



One Vision, One Voice

The story of the Scottish Healthy Living Centre Alliance

1. Prologue

This is the story of the Scottish Healthy Living Centre Alliance and how they managed to get a stay of execution for a year when all seemed lost. The Healthy Living Centre Alliance was formed in response to the funding crisis Scottish Healthy Living Centres faced in 2007, with 6 Healthy Living Centres closed, 37 facing closure and only 7 with any secure future.

The Alliance had 6 months to do something about it. In that short time they got together, organised themselves and managed to get £2.5m funding allocated for a year. Their journey was not straightforward. Even with the best laid plans, their progress was staggered, not linear. They had to be flexible and be able to capitalise on unexpected developments as they arose. They had to be able to transmit their enthusiasm and make a case for continuation to a host of stakeholders. They had to operate in a way that would ensure success, without alienating anyone.

At a time when anyone could have been forgiven for being despondent, the Scottish Healthy Living Centre Alliance found a way forward that drew strength from each other, took people with them and made friends along the way. The human element in building relationships was a very significant part of the Alliance's story.

The Alliance came together in September 2007, organised themselves, established their approach and mindset and developed an action plan in three months. By December 2007 they had arranged a meeting with the Scottish Cabinet Secretary for Health and Well Being set for January 2008, which resulted in a ministerial announcement in February 2008 of the provision of a transitional fund of up to £2.5 million for those Healthy Living Centres facing closure to continue seeking longer term sustainability with local partners.

There is a story that shows there is strength in numbers, that it pays to be aware of circumstances and that moving forward together is not always a clear cut step by step process.

2. Scottish Healthy Living Centres and their Support Programme

Scottish Healthy Living Centres are a part of a wider network of community-led health initiatives that sit alongside public sector organisations, with a shared goal of improving health and reducing inequalities. Launched in 1999, there were 46 Healthy Living Centres in Scotland funded to the tune of £34.5 million by the Big Lottery Fund.

Scottish Healthy Living Centres are very diverse. Some are centre based while others are 'virtual' organisations. Some are based in the voluntary sector, with others being part of statutory sector organisations. The range of services they provide vary from one to the other, as do the people they work with.

What brings them together is that they are all committed to tackling health inequalities in deprived communities. Another common factor is that they view health in terms of quality of life and not merely as avoiding diseases. Healthy Living Centres also take a community development approach focused on enabling local people to identify their own health needs and move forward together.

Their approach is based on the values and principles of partnership working, empowerment and participation. As a result Healthy Living Centres have deep-roots in their communities and high levels of service user involvement. They actively support people who are socially excluded and use innovative methods to reach people through their local knowledge.

This gives them a good understanding of community needs. Healthy Living Centres respond to community issues by providing a range of services that impact on Health Improvement priorities, tackle the wider determinants of health and contribute to the broader development and well being of their communities. They do not do this in isolation. Most Healthy Living Centres draw on the knowledge, skills and resources of the community and other local agencies and work to a shared vision of change.

Healthy Living Centres are complementary to statutory sector organisations. They are an ideal access point for the statutory sector to engage with hard-to-reach groups. Many Healthy Living Centres have proved themselves to be effective and credible mechanisms for the delivery of services to communities and have done so in partnership with the statutory sector. Most importantly, Healthy Living Centres have been able to make a significant impact on the lives of people living in some of Scotland's most disadvantaged areas.

The Big Lottery Fund distributed a total of £300m across the UK under the Healthy Living Centre Programme. In recognition of the level of resources, they piloted a programme of support for Healthy Living Centres, established differently within the four nations of the United Kingdom. In May 2004, the Big Lottery Fund commissioned NHS Health Scotland to provide a Healthy Living Centre Support Programme (HLC SP).

The overall aim of the Support Programme was to provide support to Healthy Living Centres in Scotland to assist them to develop practice, influence policy and promote local models of partnership working to improve health and tackle health inequalities.

The programme consisted of three main elements:

- A networking and capacity building programme;
- A planning & evaluation support programme; and
- A strategic development and sustainability programme.

