

**COMMUNITY DEVELOPMENT
PERFORMANCE MANAGEMENT
FRAMEWORK**

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Introduction to the Performance Management Framework

This framework was developed by Community Development and Health Network and Community Development Managers (2007) from the Wanless Report (2002). This Performance Management Framework document will be lodged online at www.hscni.net

There is a need to bring about a critical edge to community development activity which emphasizes outcomes and this framework will assist in this regard. The following performance management framework supports health and social care organisations to:

- Systematically develop community development approaches in all aspects of their business;
- Ensure a realistic development route for community development;
- Measure progress on mainstreaming community development approaches; and
- Incorporate community development into performance management arrangements.

The ability to positively impact on health and social inequalities cannot be exclusively addressed by the Health and Social Care Board and Public Health Agency. Meaningful partnerships and a common agenda need to be developed with our Trusts, our colleagues in local government, housing, education and the environment, and our communities if we are to effectively deliver on improving the health of our population.

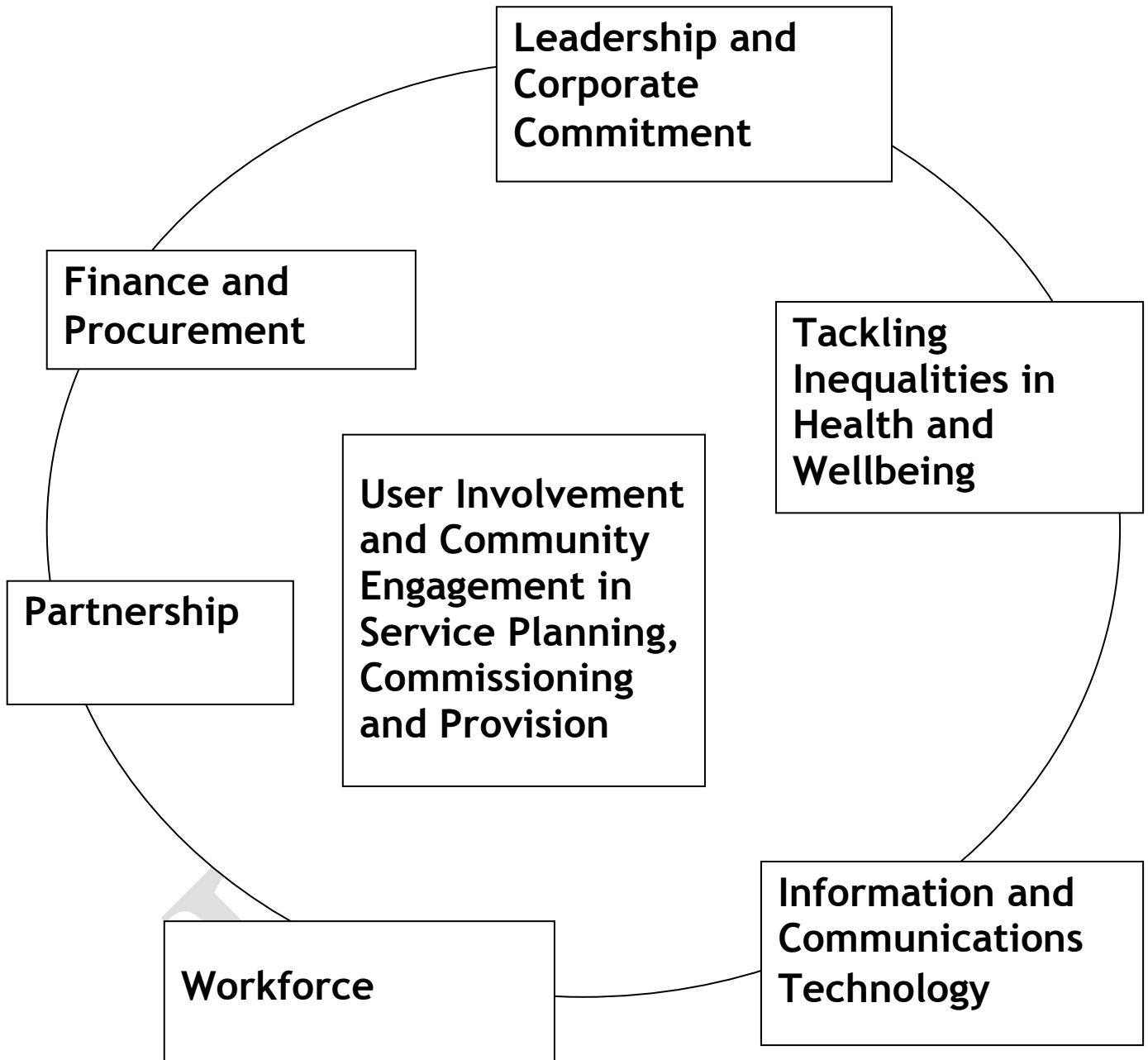
The Public Health Agency will have a key role in developing programmes to drive this agenda forward in the context of the review of the Investing for Health Strategy and the work that will be developed on a new Investing for Health Strategy beyond 2012. Strong performance management will be key to achieving an outcome which is positive and publicly understood, and ensures compliance with standards, statutory obligations and Priorities for Action targets set annually by the Department of Health, Social Services and Public Safety (DHSSPS).

