaborative Leadership and Culture

- Strengthen joint leadership across councils, NHS, police, third sector and communities, fostering a shared commitment to prevention and systems thinking.
- Support workforce development and place-based capacity building to sustain prevention activity and respond effectively to local challenges.

Adopting Prevention-Focused Funding Models

- Implement commissioning approaches that incentivise preventative outcomes, with a clear role for voluntary and community organisations in delivering early help and resilience-building activities.
- Ensure funding models empower grassroots organisations and embed lived experience into the design and delivery of interventions.

Investing in Shared Data Platforms for Improved Decision-Making

- Develop shared data infrastructure and analytics platforms across CPP partners, enabling the identification of high-impact interventions and tracking of population trends.
- Establish common evaluation frameworks to strengthen the fiscal case for prevention and redirect spending to interventions with proven effectiveness in reducing inequalities.

CPIB – Shaping future priorities

Discussion Paper – Updated February 2026

Introduction

Scotland's public services are operating in a profoundly challenging environment, shaped by persistent inequalities, demographic shifts, climate pressures, and intensifying financial constraints. Despite the Christie Commission's 2011 call for transformational change through prevention, partnership, people, and performance, many of its ambitions remain unrealised. The COVID-19 pandemic exposed both the resilience and fragility of public services, highlighting the importance of community collaboration while revealing systemic vulnerabilities. In the post-pandemic landscape, services face growing backlogs, capacity constraints, and uneven recovery trajectories, with the Auditor General and Accounts Commission highlighting operational and financial stress across sectors.

Health inequalities remain stark, with life expectancy and healthy life expectancy significantly lower in deprived areas, and the burden of disease projected to rise sharply. Climate change compounds these challenges, posing long-term risks to public health, infrastructure, and service delivery. Financial sustainability is now a pressing concern. The Scottish Fiscal Commission projects a widening gap between funding and spending, exacerbated by an ageing population and declining health outcomes. Public sector organisations report significant budget shortfalls, and confidence in the viability of finances is critically low. Many are increasingly reliant on short-term measures such as raising taxes, cutting services, and spending reserves—yet service quality continues to decline, particularly in areas crucial to preventative care.

The Scottish Government's Public Service Reform Strategy acknowledges these issues and aims to streamline structures and shift resources towards prevention. However, the scale of transformation required is substantial. Without accelerated reform and deeper collaboration across sectors, the sustainability of vital public services remains at risk.

In this context, community planning partnerships (CPPs) are more important than ever. They are uniquely positioned to drive systemic change for citizens and communities through collaborative approaches that integrate local knowledge, voluntary sector contributions, and public service delivery.

Yet the current environment poses significant risks and challenges for community planning. Systemic issues such as duplication, declining public satisfaction, differing levels of partnership maturity across Scotland, and a lack of progress on prevention—acknowledged in the Public Service Reform Strategy—can erode trust and shared purpose among partners. Different accountability, governance and reporting arrangements are not conducive to collaboration, particularly within a local CPP context where partners prioritise national targets over shared outcomes. Financial rigidity, particularly in budgeting processes, acts as a barrier to shifting resources towards preventative spend. This disincentivises collaborative efforts that require pooled resources or long-term investment, especially when organisations are focused on short-term survival.

Moreover, reform efforts are often siloed within individual policy areas such as health or education, limiting the potential for integrated approaches. Scottish Government's Public Service Reform strategy, now being implemented, is intended to provide a clearer roadmap for public service reform, helping to reduce unintended consequences across the system and supporting national partners to understand how their statutory responsibilities fit within the wider reform landscape.

Legislative and operational constraints further hinder innovation, while resource and capacity limitations challenge the public sector’s ability to sustain transformation efforts. Stronger mechanisms are needed to ensure national policy and system design enable, rather than restrict, place-based collaboration. Strengthening the interface between national and local systems—ensuring insight flows both ways—is essential if public service reform is to be meaningful and deliverable at local level.

The Role of the Community Planning Improvement Board

The **Community Planning Improvement Board** provides national leadership to enhance the coherence, effectiveness and impact of community planning across Scotland. It brings together senior officers representing Community Planning partners to align national ambitions with local delivery, champion preventative approaches, and shape a more consistent and collaborative system.

CPIB strengthens Scotland’s public service reform landscape by:

- Providing a national platform where CPPs, partners and government can share learning, coordinate activity and build collective ownership of reform.
- Supporting improvement by promoting flexible, proportionate, context-sensitive approaches that reflect the varying maturity of CPPs.
- Acting as a system interface—surfacing local barriers, escalating issues arising from national policy or governance arrangements, and working with partners to resolve them.
- Advocating for integrated, collaborative approaches and enabling conditions such as joint resourcing, community-centred design and preventative investment.

By strengthening these enabling conditions, CPIB helps ensure that community planning can play a decisive role in shaping sustainable, preventative public services.

