

Public health reform

Strengthening and re-focusing the public health function in Scotland



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# Public Health Reform Programme Workforce of the new body – Organisational Development Project Commissioning Brief



**Authors:** Robert Skey / Amanda Trolland

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<b>Contact:</b>	Amanda Trolland, Programme Manager
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<b>Name:</b>	<b>Signature:</b>	<b>Title:</b>	<b>Date:</b>	<b>Version:</b>
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Marion Bain	<i>M Bain</i>	Co-Director		
Eibhlin McHugh	<i>E McHugh</i>	Co-Director		

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## 1. Purpose of this document

To commission organisational development support to work with NSS and HS to develop strong, future proof organisational values for the new public health body, and in doing so begin the development of the new and shared culture that will enable the new body to deliver the ambitions and aspirations of public health reform.

## 2. Draft Vision for the Public Health Reform Programme

*“A Scotland where everybody thrives”*

## 3. Draft Mission for the Public Health Reform Programme

*“To lead, drive, support and enable a public health system fit for the challenges of the 21<sup>st</sup> century”*

## 4. Draft Goals for the Public Health Reform Programme (the desired result):

- Be a world leader in improving the public’s health and preventing disease.
- Reduce health inequalities.
- Local systems are empowered and solutions to local health challenges are co-produced with local communities.
- Establish joined up ways of working at all levels and across the whole system.
- Protect the nation from public health hazards and work towards a sustainable environment.
- Identify, prepare for and respond to public health emergencies and challenges.
- Share data, information and expertise to improve our shared understanding of public health challenges and to come up with answers to public health problems.
- Continuously improve the quality, safety and effectiveness of the services we deliver.
- Design and deliver joint policy initiatives that have the capacity to have the biggest impact on prevention, early intervention and improved health.
- Whatever the setting, provide services to the highest standards of quality and safety, with the person at the centre of all decisions.

## 5. Draft Values for the Public Health Reform Programme (the standards of behaviour we believe in):

- Excellence: a dedication to excellence in our pursuit of health equity and social justice.
- Leadership: work collaboratively to establish cutting edge leadership practice that maximises the impact of our shared endeavour across the whole system.
- Results: using evidence and data to increase the impact of public health and population health practice.
- Innovation: identifying, creating, testing, and advancing idea-driven and high-impact solutions.
- Service: A duty to provide the highest levels of service to public health internationally, nationally and locally.
- Integrity: maintaining a high level of trust, honesty, and accountability.
- Ethics: a commitment to the highest standard of ethics and integrity.
- Diversity: a promise to respect human differences in all aspects of our mission.
- Facilitation: building respect, understanding, consensus and partnership working across the whole system.
- Passion: continuing a strong commitment to the public health community.

- Performance: helping people and organisations use data and information to improve practice.
- Reach: working across disciplines and sectors to enhance individual and organisational capacity and capabilities.
- Outcomes: connecting individuals and organisations across multiple disciplines and sectors to improve the health of communities.

## 6. Scope of this Commission

This commission is about developing the workforce of the new public health body, with the initial piece of work to do this focused on the shaping and identification of organisational values.

Our public health approach to date has not delivered the significant and major improvement gains needed to bring Scotland's health in line with other Western European countries or to address Scotland's health inequalities.

The new public health body will see approximately 700 staff from Public Health Intelligence, National Services Scotland and Health Scotland come together to form a new single organisation. The new organisation must be able to operate effectively from the start, able to provide public health expertise and professional support to the whole system, with a view to becoming a world leader in driving public health improvement across the whole system.

With this in mind, work is now required to identify strong organisational values that will underpin the work required by the new public health body in achieving the future state of the blueprint. In line with the 2015 Public Health Review, we need organisational values which:

- underpin and support our ability to bring together the breadth of public health practice in Scotland, and support joint working at all levels;
- support increasing engagement and communication with local systems and communities.
- can respond to the complexities of an external environment with multiple accountabilities to a diverse range of stakeholders across local government, NHS and Scottish Government.

## 7. Blueprint

On behalf of the Public Health Reform (PHR) Programme Board, the PHR programme team have combined the outputs from the 2015 Public Health Review and the learning from the recent 'think piece' commissions into a map of the expected capabilities that the PHR programme is expected to achieve (the blueprint). Annex A sets out the capabilities in the blueprint and describes our working understanding of how things look today and what we expect things to look like in the future. This future state must be capable of achieving the desired outcomes and benefits we have set out in our programme design principles (see Annex B).

