**PHP5 Network - CWB/Anchor Institutes Workstream**

**21.09.20 13:00 – 14:30**

**Microsoft Teams**

**Attendees:**

Public Health Scotland - Debs Shipton, Gerry McCartney, Lynsey Martin, Lorna Renwick, Gillian McCartney, Ann Conacher (Chair)

NHS Boards – Fiona Doig (Borders), Esther Curnock (Fife), Oliver Harding (FV), Lisa Buck (GGC), Alana McGlynn (Lanarkshire), Colin Gilmour (WI)

GCPH – Val McNeice

**Apologies:**

Ruth Campbell (A&A), Philip Myers (D&G), Hazel Meechan (FV), Martin Higgins (Lothian), Blair Findlay (Tayside), Lucy Flaws (Shetland)

***Action Note***

What do we want to achieve – **Pull together evidence and develop key messages for decision makers & partners – understand the needs across partnerships so we can support.** This needs to be a two way dialogue and sharing of good practice – good to get dedicated time to do this i.e. Lynsey Martin, Speciality Registrar is on placement to ScotPHO. PHS can help facilitate shared learning on what local areas are doing. Suggestion this discussion could help form work Lynsey undertakes whilst on placement; this will most likely support knowledge into action cycle.

National and local updates -

Public Health Scotland:

* LR working with National and NSS procurement on how to better exploit community benefit for capital build (large contracts). Query how community benefit being added locally?

Nationally:

* NHSScotland with Heriott Watt are undertaking research with CWB focus on the impact of NHS spend on local economy (Graeme Cox researcher, new in post). It will consider not only economic, but social value.
* LR mentioned work Mark McAllister is progressing at COSLA with the Health Foundation on broader system work. The HF will host sessions with a focus on anchor institutes. Largely NHS focussed – still scoping the network and how NHS are included.
* LR spoke of the work of SG and the pilot areas (Clackmannanshire, Glasgow, South Scotland, Tay Cities (potentially including Fife) and Western Isles). Neil McIlroy (on secondment part time to SG) and Geraldine Campbell are leading this work. Given focus on CWB how can PHS and PHP5 network help in the pilot areas and support local discussions? These areas are regional economic partnerships which Scottish Government are looking at – how does this group link with this work?

Glasgow City & Region:

* VMc mentioned the work being undertaken by Glasgow Economic Delivery Group on community wealth building and city and city region recovery plans – currently developing an options paper to take back to recovery group (5 pillars or prioritise 1or2). It was proposed that LB and VMc link in respect of GGC. VMc to make connections as necessary back to the PHP5 Network.

Boards:

* GGC – widening access to employability – huge demand currently.
* WI – think about Europe – and how to influence partners etc. Regional approach – a growth deal between islands and UK govts. – there are gaps here – these deals are integral to community health.
* Lanarkshire – Project Send(?) (recruitment)
* FV – OH spoke about assets based approach and impact assessment and how these could be used nationally. In FV, anchor organisations as opposed to institutes, more led by third sector.

**Key points –**

* Widening access through employability – diversity, not tokenistic
* Ability to influence at local and national levels
* National support for local
* Need to increase understanding of network on current activity
* Need to organically develop the network through the right conversations, making sure those are happening via this group
* Sharing learning and building resources (in one place)
* Connecting various strands of work (already on-going)
* Approaches could include evidence into practice, evaluation, impact assessments, asset based approach
* There are opportunities around city deals and community wealth building
* Procurement would be a tangible, relatively straightforward area to start with
* Evidence the power of anchor institutions
* Living Wage **–** It was agreed to include in this workstream. The Poverty Alliance to attend next full network meeting to present on living wage. The group would be keen that they focus on accreditation; what are barriers, examples of success.
* Should be clear on who the anchor institutes are; not just NHS, local authorities but also includes eg 3rd sector. Could harness much power through collaboration. How could the network evidence this?
* Community benefit – an asset list would be helpful so that relevant information could be included in procurement contracts (generic or specific). A list of benefits developed by the network might help support. Local authorities/community benefit officers – how does network link in and influence? Example, Glasgow has CB strategy.

**Next steps -**

**Actions arising**

* CWB/regional pilots - LR will liaise SG so that they are aware of network members, so we can consider how we can make them aware of this group and how we tie into local level discussions.
* AC invite SG and/or HF to future meeting and onto this group to discuss links.
* LR to circulate the link to the website on community benefit and suggest link to LA Community benefit officers
* Feedback on today’s discussions at the wider group meeting on 20 Oct 2020 and discuss how areas proposed for development be progressed.

**Potential work strands**

Community Wealth Building - network to capture learning/experiences. There are already case studies on SG website. The network should most probably build on these perhaps jointly develop. (First step - discuss with Geraldine Campbell.)

Living wage – develop understanding and support accreditation. (First step – presentation form Poverty Alliance on 20 Oct 20)

Community benefit – consider how this could be included more within contracts procurement/local authorities. (First step - LB&AMc to discuss what might be helpful, perhaps a set of principles for procurement**)**

Build evidence – PHS (LR&LM) could take forward work to develop CWB evidence base and which could inform early adopter sites. (First step – LM consider as developing work programme)

DONM –

It was agreed that way forward be discussed at the meeting of the full network before arranging the next meeting of this group.