CPIB Purpose

The CPIB provides strategic leadership and national coordination to strengthen community planning across Scotland. It serves as the authoritative voice on community planning ensuring that national commitments to community planning, as set out in the Public Service Reform Strategy, Population Health Framework, and Verity House Agreement, are translated into meaningful local action. By fostering a two-way flow of insight and influence with all 32 CPPs, the CPIB supports system-wide improvement, resolves tensions between national and local priorities, and helps create the conditions for effective, collaborative, and preventative public services at local place level.

Objectives

To fulfil its purpose, it is proposed the CPIB will focus on four core objectives. Collaborative reform and multi-agency transformation are *longer-term objectives*. The initial emphasis of the CPIB will be on strengthening improvement activity and building the foundations for reform. Reform ambitions will be developed over time as capacity and system conditions evolve.

1. National Leadership and Strategic Influence

- **Serve as the recognised national voice on community planning**—trusted by CPPs and the Scottish Government to influence and coordinate activity, share learning, and provide insight.
- **Lead the strategic alignment of community planning with national reform agendas**, ensuring CPPs are equipped to embed these agendas within local plans and places and give practical expression to national commitments.
- **Act as a mechanism for shared accountability**, where all partners will hold each other collectively to account, ensuring that commitments to community planning are honoured through joint ownership, constructive challenge and collaborative problem-solving.

2. Engagement and Co-ordination

- **Strengthen direct links with all 32 CPPs to ensure a two-way flow of insight and influence**, including consulting CPPs on priorities and work programmes to reflect diverse local needs.
- **Coordinate national activity across CPPs**, with CPIB members ensuring they have the right people and resources in place within local CPPs to support effective community planning and represent the collective voice of the sector.
- **Act as a broker between national and local priorities**, helping to resolve tensions and create an authorising environment where Scottish Government sponsorship supports effective engagement by appropriate public bodies in community planning.
- **Develop a structured approach to political oversight**, to ensure visibility, alignment, and support for the CPIB's work.

3. Support, Learning and Improvement

- **Enable effective and more consistent community planning across Scotland**, helping CPPs to identify and address areas for improvement.
- **Act as a support mechanism** by helping partners within a CPP share resources, blend capabilities, prioritise prevention, and improve community participation.
- **Identify nationally significant issues and coordinate targeted interventions** to promote improvement and consistency.
- **Capture, share, and scale learning from across Scotland** to drive improvement in community planning practice.

4. Collaborative Leadership, Reform and Advocacy

- **Foster, model and enable collaborative systems leadership across CPPs** and local places, supporting a culture of shared responsibility and joint delivery.
- **Identify and progress multi-agency reform opportunities**, particularly where statutory duties are shared across sectors and where support is needed to unblock progress or redesign service delivery models.
- **Help partners identify and address barriers to collaboration**, including legislative or organisational constraints, and advocate for necessary changes with the Scottish Government and other partners.

CPIB Membership

CPIB will build on its strong existing membership by aligning it fully with the Board’s strengthened, improvement-focused purpose. Members will be expected to actively contribute with intent and authority—both within CPIB and across their organisations, sectors and CPPs—and to collectively bring the skills needed for strategic leadership, system influence, constructive challenge, collaboration and practical engagement. As CPIB moves into a more delivery-oriented phase, every member will have a clear responsibility to champion its priorities, leverage their organisational and sectoral reach, and play an effective role in wider public service reform. Strengthening expectations of active participation and shared ownership will ensure the Board has the leadership capacity required to drive improvement across the community planning system.

Chairing and Secretariat Arrangements

The CPIB will continue to be chaired by SOLACE for the next year, ensuring continuity and stable leadership as the Board transitions to its strengthened improvement-focused role. During this period, a review will be undertaken to consider the potential rotation of the Chair among statutory partners, with the CPIB determining the outcome of this review. Secretariat support will remain with the Improvement Service to ensure consistency, reliability, and the retention of organisational knowledge as the CPIB’s work programme develops. These arrangements will provide a steady operational foundation while wider governance and engagement structures are enhanced.

Establishment of a Chief Officers Strategic Group

To address a significant gap in current arrangements, CPIB will establish a twice-yearly Strategic Group bringing together the senior accountable officers of statutory community planning partners. At present, there is no forum in Scotland where these accountable officers meet collectively to exercise their shared statutory responsibilities for community planning, despite each holding legal duties that cannot be delegated. Creating this group will strengthen collective ownership and provide visible leadership from statutory partners, offering a space where senior accountable officers can set expectations, unblock barriers that sit above operational level, and reinforce the authorising environment needed for effective collaboration locally. Its strategic, infrequent nature ensures senior leaders can demonstrate commitment without adding unnecessary burden. The group will also support joint accountability for the CPIB work programme, align expectations across organisations, and enable a structured two-way flow of information — allowing CPIB to escalate system tensions, highlight areas requiring progress, and secure shared action where senior-level responsibility is needed. This group is not intended to replace broader CPIB membership, but to provide the coherent, empowered space currently missing to drive whole-system leadership and will complement the political oversight arrangements set out later in this paper/below.