The Support Programme was initiated in April 2005 and delivered by the Healthy Living Centre Support Unit based within Community Health Exchange (CHEX), a Health Scotland funded community health resource located within the Scottish Community Development Centre (SCDC). It was felt that this would be a natural home for the Support Unit as both SCDC and CHEX worked to established community development values and principles, central to which was the notion that communities should be supported and to identify their own health needs and thus empowered, further supported to participate in finding and maintaining solutions as an equal partner. In relation to health, the community development ethos was complementary to the social model of health which appreciates the impact of wider life circumstances and events on community health and seeks to create conditions for wellbeing and quality of life.

For the very beginning, the Healthy Living Centre Support Unit created opportunities for Healthy Living Centres to network and share good practice. They used a variety of methods such as newsletter, e-network, conferences and seminar series. Throughout this period sustainability of the Healthy Living Centre approach has been one of the key issues of concern to the Healthy Living Centre Support Unit and Healthy Living Centres themselves. It had been made clear that the Big Lottery Fund would not continue to fund Healthy Living Centres beyond the first round. The idea was that if Healthy Living Centres were proving to be valuable, then continued funding would be negotiated locally with local stakeholders and partners.

3. The Need for a Voice

In 2007, the Healthy Living Centre Support Unit's concern about the sustainability of Healthy Living Centres beyond their current funding grew. They carried out a survey of Healthy Living Centres, in July and August of that year. Prognosis for the future was not good. 6 Healthy Living Centres had already ceased to be. Of the remaining Healthy Living Centres, over half (55%) were due to shut their doors by March 2008, leaving 7 surviving Healthy Living Centres out of the original 46. Even the secure 7 Healthy Living Centres were struggling to acquire funding to run their programmes. The worry was that an almost wholesale closure of Healthy Living Centres across Scotland would have a significant negative impact in some of Scotland's most vulnerable communities. From the very beginning, Healthy Living Centres in Scotland had taken up the challenge to address health inequalities by supporting communities and individuals to address disadvantage, change lifestyles, enhance life skills and improve service accessibility and uptake. This innovative approach was becoming an integral part of health improvement and tackling health inequalities at a local level.

Healthy Living Centres and other community development led approaches had shown that they had a unique place and contribution to addressing the much wider range of issues that influence the health of communities. As the Scottish Executive's Community-Led: Supporting and Developing Healthy Communities Task Group, discovered in 2006, there was a wealth of evidence to suggest that community led health (which includes Healthy Living Centres) can address health in ways which would be *'practically difficult or near impossible using other more traditional or conventional approaches'*.

And yet, the Support Unit noticed that individual Healthy Living Centres were struggling to negotiate future funding locally. Up to this point Scottish Healthy Living Centres were mainly operating as single organisations that came together as a loose network. The gravity of the situation became much more obvious when Healthy Living Centres were looked at collectively. The Support Unit felt that the collective situation needed to be brought to the attention of Healthy Living Centres. Time however, was a factor working against Healthy Living Centres and the Support Unit. They needed to move quickly if they were to address the situation.

With this in mind, the Support Unit organised a roundtable discussion for Healthy Living Centres and main players. They carried out further research and put together a paper to be used as a basis for discussions with Healthy Living Centres and key stakeholders. The paper - *'Supporting and Sustaining the Healthy Living Centre Approach to Tackling Health Inequalities in our Communities...What Now?'* was presented at a roundtable discussion event on 6 September, 2007. The idea was that having unearthed the gravity

of the situation, the Support Unit would present this to all Healthy Living Centre stakeholders in order that they may discuss a way forward together; thus demonstrating the community development principles of partnership working and participation through their actions. This approach to the roundtable discussion and the tone of the tabled report were to have a significant impact on the future of Healthy Living Centre, for 3 main reasons.

First, the tabled report. It really was just about providing an up to date picture of the funding situation. It was factual, gave accurate figures and used a line of reasoning backed up by evidence and covered the following areas:

- (a) the evidence-based impact of Healthy Living Centres on health improvement.
- (b) the contribution of Healthy Living Centres to the current and future health improvement policy agenda.
- (c) the known attempts of Healthy Living Centres to secure funding beyond March 2008.
- (d) a comparison of funding commitment to Healthy Living Centres in Wales and Northern Ireland.
- (e) the funding situation of individual Healthy Living Centres.