## 8. Objectives for this Commission

The PHR programme board would now like the following objectives achieved by this commission:

1. Identification of suitable Organisational Development support to deliver the commission.
2. With this Organisational Development support, set up and facilitate a number of workshops to develop organisational values for the new public health body;
3. Describe how the new public health values will underpin the work undertaken by the body;
4. Identify what further work is required to develop the workforce to deliver the aspirations for the new public health body and public health reform.

## 9. Deliverables

**Deliverable 1** - Documentation setting out the proposed OD support its governance structure and a timeline for draft and final deliverables.

**Deliverable 2** - Documentation outlining an approach to organisational development.

**Deliverable 3** - Documentation outlining proposed organisational values for the new public health body.

**Deliverable 4** - Product list, timeline and risk register for the development of values for the new public health body.

**Deliverable 5** – Documentation outlining proposed next steps for organisational development of the workforce of the new public health body.

## 10. Outline Delivery Plan

Dates for the submission of draft and final deliverables are to be advised by the NSS and HS project team as set out at Objective 1 above.

## 11. Stakeholders

The PHR programme team have identified a number of stakeholders that could be involved in delivering the commission, consistent with our commitment to develop a whole system approach to improving the public's health. Further information can be found in the Communication and Engagement Strategy circulated with this commission. Staff side colleagues will have a key role in developing and supporting this commission.

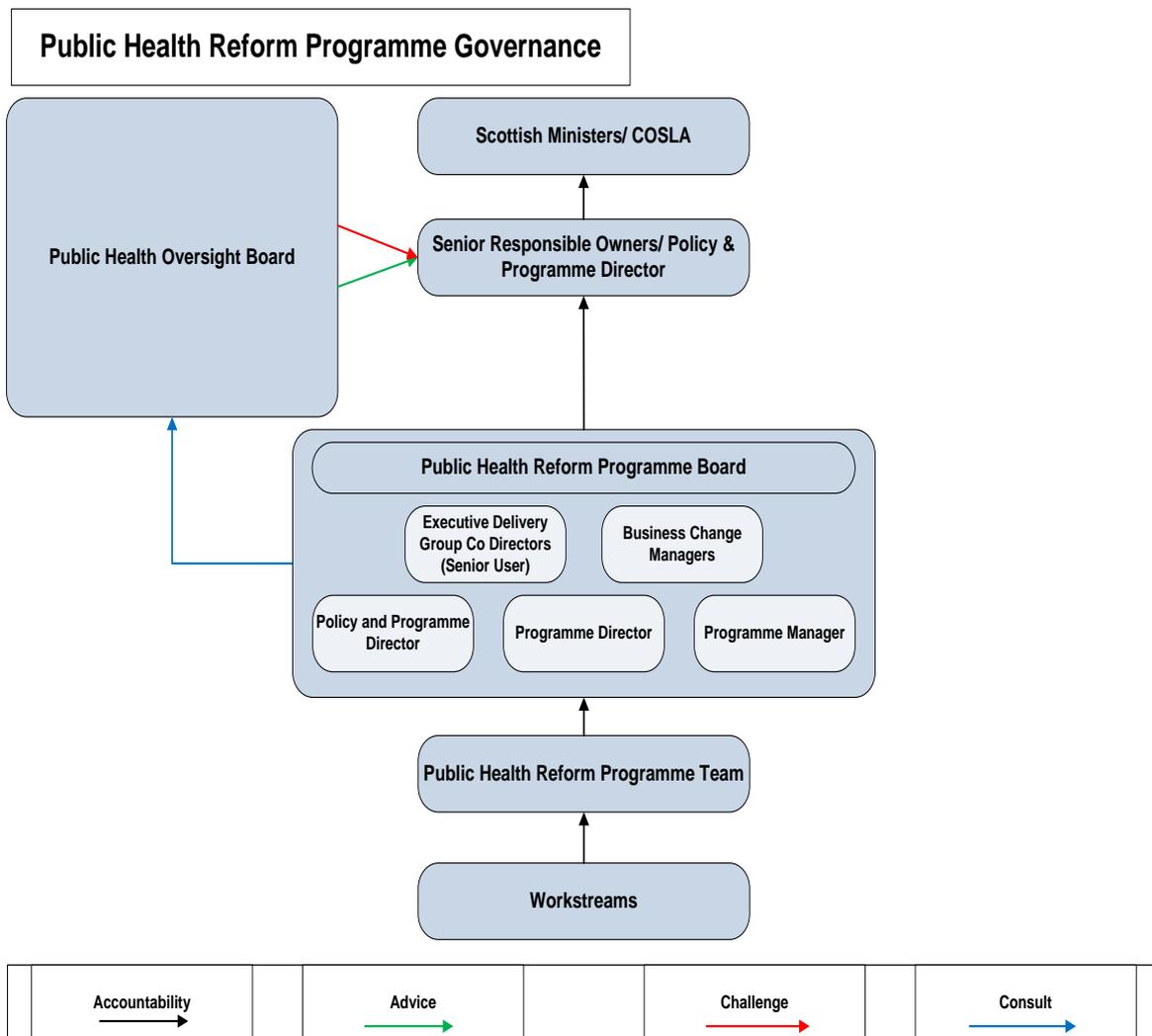
Additionally, the commission is an important opportunity to build effective relationships between the different constituent bodies who will come together to form the new body (HS, NSS Public Health and Intelligence). Therefore, it is the PHR programme board's expectation that there will be close working between these organisations in the delivery of this commission and that all products produced as a result of this commission will be agreed by them collectively, which will support the development of a strong and cohesive culture within the new body.