Political Oversight

There is a clear need for a more structured model of political oversight for CPIB that brings sustained focus from those with policy and resource authority. Oversight should extend beyond the First Minister, Deputy First Minister and COSLA President to include relevant Cabinet Secretaries with portfolios central to community planning, reflecting previous arrangements under the National Community Planning Group. It should also involve the Chairs of statutory community planning partners — including Health Board Chairs, the Chair of the Scottish Police Authority, the Chair of the Scottish Fire and Rescue Service Board, and the Chairs of other bodies with statutory duties in community planning — to ensure system-wide alignment at a political level. This political oversight group would convene annually. Existing forums, such as Verity House Agreement meetings, can help reinforce and strengthen this political leadership by providing regular opportunities to prioritise

community planning within established national–local engagement structures. A clear mechanism will be developed to bring local issues, barriers and opportunities from all 32 CPPs into political discussions, with defined roles to ensure local perspectives are consistently and meaningfully represented and that political oversight is informed by the system leadership provided through the Strategic Group.

Engagement model

The CPIB will strengthen engagement with all 32 CPPs by convening an annual CPP Chairs' event as a flagship leadership forum. This gathering will bring together leaders from across Scotland to share progress, explore variation in practice, and reinforce national–local alignment. It will also create a dedicated space for local insight to shape national direction, supporting a genuine two-way engagement model while recognising the diversity and strengths of local contexts. The CPP Chairs event would be scheduled so its outputs can feed into and inform the annual political oversight meeting.

To maintain transparency and ongoing connection, the CPIB will issue a concise bulletin following each Board meeting, providing timely updates and clear opportunities for CPPs to contribute. Together, these actions establish a more coherent and collaborative engagement approach, ensuring national ambition is meaningfully grounded in local realities.

Next Steps

Once the Board has formally agreed the key elements of the CPIB's future model—including its priorities, governance, membership, and engagement approach—the programme can move into the next phase of work. This will involve finalising a sustainable resourcing model, securing approval of an updated terms of reference that reflects the CPIB's future role, and developing the first CPIB work programme to drive delivery across the system. A clear timeline will also be established for standing up the Strategic Group and confirming the political oversight arrangements, ensuring that governance, capacity, and work planning are fully aligned for implementation.

Appendix 1 – Mapping to national strategies and local government transformation programme

1. Background

The recently published Public Service Reform Strategy and Population Health Framework include numerous references to community planning and the CPIB, which are summarised below.

(a) References to Community Planning in Public Service Reform Strategy

- CPPs are key to providing collaborative leadership to deliver better outcomes for people and places. CPPs are unique to Scotland and provide the structures needed for collaboration and to create joined-up services.
- SG will optimise the potential of CPPs to drive change in the near term.
- SG will strengthen expectations for joint working to meet the needs of communities - this means all partners are expected to share resources, blend capability and capacity, prioritise prevention and improve community and wider participation.
- SG will simplify the policy landscape to have fewer but more meaningful asks on CPPs and make it easier for CPP partners to share data to improve collaborative working.
- SG will work with regulatory and audit organisations to shift accountability mechanisms to both incentivise and require collaborative working.
- SG will trust and listen to local organisations, building on their tacit knowledge, to understand the priorities and concerns of local people and communities.
- SG will develop work with TSIs to strengthen third sector engagement with service re-design, collaborative commissioning and system leadership.
- SG will continue to improve the operating conditions for the third sector through Fairer Funding arrangements.

(b) References to Community Planning in Population Health Framework

- Central to collaborative working locally are CPPs. The VHA recognises CPPs as a critical mechanism for the alignment of local resource, focused on prevention and early intervention, and delivering our shared priorities. Realising the full potential of CPPs requires all partners that can contribute to community planning to play their part. This includes the meaningful involvement of the community and voluntary sector as an equal partner.
- Community Planning is identified as a key mechanism to strengthen collective leadership and shared accountability to improve local outcomes and address inequalities.
- The Framework calls for a refreshed focus on the role of CPPs to embed the Population Health Framework priorities in LOIPs and Locality Plans.
- CPPs are highlighted as essential planning mechanisms that, alongside Local Development Plans, help improve health outcomes by considering the physical environment and population needs

(c) References to CPIB in Public Service Reform Strategy

- SG will work with CPPs, the Scottish Community Planning Managers Network and the Community Planning Improvement Board to build the collaborative systems leadership, culture, infrastructure and capabilities to deliver the PSR Strategy aspirations under the Community Planning workstream.