The report did its job in terms of setting out the situation well. As one Healthy Living Centre co-ordinator later commented "I was relatively new and so did not really know the context. The research report was really influential because it focused on the evidence". Looking back, the research, its tone and content, was seen to be fundamental in helping to achieve the eventual result.

Second, the research carried out by the Support Unit compared the Scottish situation to that of Wales and Northern Ireland. In Wales, Healthy Living Centres were no longer being funded by the Big Lottery Fund, although it was expected that 60% - 70% of projects would go on to some form of sustainability. In Northern Ireland, 17 out of 19 projects had been sustained until 2009 and some to 2010 by the Big Lottery Fund. The Big Lottery Fund's explanation for providing additional funding was that there had been significant restructuring of public administration within Northern Ireland and as a result Healthy Living Centres needed more time to re-establish relationships with the statutory sector.

The situation in Northern Ireland was pretty similar to the Scottish situation. Here the NHS was going through massive restructuring, changing from LHCCs (Local health care Co-operatives) to CHPs (Community Health Partnerships). In some areas this restructuring also involved the inclusion of Local Authority social work services to create a new Community Health and Care Partnership (CHCP). In these areas both the NHS and Local Authorities were experiencing massive changes. They were also key partners in the Healthy Living Centre movement. Negotiating a sustainable future with stakeholders already concerned with its own restructuring was proving to be understandably difficult.

So it made sense to include the Northern Irish Support Programme at the roundtable discussion. The idea was that the experiences in Northern Ireland would provide a starting point for finding a way forward in Scotland. The one key message from Northern Ireland was that large administrative systems, such as a devolved government, find it difficult to address the individual needs of a number of initiatives. In NI, therefore, they formed an alliance to:

- (a) Create a voice and lobby for healthy living centres.
- (b) Move forward by taking collective action and responsibility for making things happen.
- (c) Develop a plan to raise the profile of healthy living centres.
- (d) Take forward strategies informing all key policy makers of the importance of healthy living centres and long term sustainability issues.

The third feature of the roundtable event that went on to have significant impact was the inclusion of a wide range of stakeholders at the very start of discussions. The roundtable discussion could have been held as an internal Healthy Living Centre discussion. However, the point of the event was to find a Scottish solution. This was more important to the Healthy Living Centres and the Support Unit than apportioning blame.

In addition to Healthy Living Centres, partners from both the local and national level such as representatives from the Big Lottery Fund, NHS Health Scotland, Scottish Government, Local Authority and Community Health and Care Partnerships, were invited to the event. This made the roundtable event a discussion about addressing community health in Scotland as a whole. The focus of the event was firmly on finding solutions for a programme that had proven itself. Speaking about the tone of the event, one agency partner said "I found the whole thing very pragmatic and the people friendly and easy to talk to".

Including all those who had a stake in Healthy Living Centres appeared to have paid off. No one felt as though they were being blamed. Time was not wasted on recriminations. One of the senior Scottish Government Officers present at the roundtable discussion said "The roundtable discussion was an interesting experience. The Northern Ireland perspective went down very well. The report let me know where the Healthy Living Centres were coming from. It provided good evidence about how many people were affected and where; good evaluation carried out by Edinburgh University; how Healthy Living Centres were delivering on priorities. Factual information is useful for government officers".

The way the roundtable discussion was organised and conducted had a significant bearing on what was to come later. Certainly, Healthy Living Centres made a good impression, there was a sense of needing to find a way forward and other stakeholders were not put off. Instead the event helped to build relationships among all parties. The officer quoted above was to play a critical role in helping the Healthy Living Centres to make their case at a national level.

4. Finding the One Voice

The Northern Irish story created a buzz within the Scottish Healthy Living Centres and led to a number of conclusions. First and foremost the delegates decided to set up a Scottish Healthy Living Centre Alliance to create a collective voice. They then agreed what the Alliance would be about. Healthy Living Centres needed to raise their profile and identify champions at a local and national level. They agreed that the Alliance would promote the collective case and produce materials/actions which would have an impact at a local and national level and that they would take a business/task orientated approach. They accepted that their message had to be set within a wider health improvement context - 'we're not the only show in town but here's where we fit'.

The idea of an alliance had been around for a time, but not a lot had happened. Initially, Healthy Living Centres were focused on doing what they were set up to do. They tended to meet up as a network of Healthy Living Centres, each with its own optimal mix of processes and work plans. They valued opportunities the network offered to share good practice and learn from each other. This then was how the network was perceived and that's how it operated.