The framework is made up of seven outcome areas:

1. Leadership and Corporate Commitment;
2. User Involvement and Community Engagement in Service Planning; Commissioning and Provision;
3. Tackling Inequalities in Health and Wellbeing;
4. Workforce;
5. Partnership;
6. Finance and Procurement;
7. Information Communications Technology.

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The seven aspects of the Performance Management Framework



Improving performance on community development approaches and capacity can have the following benefits:

- **Innovation and leadership in tackling health inequalities** through empowerment. Communities, local service users and groups are strengthened through community development and prevention, particularly the most vulnerable and excluded.
- **Identification of key health inequality needs, problems and development of creative solutions** to these through partnerships between HPSS staff, service users and communities so that they are co-designers, co-commissioners and co-providers of services.
- **Link excluded individuals, groups and communities** and help to develop social capital and community ownership, taking a person centred approach to the design, commissioning and provision of services.
- **Link** HPSS organisations and the community and voluntary sector and support and encourage the community and voluntary sector to deliver services and tackle health and wellbeing inequalities
- **Leverage funding** by providing access to a range of funding in partnership with other organisations.
- **Identify, develop and support numbers of volunteers**, thereby promoting active citizenship in communities in addition to enhancing service delivery.

This framework was developed to provide strategic advice and guidance at Management Board level within health and social care organisations on how to mainstream community development approaches through performance management. This ensures that user involvement and community development are at the heart of core business of health and social care organisations.

It supports organisations to:

- Take stock of their attitudes, aspirations, and practice in relation to community development;
- Systematically develop needs and asset based community development approaches in all aspects of their business;
- Ensure a realistic progress route for community development;
- Measure progress on mainstreaming community development approaches; and
- Incorporate community development into performance management arrangements.

Ensuring Strategic Level Commitment

The framework ensures a Management Board level strategic commitment to mainstreaming community development and this is crucial in order to guarantee fulfilment of Commissioning Plans and Priorities for Action. It has been developed to provide strategic advice and guidance at Management Board level within HPSS organisations on how to mainstream community development approaches through performance management. Mainstreaming community development approaches enables HPSS organisations to ensure that user involvement and community development are at the heart of their organisations.

It is important to ensure that there is a commitment to community development across all Senior Management Team areas of responsibility rather than a narrower, less accountable approach to mainstreaming community development. In this way, it becomes the responsibility of each Management Team member to define how their directorate is progressing asset based community development approaches.

The outcomes reflect what mainstreaming community development would look like in practice for staff, users, communities and partners. Each outcome area specifies three levels of community development performance, progressing to the 'fully engaged level'¹ where the organisation acts as an exemplar of and champion for community development approaches. The organisation would aim to progress

¹ Wanless 2002

through these levels of performance. We recognise that not everything can be achieved at once, so the framework is realistic and practical but also sets challenging targets.

Specific quantitative outputs under each outcome must be set by agreement within each organisation. The framework sets the context for that more detailed process to take place.

Implementing the Framework

It is important to ensure that there is a commitment to community development across all Senior Management Team areas of responsibility in the Health and Social Care Board, Public Health Agency and Trusts, rather than a narrower, less accountable approach to mainstreaming community development. In this way, it becomes the responsibility of each Trust Director, Manager and staff member to define how their Directorate is progressing asset based approaches.