## 12. Other National Strategies and Programmes

This commission should take into account any other programmes or strategies relevant to organisational development.

## 13. Governance & reporting

The project team will report to the PHR programme board via the PHR programme team as outlined in the governance structure below.



Monthly progress reports will be required and should be submitted to the PHR programme team ([publichealthreform@gov.scot](mailto:publichealthreform@gov.scot))

## 14. Support

The PHR programme board recognise that delivery of this commission will require related support and guidance and have instructed the PHR programme team to help commissioned organisations, as appropriate, in taking forward commissions. The programme team will shortly be appointing a finance co-ordinator to offer related advice and support (for example, in relation to “as is” and “future state” budgeting and related due diligence work) and they will also look to bring forward other experts as needed in areas such as finance, IT, human resources and communications and engagement, where such resource is not readily available within the project team formed to deliver the commission.

# ANNEX A – Draft PHR Programme Blueprint



## ANNEX B - DESIGN PRINCIPLES

### Public Health Priorities

- Public health priorities will represent a broad consensus and set a foundation for all parts of the public sector in Scotland to contribute towards sustainable public health outcomes. To achieve this, the development process itself will seek to build momentum and meaningful engagement, with strong partnership working and service interaction with the wider public sector.
- Priorities will be informed by the best available evidence, building upon local assessments undertaken to development Local Outcome Improvement Plans. The priorities will focus on those activities that have the greatest potential to make a significant improvement to health gains, inequalities and sustainable economic growth over the next 10 years.
- The priorities will address the full spectrum of public health. We will brigade our public health activities around evidence (making best use of intelligence and decision support); people (ways of living that promote health and wellbeing and prevent ill-health in the context of personal circumstances and preferences); place and culture (creating healthy places and a culture that supports health and wellbeing); and systems (health and wellbeing promoting and protecting systems, including digital ones).
- Public health priorities will be reviewed at key points to adjust them in the light of progress.

### Public Health at the National Level

- The organisational model for the new body will be co-designed by Scottish Government, Local Government and NHS Scotland, working with the third sector and other partners.
- The governance and delivery model for the new body will include meaningful accountability to both Local and National Government.
- The new body will provide strong, visible independent public health leadership to challenge, support and deliver our agreed national priorities.
- The new body will '*declutter*' and simplify the national public health landscape.
- The new body will be, and be seen to be, upstream of and separate from the NHS, while retaining important operational links.
- The new body will have an overall responsibility for ensuring that the best use is made of public sector data, initially starting with health and Local Government data, and will use this in ways to support public health improvement.
- The new body will provide capacity and capability to ensure national and local decisions and interventions are intelligence and evidence led, and that local professionals (in Local Authorities, Community Planning Partnerships, Integration Authorities and NHS Boards) are supported in areas such as service change, efficiencies, economic impact, equality of prosperity and inclusive growth.
- Where appropriate, and where the new national body provides the best opportunity for doing so, some functions will be delivered nationally on a 'once for Scotland' basis.
- The new national arrangements will support a multi-agency approach to public health both nationally and locally.

- The new body will be staffed by a 21<sup>st</sup> Century public sector workforce, continuously seeking to improve efficiency across the public sector; encouraging the application of generic skills as well as international expertise; grounded in agreed ethics and values; and fostering leadership at all levels.

## **Public Health at the Local Level**

- Support for local public health activity in order to contribute to delivery of the public health priorities is strengthened. The offer of support will include the third and independent sectors where that is appropriate.
- Additional or new local structures will not be created on top of the existing complex landscape.
- Our work will be informed by the agreed public health priorities (with form following function).
- Additional local priorities and a flexible approach to local prioritisation will be respected and supported.
- The successful establishment of a credible, effective new public health body which is responsive to local strategic planning needs is key to building momentum and support for stronger local partnerships.
- It may not be possible to define solutions immediately and opportunities may arise naturally for us to try different models of strengthening local partnerships. We will seek to make effective use of such opportunities.