Timing was a key factor in the formation of the Healthy Living Centre Alliance. The fact that most Healthy Living Centre funding was coming to an end at the same time (March 2008) was a fluke, but it also provided a focus for the Scottish situation. As a group the Alliance was able to take advantage of this coincidence. Addressing the situation from a Scottish perspective needed something much more robust than a network, hence the agreement to come together as an alliance.

It was agreed that a Scottish Healthy Living Centre Alliance should have its own identity, credibility and a legitimate collective voice. If the Alliance was to be taken seriously, it had to make sure that it represented all Healthy Living Centres formally. The Alliance was therefore formed as a constituted group. The terms of reference were explicit about the buy-in from all Healthy Living Centres and established a structure that was ratified by all.

At first, no one wanted to step forward to be a single figurehead for the Alliance. Many were put off because they were worried that activities at the national level would harm local negotiations and threaten relationships with local partners. Individuals might be branded as 'trouble makers'. So, an executive group was set up drawing on the membership of the Healthy Living Centre Alliance. Organising as a coherent group and getting it right for all members took the best part of a month or so.

Once established, the Alliance membership very quickly began to differentiate – some members were very involved, while others were less hands on. This is a natural process in any large group. A few individuals soon emerged as leaders. At the early stages there were differences of opinion as to how best to proceed. The two main choices were whether to lobby the Cabinet Secretary for Health and Well Being or to launch into a media campaign.

Sub groups explored the options and discussed the pros and cons with each other. Some members were worried that a full-on media campaign would back people into corners and was not the best start for a process of negotiations. A phased approach emerged. It was agreed that the alliance would proceed amicably to find a solution by meeting with the Cabinet Secretary. In case this approach did not work, a media campaign would be their Plan B.

The Alliance met on 5 December 2007 to focus on what exactly was needed. By December 10, 2007 an action plan was drawn up. It identified Task/Action, Undertaken by whom, Deadline date, Resources, Follow up action required. Actions relating to media campaign and systematic lobbying of MSPs were included in the action plan, as a backup. Having arrived at a collective decision, energies were directed to preparing for a successful meeting with the Cabinet Secretary.

5. Moving Forward Together

The early days of the Alliance were not plain sailing. There were many voices and different points of view. The potential for conflict was high. But the Alliance had a few

things going for it too. Firstly, members all had a very strong sense of common purpose. They also all operated to a shared set of values and principles drawn from their community development approaches. These same values and principles underpinned Alliance members' interactions.

As one member, new to Healthy Living Centres put it, "We all see ourselves as part of our communities. Egos and self interest were left behind. Everyone walked the talk; about people, and values and benefits for people. We disagreed with each other but did not fall out".

The role of the Support Unit at this stage was critical to the development and purpose of the nascent Alliance. The Support Unit looked after the details such as booking rooms for meetings; gathering documentation; providing continuity and keeping the Alliance to its agreed direction. "The guys at the centre were great. They kept the group to the agenda. They were a bridge between the centre and the rest of us (individual Healthy Living Centres). They were the glue that held us together" said one Alliance member on reflection. Alliance members also felt that the Support Unit gained credibility and trust with partners as they did not have the baggage of being a project.

For their part, the Support Unit was clear that theirs was a facilitative function. They were there to set up the conditions that would allow the Healthy Living Centre Alliance to find its own solutions and then support the Alliance to take those solutions forward. The Support Unit ensured information flow and followed an explicitly transparent process. This was very important as all Healthy Living Centres were kept up to date with progress, regardless of how directly they were involved.

Real transparency is the quickest means of engendering trust – this idea has been around for years. Here the Alliance and Support Unit were a living embodiment of the sentiment.

As leaders emerged, the approach the Alliance would take with the Cabinet Secretary also began to crystallise. It was agreed that the alliance would have a mindset that was neither defensive nor aggressive. They wanted to be self deterministic – no steps would be taken until all Healthy Living Centres had agreed. The Alliance was agreed that if they were to lobby the Cabinet Secretary they would take a positive, can do approach.