(d) References to CPIB in Population Health Framework

- The CPIB is explicitly mentioned as a partner in strengthening collaborative leadership and sharing learning to drive improvement in community planning.
- The Framework commits to working with both the Community Planning Improvement Board and the Scottish Community Planning Network to support this effort

(e) Expectations re role of CPIB from PSR Strategy & Population Health Framework

- Build / strengthen collaborative systems leadership – *how does this sit vis a vis the role of the Scottish Leaders Forum, the Scottish Prevention’s Hub work on collaborative leadership and work SG are progressing under WFS shared via Mary McAllan’s presentation to CPIB – “SG will offer CP partners support to benefit from facilitated collaborative systems leadership development that will increase capacity and capability at all levels and will explore opportunities to strengthen support for third sector engagement in community planning”?*
- Build culture, infrastructure, capabilities to support CPPs to drive change and CP partners to share resources, blend capability and capacity, prioritise prevention and improve community and wider participation – *Would be good to understand what support CPPs would find most helpful from CPIB in this regard*
- Capture and share learning to drive improvement in Community Planning.
- Given the Framework calls for a refreshed focus on the role of CPPs to embed the Population Health Framework priorities in LOIPs and Locality Plans, is there a role for CPIB to support this? How might PHS (a CPIB Board member) support CPPs to do this?
- The Framework highlights CPPs as essential planning mechanisms to help improve health outcomes by considering the physical environment and population needs – is there a role for CPIB to support this?
- CPIB could act as a national exemplar of collaborative community planning, demonstrating how CPPs can deliver on Public Service Reform and Population Health priorities through integrated, multi-agency approaches. This includes showcasing best practice across Scotland's CPPs.
- Role to hold SG to account on behalf of CPPs for actions it has undertaken to progress as part of the PSR strategy, which relate to CP. For example:
 - SG will simplify the policy landscape to have fewer but more meaningful asks on CPPs
 - SG will make it easier for CPP partners to share data to improve collaborative working.
 - SG will work with regulatory and audit organisations to shift accountability mechanisms to both incentivise and require collaborative working.
 - SG will continue to improve the operating conditions for the third sector through Fairer Funding arrangements.

2. Opportunities for CPIB based on Solace/IS Transformation Blueprint and partners’ public service reform programmes

There is a gap in the Public Service Reform strategy regarding multi-agency collaboration, particularly involving statutory Community Planning partners. There is an opportunity for the CPIB to work with statutory partners to identify and act on shared statutory duties that require multi-agency collaboration. This could include exploring opportunities for joint service redesign, shared resourcing, and collective accountability

There is an opportunity for the CPIB to ‘hold’/own the multi-agency transformation/reform space at local place level. This could involve the following activities:

- Analysis of each sector’s / organisation’s transformation/reform programmes and plans, to assess whether there is reference to multi-agency collaboration with other Community Planning Partners and if so, what each sector/partner is committing to.
- Focused work by Board members to identify touchpoints / alignment between respective sectoral transformation/reform programmes and where this may present opportunities for collaboration at a local level and identify some tangible actions to progress.
- Aligned to the LG statutory duties & powers project, identify shared statutory duties that require a contribution from more than one CP partner and relevant Board members galvanise their organisation/sector to work with other relevant partners to identify pain points in the legislation that require to be addressed, undertake service redesign, including a focus on digital etc. CPIB could oversee/champion such work and help partners unblock any barriers. CPIB members could potentially identify a couple of multi-agency service areas ripe for re-design and get agreement from their organisation/sector to undertake redesign work.
- Continue to identify and address the barriers getting in the way of multi-agency transformation – this may involve making asks of SG and may involve Board members needing to have challenging conversations in their organisation/sector to get the commitment to address any barriers that they contribute to.
- Extract and share learning from existing multi-agency transformation work (e.g. Single Authority Model), with Board members galvanising their organisation/sector to scale/spread such work across Scotland. CPIB can exemplify how collaborative reform can be delivered at local levels, particularly where the Public Service Reform Strategy lacks explicit multi-agency direction.
- Continue to help shape the evolving narrative on public service reform, informed by practice.

3. Alignment of current priorities of CPIB to Public Service Reform Strategy & Population Health Framework

CPIB Priority Area	Public Service Reform Strategy	Population Health Framework
Financial Security for Low-Income Households	✔ Prevention, data use	✔ Tackles inequality
Wellbeing of Children and Young People	✔ Person-centred, collaboration	✔ Social determinants
Climate Change, Procurement and Funding Coordination	✔ System reform, collaboration	✔ Environmental determinants
Data Sharing and Digital Infrastructure	✔ Data-driven services	✔ Equity and Access
Sustainable Third Sector Funding	✔ Empowerment, prevention. Fairer Funding for third sector	✔ Community resilience
Flexible, multi-year funding	✔ Resource alignment	✔ Upstream investment
Streamlined accountability	✔ Shared outcomes	✔ Integrated systems
Reduced reporting burdens	✔ Efficiency	✔ Focus on outcomes

Appendix 2 – Key points from shaping discussions with local Statutory CPP partners

◆ Strategic and Structural Issues

- **PSR Strategy:** Concerns were raised about the lack of clarity and coherence in the Public Service Reform (PSR) strategy, particularly the tension between local collaboration and national shared services.
- **PSR Board:** Questions emerged about the role and membership of the PSR Board, with limited clarity on who has been invited.
- **Structural Tensions:** National agencies face challenges aligning with local priorities due to governance constraints, described as a “wicked issue” that must be central to CPIB planning.
- **Need for Contextual Narrative:** A narrative is needed to articulate the structural and contextual tensions—especially national vs local dynamics—to ground CPIB’s strategy in reality.