The outcomes reflect what mainstreaming community development would look like in practice for staff, service users, communities and partners. Each outcome area specifies three levels of community development performance, progressing to the 'fully engaged' level where the organisation acts as a champion for community development approaches. The organisation would aim to progress through these levels of performance. Not everything can be achieved at once, so the framework is realistic and practical but also sets challenging targets.

Specific quantitative outputs under each outcome must be set by agreement within each Trust.

Through the delivery of the **Implementation Plan** the following benefits can be realised:

- Meeting the challenges set out in the HSCB and PHA Joint Commissioning Plan. Innovation and leadership in tackling health and wellbeing inequalities, through user involvement and community development, promoting social justice and inclusion.
- Communities, local service users and groups are strengthened through community development approaches, particularly the most vulnerable and excluded.

- Identification of key health and wellbeing inequalities and development of creative solutions through partnerships between HPSS staff, service users and communities. This will give service users and communities the opportunity to become co-designers, co-commissioners and co-providers of services.
- Link excluded individuals, groups and communities and help develop social capital and community ownership, whilst championing a person-centred approach to the design, commissioning and delivery of services.
- Link HPSS organisations, local authorities and the community and voluntary sector, supporting and encouraging these sectors to deliver better services which improve health and wellbeing and tackle inequalities.
- Provide access to mainstream and non-health and social care funding through partnership work.
- Identify, develop and support volunteers, thereby promoting empowerment and active citizenship in addition to enhancing service delivery.

Resources

Every effort will be made to bring this proposal forward within existing resources. However it is recognised that there may be inequities across Trusts in terms of investment in community development. This will be considered within the baseline audit.(page 34)

We would expect Trusts to allocate a percentage of their resources overall to community development, distributed between headings such as:

- Support to community sector
- Appointment or deployment of specialist community development staff
- Training
- Evaluation of Community development

We would expect to see an Action Plan which reflects the output and outcomes set out in this strategy and performance management framework

Monitoring and Evaluation Arrangements

Each outcome area is structured to allow a three-step approach to full achievement. Within each of these 3 steps, a list of indicators against which to measure progress has been listed. A baseline audit against the seven key outcome areas will be completed by the relevant Director, Senior Manager and Community Development personnel within each Trust. From this audit, action plans will be drawn up for each Trust to ensure a measurable approach to achieving outcomes in full.

Progress will be monitored through annual monitoring meetings with Trusts. This process will be managed by HSCB representatives (most likely to be the Community Development Leads and Director of Social Care and Families).

Timescales

The following table sets out the initial timescales and responsibilities for the implementation and monitoring of this framework.

Action	Responsibility	Timescale
Baseline Audit within Trusts against seven outcome areas	Trust Staff	End November 2011
Development of Trust Action Plans	Trust Staff	End January 2012
Implementation meetings With Trusts	HSCB CD Lead(s)	End March 2012
Monitoring Meetings	Trust / HSCB Staff	2012 and annually thereafter

The Community Development Performance Management Framework is on the remaining pages.

Expected Outcomes	Measures of Progress		
1. Leadership and Corporate Commitment	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged ²
<p>The organisation is recognisably committed to promoting asset based community development principles and practice.</p> <p>The organisation individually and corporately ensures community development is mainstreamed as part of its core business at all levels and across all relevant activities.</p> <p>The amount of money and other resources invested in community development.</p> <p>Appointment of CD specialist staff if needed, and ensuring that an appropriate element of CD is written in to the remit of all posts, and all departments consider what their appropriate input would be.</p>	<p>The organisation agrees a community development strategy.</p> <p>The organisation's community development strategy is agreed by the Management Board, is disseminated and accessible to staff, partners, the community and voluntary sectors and the public and includes actions and timescales.</p> <p>Organisation nominates a Senior Management Board level accountable person for the community development strategy.</p> <p>SMT accountable for community development strategy and mainstreaming community development.</p>	<p>The organisation incorporates community development strategy into each corporate priority.</p> <p>Dedicated resources (funding and staff) to implement community development strategy.</p> <p>Targets for increases/improvements in community development approaches are part of departmental performance management frameworks.</p> <p>There is a non-executive sponsor for community development.</p> <p>An officer with expertise in community development supports the accountable senior lead.</p> <p>The Management Board is trained in awareness of community development.</p> <p>The Management Board receives progress reports and reviews implementation of community development strategy.</p> <p>Takes action on under performance of</p>	<p>Community Development is integral to way organisations sets priorities, reviews progress and makes decisions.</p> <p>The organisation provides evidence of inputs, outputs and outcomes/impact of community development strategy.</p> <p>The organisation acts as a champion for community development approaches within area and partner organisations.</p> <p>The organisation uses its leverage and resources both locally and more widely to influence and encourage community development across HSS family.</p>