With this in mind the Alliance executive group began the first steps to a meeting with the Cabinet Secretary. The Alliance realised that there were no guarantees. At this early stage they were not even sure if they would get a meeting with the Cabinet Secretary. However, the executive members of the Alliance were optimists. They knew they had a strong case backed up by good evidence. The Alliance's approach was to say 'here's the situation and here are some ideas on how to remedy it'. They decided that it was worth 'taking a punt'.

The mindset and ground rules that the Alliance set for itself, were to prove to be a real strength.

6. In the Meantime... Politics! Media!

The plight of the Healthy Living Centres in the meantime had not gone unnoticed. While the Alliance was forming and planning its course of action, other activities were also under way. A previous paper on the sustainability of community led health initiatives was in the public domain. Also, individual Healthy Living Centres were engaging with

their local elected members and MSPs while trying to find local solutions to their own sustainability.

There was also a political sub text. Healthy Living Centres were a flagship programme of the New Opportunities Fund under the previous Labour administration. By 2007 there was a new SNP government in the Scottish Parliament. Questions were raised in parliament by MSPs, Labour, Conservative and SNP, about how the new administration was going to address the issue of sustaining Healthy Living Centres in Scotland. The matter was beginning to become a cross party issue.

This was an unexpected development. The Healthy Living Centre Alliance had to respond to it but were aware that handled badly, this state of affairs would do more harm than good.

The Healthy Living Centre Alliance made a conscious decision not to play political games, not to take sides or to get drawn into the rights and wrongs of the situation or to apportion blame. They took a non partisan approach. They focused clearly on solution finding and demonstrating the case for sustainability.

They continued to stick to their stated values and principles and behaved with integrity. "We did not set out to knock anyone" one Alliance member said. The report produced by the Support Unit on the situation of Healthy Living Centres and the roundtable report was available to all partners. Also partners were present at the round table discussions, so there were no surprises for any partner. The Alliance was happy to share this information. This meant that the Cabinet Secretary and Scottish Government officers had accurate and up to date facts with which to respond to parliamentary questions. This approach went a long way in getting a fair hearing when the Healthy Living Centre went to meet with the Cabinet Secretary.

At about the same time, the predicament of the Healthy Living Centres was also picked up by the media. Again the Alliance was thrown an unexpected curve ball. The media interest posed a problem for individual members of the Alliance. What stance would the media take? How should they respond to media queries? Would engagement with the media put individual Healthy Living Centres in a difficult position locally? Would the spectre of being a trouble maker appear again? How would it affect negotiation plans? Given that the Alliance was a collective body, it was felt that individuals being seen to be prominent in the media would, at best, be unhelpful. The Alliance and Support Unit also did not wish to be drawn into any acrimonious debates in the full glare of media interest. The Alliance therefore requested that all media enquiries would be handled by CHEX, the parent body which hosted the Support Unit. This meant that individual Healthy Living Centres were not targeted, which freed them up to concentrate on their action plan.

CHEX for their part were clear that they were not there to lobby the media on behalf of the Alliance. As the Support Unit's role was that of a facilitator, CHEX agreed to be the point of contact for media queries on behalf of the Alliance as a collective body. They agreed to provide factual information that was already in the public domain but would not speak for the Alliance. If the media wanted any quotes for their stories, CHEX would direct journalists to Alliance members, with their permission. This too was in keeping with the commitment to behaving with integrity.

Having a set of core values and an agreed mindset of amicable resolution helped the Alliance deal with these two very intense but unexpected events in a mature and

thoughtful way. It meant that they were able to stick to their agreed course of action and continue to behave with integrity with all parties.

7. Making the Collective Case

Having decided that the Alliance's first course of action was to raise the issue with the Cabinet Secretary, the executive group began to plan for it. They contacted the senior Scottish Government officer, who had been present at the roundtable discussion to arrange a meeting with the Cabinet Secretary for Health and Well Being. They sought his advice on how best to present their case to the Cabinet Secretary. The delegation was advised to demonstrate explicitly how the Healthy Living Centre case linked to ministerial priorities such as Better Health, Better Care; Ministerial Task group on Health Inequalities and so on.

The Alliance put their case to the Cabinet Secretary in the form of an outline proposal, informed by the initial report by the Support Unit and conclusions that were drawn from the round table discussion. Its purpose was to demonstrate the case for the sustainability of Healthy Living Centres.