◆ Governance, Oversight and Accountability

- **Political Oversight:** CPIB should hold civil servants accountable, but a political group is needed to hold Ministers to account. A dual structure was proposed.
- **Chief Officers Group:** Support for forming a strategic group of statutory partner leaders, even if symbolic, based on past positive feedback.
- **Outcomes-Based Accountability (OBA):** CPIB should adopt an OBA approach aligned with the Programme for Government (PFG) to ensure consistent, measurable impact.
- **Accountability Gaps:** Unlike resilience partnerships, CPPs lack clear accountability structures. CPIB meetings should be challenging but constructive.
- **Performance Frameworks vs Collaboration:** National frameworks often override local collaborative efforts, which should be flagged as a barrier.

◆ Partnership and Engagement Models

- **Relationship Management:** A key account-style engagement model with CPPs was proposed to strengthen relationships, though concerns about increased demands and resourcing were noted.
- **Leadership Coordination:** Suggested removing duplication in leadership initiatives and creating a collective leadership institute.
- **Health Sector Engagement:** The Scottish Ambulance Service was highlighted as a strong ally for engaging the wider health system.

◆ Reform and Delivery Structures

- **Shared Services and ERP Platforms:** The shift to shared platforms like Oracle may divert national bodies from local partnership work.
- **Transformation Structure:** A layered structure was proposed:

- Programme for Government (PFG)
- CP Strategic Group
- CPIB as tactical delivery group
- Links to LRPs, RRP, and local partnerships
- **Strategic Commissioning:** Strategic leaders should be commissioned via PFG to direct CPIB delivery.

◆ Sector-Specific Contributions

- **Scottish Enterprise (SE) Role:** SE struggles to engage with CPPs due to its economic remit. A broader conversation is needed to clarify its role.
- **Citizen-Focused Reform:** PSR's focus on prevention and citizen services doesn't align well with SE's objectives.
- **Economic Angle in Pilots:** Incorporating economic perspectives into CPIB pilots could make SE's involvement more relevant.
- **Collaborative Systems Leadership:** SE's ecosystem involves different partners than traditional community planning, requiring a tailored narrative.

◆ Resource and Capacity Considerations

- **Authority and Resources:** CPIB must be adequately resourced and empowered to be effective.
- **Resource Allocation:** Current CP resources are considerable but under-leveraged; strategic redeployment could yield greater impact.
- **Openness to Shared Resources:** Willingness to explore shared resources and blended capabilities if objectives align.

◆ Thematic and Place-Based Focus

- **Community Wealth Building and Prevention:** These should be integrated into CPIB's remit and response to PSR.
- **Place-Based Focus:** Emphasis on making a tangible difference at the local level rather than remaining at the strategic or policy level.
- **Proportionate Universalism:** Maintain universal services while focusing resources on the most vulnerable communities.

◆ Final Reflections and Next Steps

- Progress depends on stakeholders' willingness to share risk.
- Focus efforts on the most deprived communities for maximum impact.
- If CPIB clarifies its strategic ask, senior leadership support will be pursued.

Public Service Reform - How Ready Are CPP's?

CPIB Update 23rd February 2026

Kevin Anderson, Assistant Director for Strategy, Policy
and Performance, South Ayrshire Council



The Ask

Across both strategies, CPPs are expected to:

- Lead prevention and early intervention
- Align resources around shared outcomes
- Strengthen community involvement
- Coordinate multi-agency action
- Address the social determinants of health (embed in LOIPS)
- Drive place-based change
- Build a culture of collaboration and shared accountability

Address the social determinants of health (embed in LOIPS)

Readiness Score



3.4

Not ready at all

Better input from a range of Health colleagues. Mostly seems limited to Public Health at the moment.