² 'Securing our Future Health: Taking a Long-Term View', Final Report by Derek Wanless 2002

Expected Outcomes	Measures of Progress		
1. Leadership and Corporate Commitment	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged ²
		<p>community development strategy/approaches. The organisation utilises its community development strategy to create cohesive community engagement at all levels ensuring that links between consultation events, personal and public involvement and wellbeing initiatives all contribute to the overall corporate community development strategy.</p>	

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Expected Outcomes	Measures of Progress		
<p>2. User and Carer Involvement and Community Engagement in Service Planning, Commissioning and Provision</p>	<p>Stage 1 Slow Uptake</p>	<p>Stage 2 Solid Progress</p>	<p>Stage 3 Fully Engaged</p>
<p>The organisation ensures that users, carers and communities are meaningfully engaged in service planning, commissioning and provision.</p> <p>Service planning, commissioning and providing processes are fair, accountable, transparent and inclusive. The organisation ensures (and shows) that the views of service users actually have an impact (change) on service planning and commissioning.</p> <p>Local people know</p>	<p>The organisation can: Set out how diverse and changing local communities are involved in: - Baseline assessment of need; - Policy development; - Planning of services and the commissioning process; and - Reviews of provision of services.</p> <p>Develop local arrangements with community and voluntary organisations.</p> <p>Identify potential exclusion of local community groups and barriers to user involvement as well as increased involvement and the effect of that involvement taking account of Section.75, urban rural dimensions etc.</p> <p>Reports include updates on progress in user involvement and community development.</p> <p>The organisation monitors existing functions and policies and prospectively assesses new policies and services to see</p>	<p>The organisation sets objectives on ensuring that users, carers and communities are meaningfully engaged in service planning, commissioning and provision for managers and teams and reviews them regularly.</p> <p>Report to the Management Board on consultations and findings of monitoring and assessment of impact of community development policies and functions on health inequalities.</p> <p>Ensure reports are available to employees and the public in a "user friendly" way.</p> <p>Take action on findings from monitoring and assessment and track progress over time.</p> <p>A range of community development methods built into people's core business, for example, user panels, focus groups, public meetings in community venues and open forums between Senior Management Teams and community/ voluntary sector.</p>	<p>The organisation can demonstrate that all staff across all service areas are involved to some extent in reviewing activities and policies for effect on user involvement and community engagement.</p> <p>There is full engagement with communities - equal partnerships, fully supported and (long-term) resourced - where users, carers and communities are integral to planning, commissioning and service provision.</p> <p>Increasing public confidence in the organisation across local communities.</p>

Expected Outcomes	Measures of Progress		
<p>2. User and Carer Involvement and Community Engagement in Service Planning, Commissioning and Provision</p>	<p>Stage 1 Slow Uptake</p>	<p>Stage 2 Solid Progress</p>	<p>Stage 3 Fully Engaged</p>
<p>about and actively use opportunities available to influence the planning and commissioning of services.</p> <p>Volunteering, Social Capital and Community groups</p> <p>The organisation is committed to developing volunteering.</p>	<p>whether or not they adopt asset based community development approaches: - Action and targets to improve community development content; and - Action and targets to improve user involvement and community development.</p> <p>Promotes and provides information on services by various methods to local communities.</p> <p>The organisation develops a volunteering policy and strategy.</p> <p>All volunteers are inducted, trained and supported to undertake their role.</p>	<p>The organisation develops knowledge and skills of staff in community development approaches - effective user involvement and community engagement.</p> <p>The organisation actively builds capacity of local users, carers and communities to engage with organisation.</p> <p>The organisation sets criteria, standards and targets for user involvement and community engagement in partnership with local people and actively uses all mechanisms available (see above). The organisation develops a user and volunteers expenses policy.</p> <p>The organisation trains staff on the implementation of policy.</p> <p>The organisation sets targets for levels of volunteering.</p> <p>The organisation supports development and maintenance of volunteering in community and voluntary sector partners.</p>	<p>The organisation is seen to welcome and respond to participation of all users, carers and communities in service planning, commissioning and provision. The organisation can give examples of the public's views on the organisation's commitment to user involvement and community development.</p> <p>Volunteers are integral to planning and delivery of services.</p>