The proposal was for 2 year transitional funding for Healthy Living Centres at £5m per year. The proposal built the Healthy Living Centres case by giving a brief background on Healthy Living Centres and outlining their community development approach. It included evidence from an independent evaluation of Healthy Living Centres across the UK. It set out the Scottish case with reference to the policy context in Scotland and provided the Cabinet Secretary with evidence of impact. Finally the outline proposal put the cost of Healthy Living Centres in context by comparing them to the costs of other services, using calculations from a previous piece of research.

The Healthy Living Centre Support Programme found that an average cost of working with local people who use the services amounts to £1 per person per week or £52 per year. Comparative figures, which help contextualise this include local authority leisure and community services – around £4 per touch, GP appointment – £18, niche health service for vulnerable/at risk group – in excess of £100 (extract from: Outline proposal for a 2 year emergency funding package for Healthy Living Centre in Scotland, 03 October 2007).

The senior official later mentioned that "they made a reasonably good case in their letter to the Cabinet Secretary". By 10 December 2007, the Alliance received notice that a 45 minute meeting with the Cabinet Secretary would take place on 10 January 2008. The first order of business was to see who would attend the meeting. The Alliance discussed and agreed on a mixed delegation that would reflect Healthy Living Centre settings (rural and urban), sectors (NHS and Local Authority) and functions (co-ordinator, management committee member and volunteer) to show the diversity of Healthy Living Centres at different levels. The eventual delegation was led by a Healthy Living Centre co-ordinator and supported by representatives from Healthy Living Centre local management body, volunteer, NHS representative and a Local Authority representative.

Now that the delegation was agreed it was time to prepare for the meeting. Members of the delegation had no prior experience of meeting with Cabinet Secretaries. Also they were keen to present a case that would take into account the Cabinet Secretary's point of view. The delegates and Support Unit were under no illusions that Healthy Living

Centres were one of many competing priorities for the Cabinet Secretary. Again they turned to their colleague in Scottish Government.

The Alliance by now had established a good rapport with this government officer. He found delegates to be pragmatic, friendly and easy to talk to. He felt that the delegates seemed to understand that Central Government had to contend with competing priorities, but felt they had a valid case that they wanted to get across in a reasonable manner. It was also obvious to the senior officer that the delegates were not interested in playing political games. "The Alliance was non confrontational. They seemed to be saying 'this is where we are, what we do and the benefits we bring. Give us a fair hearing on what we stand to lose'. Their approach made me want to help them", he later stated.

Time was still against the Alliance. They had four weeks to prepare for the meeting but this was further shortened due to the Christmas and New Year break. The Alliance held two critical meetings on 20 and 21 December 2007 to agree the delegation's approach with the entire membership.

The delegation, with help from the Support Unit, developed a brief agenda for the meeting. All involved were acutely aware of the need to present their case succinctly and to make the best use of the time they had with the Cabinet Secretary. They put in a lot of time and thought into preparing for the meeting.

- How much time were we going to have with the Cabinet Secretary?
- How will we know if the meeting is going well?
- What if...?

The delegation considered multiple scenarios and their responses to them. They reminded themselves that this was about a collective approach and concerned all Healthy Living Centres. They visualised being in the meeting and anticipated possible questions from the Cabinet Secretary and their responses. They discussed and agreed tactics for the meeting – down to the detail of who would speak when, who would field which questions, how they would behave in the meeting. The delegation was determined that they would present a united professional front.

Each individual prepared in his or her own way. Some took notes; others worked through 'what if' scenarios. Each was clear about what approach the other would take. "We knew that the challenge was to get over the hurdle of 'no more money, its all with the NHS'. But we were keen, we saw that this was about tiding us over a transition period and we had identified why we were finding it difficult to get local funding. We tried to anticipate the Cabinet Secretary's questions. We had an absolute belief in Healthy Living Centres and knew our unique selling point. On the whole we were optimistic".