Leadership and buy in from Health colleagues

Proper regard to housing, especially private sector where we have fewer levers

Totally ready

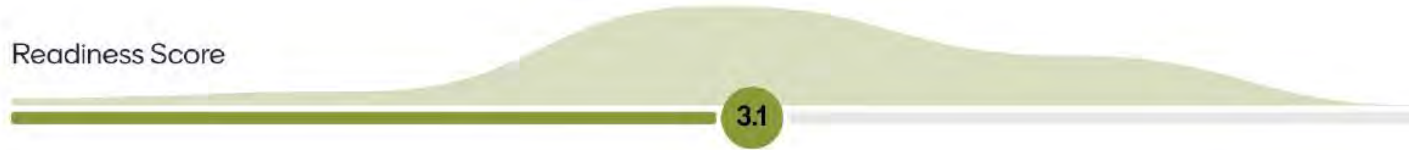
Leadership from NHS

South Ayrshire
**COMMUNITY
PLANNING**
Partnership



Coordinate Multi-Agency Action

Readiness Score



3.1

Not ready at all

Totally ready

We took a CPP approach during the pandemic and continued our CPP, so we've done it before. The relationships are critical though there is a challenge around accountability.

Are the right partners at the table? There must be gaps. But also some in the Act do not engage across all 32 CPPs.

it happens a lot in a number of key areas like ASB

Strengthen Community Involvement

Readiness Score



31

Not ready at all

Totally ready

need to align with all the other plans and ways for people to get involved e.g. CLD Plan

only ask once approaches

We need more resources and a clear brief. The role of CP and CPPs is becoming bloated

Drive Place-Based System Change



Not ready at all

Commitment from all CP partners to start thinking about aligning resources to 'place'.

Totally ready

Real drive for partners to take a leading role and not such a heavy reliance on councils. Also difficult when balancing national partners with local needs

Accountability

Readiness Score

1.7

Not ready at all

Totally ready

Full accountability across all public partners individually on their involvement. I think this is the key burden on local authorities

Shift focus from the council to all CPP partners- who are partners accountable to and what are consequences of non participation?

national inspection and audit bodies having a framework that assesses all partners contributions and involvement to CPPs

Accountability to be on long term plans, not short term indicators

South Ayrshire
**COMMUNITY
PLANNING**
Partnership



Align Resources Around Shared Outcomes

Readiness Score

1.6

Not ready at all

Totally ready

The CPP guidance already mentions shared resourcing/budgets but there has never been any accountability and doesn't really happen.

Setting budgets in isolation

Strategic leadership at top of national organisations to enter into this discussion in a meaningful way



Reflections and Discussion

Shared accountability and aligned budgets seem the furthest away

No area scoring particularly highly

Lacking an agreed shared purpose.

What can the CPIB do to support?

Prevention and early intervention

Statutory Guidance - opportunity to tackle barriers

CPIB Meeting
23rd February 2026

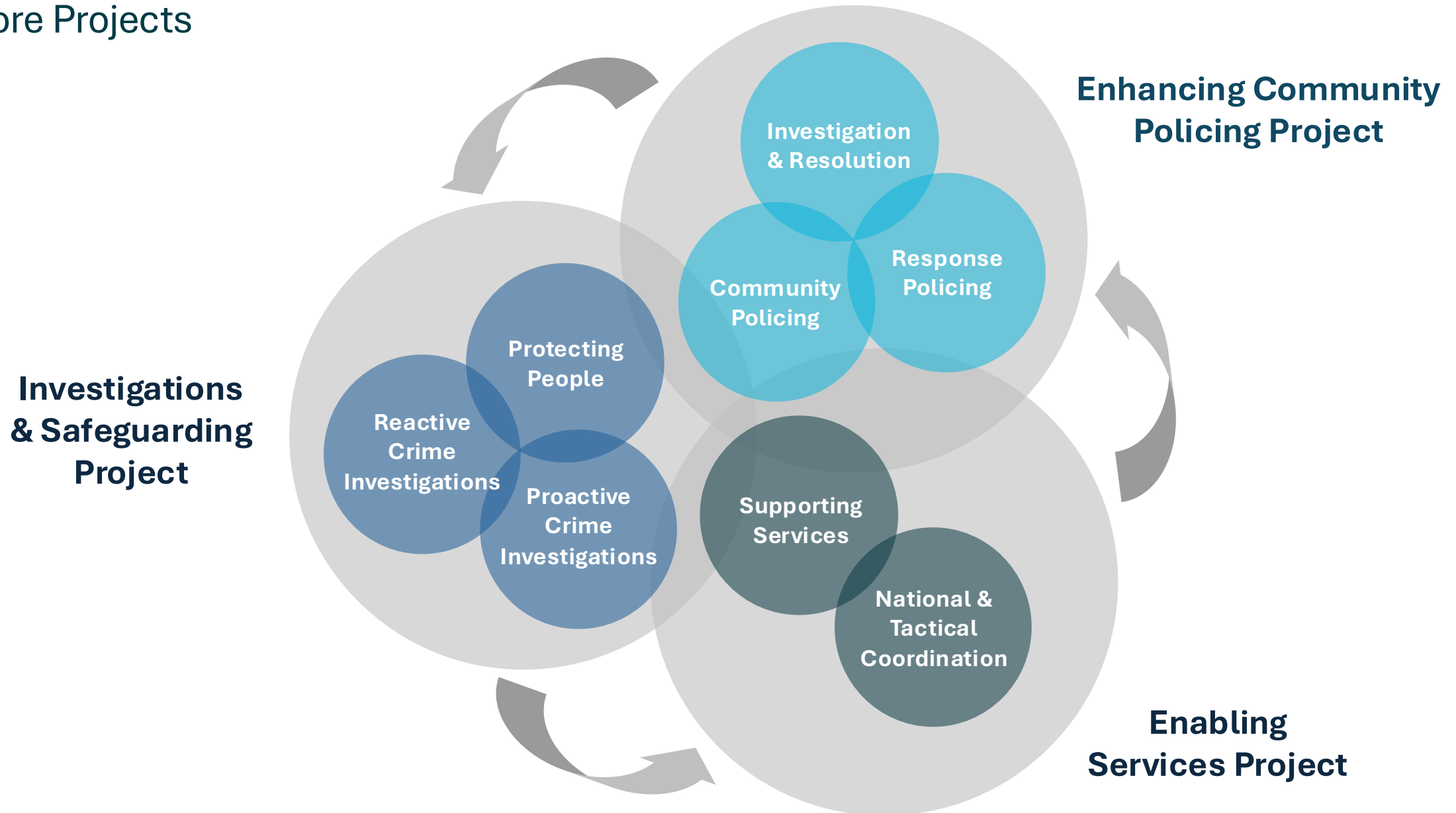
Enhancing Communities Policing Pilot Evaluation Insights