Expected Outcomes	Measures of Progress		
2. User and Carer Involvement and Community Engagement in Service Planning, Commissioning and Provision	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
		<p>The organisation develops quality volunteering opportunities.</p> <p>Long-term resources are committed to developing internal, and external capacity to support volunteers. The organisation sets objectives at all levels to ensure a consistent approach in utilising consultation, PPI and wellbeing to support robust community and individual engagement.</p>	

Expected Outcomes	Measures of Progress		
3. Tackling Inequalities in Health and Wellbeing	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
<p>The organisation is knowledgeable about the health and wellbeing inequalities experienced by local people/communities.</p> <p>Priorities are influenced by the need to tackle health and wellbeing inequalities in (that) particular geographical area or between communities and groups.</p> <p>Evidence based strategies (quantitative and qualitative) and action plans are used to reduce inequalities.</p> <p>Community development approaches are used to tackle health and wellbeing inequalities.</p> <p>Inequalities in health and wellbeing between groups are narrowing.</p> <p>And the contribution of CD to this is testified by staff and community members</p>	<p>The organisation has published up to date information on the health and wellbeing inequalities experienced by local people/communities of its resident/catchment population.</p> <p>The organisation complements quantitative data sources with qualitative data obtained from its community development activities, local consultation, needs assessments and research.</p> <p>The organisation has arrangements in place to monitor and analyse:</p> <ul style="list-style-type: none"> - Changes in the population - Health and wellbeing experience by local community; and - Health and wellbeing inequalities experienced by local people/communities and groups. 	<p>The organisation sets objectives and targets for health inequalities and community development approaches to health and wellbeing inequalities in its public health and regeneration programmes.</p> <p>The organisation sets objectives and targets on health and wellbeing inequalities and community development approaches to health and wellbeing inequalities within its strategies and other implementation plans.</p> <p>The organisation analyses and interprets information gathered and reports regularly on progress.</p> <p>The organisation works with other public health colleagues and the relevant public health observatory to identify and use effective interventions and improve the quality of and access to information on health inequalities.</p> <p>The organisation has a community involvement and engagement programme that provides insight into the health and wellbeing experience of local users, carers and communities and their felt health and social care needs.</p>	<p>The organisation ensures staff, throughout the organisation, are aware of the diversity of the local population and their health and social care needs.</p> <p>The organisation fully promotes community development approaches to tackling health and wellbeing inequalities as an integral part of its public health and regeneration programmes.</p> <p>The organisation demonstrates the effect of its activities on population health and wellbeing and their root causes.</p> <p>The organisation works effectively with others on the root causes of health and wellbeing inequalities across local areas and partnerships.</p>

Expected Outcomes	Measures of Progress		
4. Workforce	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
<p>The organisation is committed to improving knowledge and skills of staff to apply community development approaches to their work.</p> <p>Staff in all services, directorates and partnerships actively promote community development in their work, and are confident in their ability to apply community development approaches to waiting practice.</p> <p>Staff reflect the users and community they service at all levels in the organisation. Specialist Community development staff address major community issues and priority areas and guide other staff in contributing the overall CD effort</p>	<p>The organisation has arranged for all staff to be trained in community development approaches.</p> <p>The organisation ensures that staff training and ongoing workforce support on community development approaches is an integral part of the overall HR corporate strategy.</p>	<p>The organisation works closely with staff on creative approaches to promoting community development approaches.</p> <p>The organisation ensures that staff receive ongoing support on community development in the form of practice-based learning, peer support, coaching and mentoring etc.</p> <p>The organisation sets performance targets to ensure that staff who have received benefit or experience detriment as a result of performance assessment procedures on their implementation of community development approaches are monitored.</p>	<p>Workforce includes a complement of staff highly skilled in CD, and appropriate levels of CD are present throughout the workforce</p> <p>Local community and voluntary groups increasingly participate in community development and professional development of staff.</p> <p>The organisation links with local social economy and economic regeneration activities to ensure its recruitment strategies support local employment needs.</p>