The meeting with the Cabinet Secretary lasted longer than the allocated 45 minutes. The cabinet Secretary had invited the Minister for Public Health along to the meeting. This might have been because of the information presented in the outline proposal. Whatever the reason, it demonstrated that the Alliance had definitely attracted the Cabinet Secretary's attention. The fact that the meeting lasted longer than the allocated time showed that having gained her attention, the Alliance were able to retain it. As planned, the delegates got across the essence of their situation in the first few minutes of the meeting. The bottom line was this – the sustainability of Healthy Living Centres was a local matter to be resolved locally in negotiations with HNS, Local

Authority and other relevant partners. The Alliance accepted this. However, they posited that the restructuring of LHCCs into CHPs or CHCPs meant that key funders were focused on re-organisation and were thus unable to make any finding commitments. Timing was critical and the Alliance was seeking transitional funding to tide Healthy Living Centres over for 2 years, during which time all partners would be in a better position to arrive at local solutions for their local Healthy Living Centres.

This set the tone for the meeting. 'Here's the situation, here's why we need your help and these are our thoughts on what would help', was about the size of it. The delegates deliberately did not assign blame or complain about any one partner. They did not make comparisons between different local approaches, but focused on the one collective message. They were clear that Healthy Living Centres unique selling point was their particular capacity to join up community agendas with organisational and government agendas.

That is not to say that the delegates were arrogant. Understandably delegates were a little nervous prior to the meeting. They also understood the import of the meeting and were duly humble. "We thought we were doing well when we were not huddled out after 15 minutes." one delegate commented.

After the meeting delegates had a bit of a debrief. They felt they had done their best, that their preparation had seemed worthwhile. Most importantly delegates felt a sense of pride – five years of their efforts in Healthy Living Centres were being recognised. They felt justified in basing their approach on evidence and not emotion. "We did everything as we had planned. We were able to respond to all the Cabinet Secretary's questions and I felt we got a fair hearing" commented a delegate. The sense of achievement was apparent to anyone who spoke to the delegates.

All the preparation paid off. On the 19th February 2008 Nicola Sturgeon, Cabinet Secretary for Health and Well being announced the provision of a transitional fund of up to £2.5 million for those Healthy Living Centres facing closure to continue seeking longer term sustainability with local partners.

The Healthy Living Centre Alliance met with Scottish Government Officials on 22 February 2008 to discuss the details of the fund and the Alliance issued guidance to Healthy Living Centres along with the Government's criteria for accessing the transitional fund.

8. Reflecting on the Experience

On reflection, it seems incredible that, in the space of 5 months, a loose network of Healthy Living Centres could go on to become an effective formal Alliance. The process and approach were not clear cut and did not necessarily move forward in neat steps. There were many uncertainties, circumstances that changed unpredictably and had to be responded to, fears about stepping forward, lack of experience in engaging the political system, the possibility that all actions would be futile... the list could go on. On the other hand the very real urgency to do something was a strong driving force. Timing was everything – well almost. There was strength in numbers, there were allies and champions. The Healthy Living Centres had the Support Unit with its overview of the situation and facilitative role. The Alliance had one clear vision and action plan to drive that one vision forward. And very importantly, they also had a clear view of their approach – they were seeking resolution not retribution.

All parties involved agreed that the research carried out by the Support Unit was key to the Alliance's success. It was factual and gave a good overview of what was involved and the affect on the infrastructure of community led health if a 'do nothing' option was followed. It raised the issues facing Healthy Living Centres and made the connection to wider circumstances such as NHS reorganisation. It was written by the support Unit which was seen as impartial with no axe of its own to grind.

But the best evidence is not worth much of it is not used well. The Alliance's formation and activities showed community development principles in action, all the way through. This was definitely a collective action agenda – the Alliance had a very strong sense of purpose. Also all partners were clear as to the purpose and goal of the Alliance – to get transitional funding for Healthy Living Centres so that they have more time to conclude local negotiations for long term sustainability.

There was good communication throughout. This kept all parties informed and also ensured transparency – there was nothing to hide, no devious plans were afoot. The Alliance was upfront, honest, made a concerted effort not to play political games, be non confrontational in their approach and friendly. The way the Alliance behaved toward external partners, honestly and without blame went a long way in making the Alliance appear to be trustworthy. They did not pitch any one partner against another and did not complain about partners. This would have been a significant factor in making the Alliance "easy to deal with" as one partner put it. The Alliance's behaviour toward its partners helped to create good working relationships and meant that others wanted to help. It also meant that their representations were well received.