2030 Vision

3
Year
Plan

Policing for our Communities Programme

Core Projects




Enhancing Community Policing Project


We will deliver...



Measuring progress, success & value

 Potential HMICS review

 External-led / academic evaluation


 Performance framework

 Surveys



Evaluating benefits & outcomes through a range of evidence from different sources

 Face-to-face engagement

 Test / Build / Learn approach

 Time / volume / percentage data

 Police Scotland & SPA Governance

 On-site observations

Key Findings – Positive Outcomes

Headline Finding = Better use of resources to demands



Safer Communities

Increased proactivity (Police generated crimes)

More easily contacted CP Teams (Survey)

Improvement in overall User Satisfaction (Survey)

Redesign of web pages – Accessible/Identifiable community officers.



Less Crime

A more effective/efficient/quality of service to non urgent demand (CIH)

Positive trend in detection rates over the 3 month period

Increased opportunities for preventative/problem solving policing



Thriving Workforce

Nationally Consistent Role Profiles & Associated Products (tools for the trade)

Reduction of demand/workloads for Response Officers

Officers with duty modifications feeling valued/performing meaningful role

Positive feedback/Testimonials from officers/staff



Supported Victims

Reduced backlog of non-urgent calls (SCO7s)

32% increase in “Caller Contacted Within 48 hours”

More timely resolution of incidents

100% of LPAs met by Police

Next Steps

Progress recommendations (Action Plan through Project / Programme Board)

National Rollout - Onboarding & implementation in D and P Divisions (Feb 2026)

National Rollout - Advance engagement with N and L Divisions (May 2026)

Independent Evaluation (SIPR) (April – July 2026)

Investigations & Safeguarding Implementation Commences in A and N Divisions (July 2026)

- SPF Engagement/Consultation around National Shift Patterns
- National Media Launch (proposed for March 2026)
- RTI refresh towards potential to accelerate rollout (from April 2026)

OFFICIAL



Project 2 - Investigations & Safeguarding

2030 Vision

**3
Year
Plan**

Co-designed
Nine **1**
CID models and
condensed into...

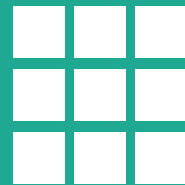
On a mission to deliver a long term and sustainable model for Investigations and Safeguarding across policing in Scotland.

All Divisions involved in the process

20 Ideation
workshops
297 colleagues
generated ideas

827

Voices heard & seen in research engagements, interviews & workshops



Current
Operating
Models



66 Attendees contributed from essential partner agencies

Illustrate how **Public Protection & Criminal Investigations Department** work across Scotland.

**Bench-
marking
against:**



Design Sprint
Exploring IVPD and
defining vulnerability

420 people
Helped discover the problem
Discovery Report
Part one & two

3 Days, 1 Co-designed PP Model

Subject matter experts supporting from a range of PP areas and divisions. All previous research was used to inspire and validate.

The case for change

With rising demands and increasingly complex crimes, Police Scotland and partners must address, innovate and collaborate how we provide services to our victims

Identified through rigorous research & triangulation

- Victims' experience is not consistent across the country
 - Welfare and wellbeing of officers and staff are not prioritised enough
 - The increase in complex and high-risk calls /referrals, not all of which are crime related.
 - Cases that are classified as 'Non-Recent' do not receive the same level of attention
 - Many of the challenges faced cannot be solved by policing alone.
 - The evolution of crime means that we must develop new capabilities to effectively counter it
 - Officers feel burned out: workload, admin duplication from inconsistent siloed roles
 - People don't know what to expect or anticipate during the criminal justice process as a victim or witness
 - Vulnerability is still undefined and impacting other areas of work across the organisation
- + demand, silos, data, training, tools, specialisms, rurality & more...**

Investigations & Safeguarding Project

We will deliver...