Expected Outcomes	Measures or Evidence of Progress		
5. Partnership	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
<p>The organisation is committed to supporting and maintaining local and/or community-based partnerships especially at neighbourhood level.</p> <p>The organisation is committed to resourcing in the long-term partnerships with the community and voluntary sector.</p> <p>The organisation successfully exercises its influences outside its direct partnership activities, for example using the local private sector employers or local media.</p>	<p>The organisation seeks out and develops maintaining local and/or community based partnerships.</p> <p>The organisation actively promotes community development within its Local Strategic Partnerships and initiates joint activities and shared targets.</p> <p>Provision of funding for community and voluntary sector partnerships.</p>	<p>The organisation develops capacity of partner organisations to be providers of services.</p> <p>Partner organisations develop their own community development strategies.</p> <p>Partner organisations incorporate action on community development in action plans with measurable objectives and milestones.</p> <p>The organisation develops long-term, recurrent and stable funding for community and voluntary sector partnerships.</p>	<p>Partner organisations demonstrate progress on asset based community development and successfully monitor and communicate their progress on promoting community development.</p> <p>Neighbourhood partnerships flourishing.</p> <p>Long-term, recurrent and stable funding for community and voluntary sector partnerships is ensured. The organisation has agreed targets for increasing voluntary/community sector provision of services.</p> <p>Partner organisations testify that their contributions to health and wellbeing improvement are also beneficial in terms of reciprocal effect on their own agency objectives, be they education, crime, environment or others.</p>

Expected Outcomes	Measures or Evidence of Progress		
6. Finance and Procurement	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
<p>The organisation invests to promote asset based community development approaches.</p> <p>The organisation ensures funding (within partnership arrangements as appropriate) for community-based provision of services.</p> <p>The organisation uses its economic power to tackle health and wellbeing inequalities.</p>	<p>Financial plans take account of investment needed to implement community development approaches (e.g. management time, training, partnership activities, building capacity in partners).</p> <p>Contracts with other bodies include commitment to community development (user involvement and community engagement).</p> <p>Monitoring for finance and procurement arrangements are in place.</p>	<p>Mainstream budgets take account of the implications of identifying and meeting the health and wellbeing inequality needs of users and communities.</p> <p>Mainstream budgets take account of the implications of promoting asset based community development approaches.</p> <p>Mainstream budgets take account of the implications of developing capacity in community and voluntary sector partnerships to become service providers.</p> <p>Mainstream budgets take account of the implications of long-term, recurrent and stable funding for community and voluntary sector partnerships.</p>	<p>The delivery plan quantifies appropriate funds to promote community development approaches (user involvement and community engagement).</p> <p>The delivery plan quantifies funds to support long-term, recurrent and stable funding for community and voluntary sector partnerships.</p> <p>The delivery plan quantifies funds to develop capacity in community and voluntary sector partnerships to become service providers.</p>

Expected Outcomes	Measures or Evidence of Progress		
7. ICT	Stage 1 Slow Uptake	Stage 2 Solid Progress	Stage 3 Fully Engaged
<p>The organisation:</p> <ul style="list-style-type: none"> - Establishes baseline data on local population health and wellbeing needs; - Documents progress on narrowing health and wellbeing inequalities between groups in all relevant aspects of its business; and - Maximises opportunities for staff to access information to support their work for example internet, library, research findings and national policy. <p>Improved communication between the organisations, users and communities.</p>	<p>The organisation arranges to ensure access to timely, accurate and complete data on community development approaches to both staff and users, carers and communities as an integral aspect of its data quality work.</p> <p>The organisation arranges to ensure access to timely, accurate and complete data on health and wellbeing inequalities to both staff and users, carers and communities as an integral aspect of its data quality work.</p> <p>The organisation arranges to ensure staff has the skills to collect and analyse the data and has identified resources to support this.</p>	<p>High quality community development good practice data is available in accessible formats to health and social care professionals and service managers and the community.</p> <p>High quality health and wellbeing inequality data is available in accessible formats to health and social care professionals and service managers.</p> <p>Teams demonstrate how data is used to identify areas of concern and monitor progress on action taken.</p>	<p>The organisation can demonstrate "joined up working" between departments and ICT on meeting the information needs of staff and users and communities.</p>