The senior Scottish Government officer later reflected that his initial engagement with the Alliance had laid the foundations for a longer term relationship. He felt that the Alliance had a mature approach that understood the Government perspective. He found the interactions with Support Unit and Alliance members to be informative and felt that the Alliance was making a conscious effort to have a dialogue. He also stated that the Alliance's decision not to blame anyone was a very positive experience for him. Again, this is a result of the initial commitment the Alliance made to behave with integrity and to focus on making a case rather than vent their anger or frustrations. The fact that they took a solution finding approach by demonstrating a strong case for continuation drew others into dialogue. A more aggressive approach such as an all out media campaign might have had a net negative effect. Some partners might have found themselves pushed into a corner having to justify their decisions, and attitudes might have hardened.

The contribution of the Support Unit to the Alliance's successes needs to be made explicit. Individual Healthy Living Centres are clear that the facilitative function of the Support Unit would not have worked had it been provided by, for example, an external consultancy. Certainly not in the short timescale that the Alliance had. The main reason given for this was that the Support Unit already had a good relationship with Healthy Living Centres.

Staff at the Support Unit were, as one individual put it "steeped in the arguments. They knew our history and experiences and are as passionate about Healthy Living Centres as we are. They had the material and contacts and had credibility with us and also with the Scottish Government. They also have a great sense of humour. They were human to us".

Then there was the mindset of the Alliance's members and the way they chose to behave with each other. The Alliance had a positive approach from the very start. They knew that there were many uncertainties, ifs and buts; but decided to 'take a punt' anyway.

Everyone contributed to the best of their ability, with some having more overt roles than others. Here was a sense of unity and pragmatism – not everyone can be heavily involved, but that's Ok, since people knew Healthy Living Centres had different capacities to take on extra work load. However everyone played their part, for example, information sought was provided within time.

Those who formed the delegation to the Cabinet Secretary reported that they felt 'huge amounts of trust' from their fellow members. Their meeting would affect everyone's future after all. Delegates felt supported since the Alliance had agreed what their stance was and were in regular communications with the wider membership with help from the Support Unit.

Although everyone was working to tight timescales on a matter that they all felt passionate about, it was also enjoyable. "The patter was good. We were able to have a laugh", one delegate reported. "It also took a lot of courage to step up and be recognised" another member said of the delegates. This mutual appreciation of each other functions drew the Alliance members closer together.

The preparation that delegates had put into their meeting with the Cabinet secretary also paid dividends. They received a fair hearing and acknowledgement of their work. Feedback from the meeting with the Cabinet Secretary reported that she was impressed by the delegations professionalism. That the Cabinet Secretary gave the delegation more than the allotted time and had seen fit to invite the Minister for Public Health along to the meeting are testament to the regard in which the Alliance was held and the relationship they had built with Scottish Government officers. "They made a really good case and played their cards well".

In addition to the immediate stay of execution, the Alliance's approach meant that they had laid good foundations for future relationship with the Scottish Government. They have kept in touch with Scottish Government officials and have a commitment from the Cabinet secretary to meet with them in the future.

What comes through on reflection is that although the Alliance was a formal organisation, it was populated with people that engaged with others on a human level. Individuals within the Alliance and Support Unit had good interpersonal skills and were personable. But there was something more. Individuals in the Alliance and Support Unit tended to pepper their reflections with words and phrases such as 'huge amounts of trust', 'building long term relationships', 'having a sense of humour', 'friendly', 'we got on well', 'courage' and so on. They indicate that individuals were interacting as people. It is not something that is explicitly talked about in formal circles where partnership working is discussed, but obviously had a direct bearing on the working relationships that the Alliance built in a short space of time.

On the whole, the experience was a positive one for those involved. In the words of one volunteer, "the results we got justified our approach. The whole experience reinvigorated people and gave us all a sense of pride, (because) our efforts over the past 5 years had been recognised. We now have a sense of the future. The job is not done but we have made a good start".

Footnote July 2015

Following this process the Alliance went on to spread its net more widely and has now grown into the Scottish Communities for Health and Wellbeing with a membership of 70+ organisations who sustain their activity sometimes through collaborative bidding for national contracts.

Further information about them is available on their website.

<http://www.schw.co.uk/index.html>