Problem solving and
protecting with partners

Dedicated teams for children,
adults & families at risk

Demand-led
provision & coverage

Consistent victim centred,
trauma informed response



Dedicated non-recent
Public Protection
investigation teams

Multiskilled
investigation teams

Administrative support, including
civilian admin & coordination roles

Sustainable wellbeing &
support for specialist roles

Serious & Complex Investigations Model

How the new model will look...

Protecting People

Children at Risk

Families at Risk

Adults at Risk

Investigating Crime

Criminal Investigations

Public Protection Investigations

Acquisitive Crime Investigations

Non-Recent PP Investigations

Serious & Organised Crime Investigations

Sex Offender Policing

Testing the Model

Project goals span across many parts of the proposed model but, each area of testing has a specific focus

Protecting People Clusters

A new way of protecting people by reconsidering our geographical relationships with partners

Police Scotland works alongside partners to **provide the right help.**



Serious & Complex Investigations

Reducing silos while creating confidence and consistency around our investigative services

Victims receive an **equitable service** across Scotland



Specialist PP Triage for non urgent help

Assessing vulnerability from the first point of contact, getting people the right help quickly

Victims and witnesses are **heard informed, and supported**



Wellbeing & Support

Reducing trauma and burnout for our officers and staff, through supported wellbeing and managed workloads

Officers & staff are **equipped and supported** to perform their role

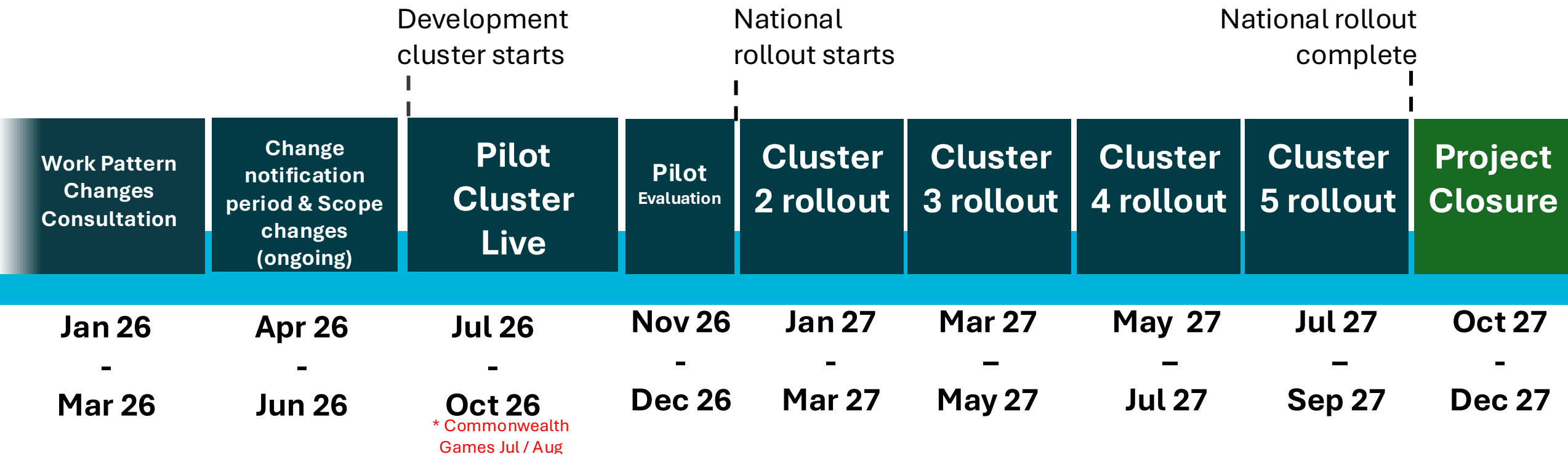


Investigations & Safeguarding Timeline

Divisions rollout in cluster groups of 2 or 3 Divisions that make sense for collaborative working through the new model across the country.

Investigations & Safeguarding Project

Business Case



Timeline sets out potential dates only with a resourced team and other organisational work (to be planned or unplanned) not constraining delivery. In line with SMB direction, project will only start once resources identified which would change all dates.

Rollout timeline key assumptions

Business Case resources approved are made available.

Work Pattern and Structure changes and consultations are swift

Wider org resource management demands on enabling depts does not limit ability to rollout

Commonwealth Games does not mean unable to start Pilot early July 27

Pilot evaluation & outcomes support moving directly into national rollout