

Public Health Reform Programme Improving Services (Health and Social Care Public Health) Commission

**Deliverable 1 - project team membership,
governance structure and timeline for draft and final
deliverables.**

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1. Membership of the Project Team

The Public Health Reform team have commissioned National Services Scotland (NSS) and the Integrated Joint Board (IJB) Chief Officers' Group to undertake work with Healthcare Improvement Scotland and the Public Health Service Improvement Interest Group to describe and produce options for delivering a strong, effective and forward looking HCPH domain at national level within the new public health body; and in turn, describe how this will support and enable Public Health activities at the regional and local level across the wider Scottish health system.

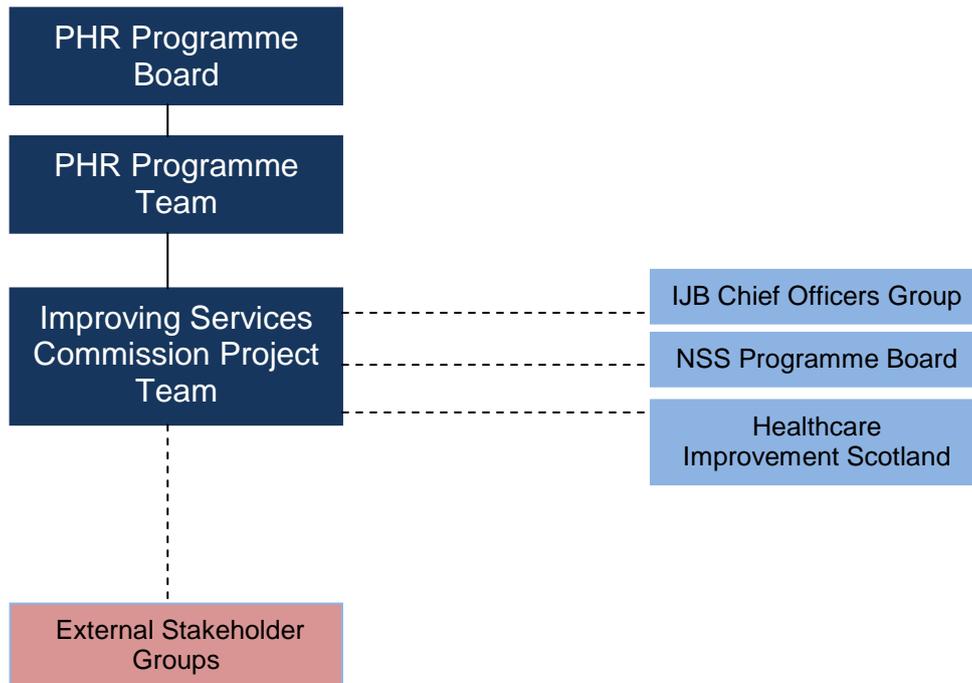
The following multidisciplinary and pan-organisational project team is proposed:

Name	Role	Responsibilities
Allister Short Joint Director Midlothian H&SC Partnership	Chair & IJB lead	<ul style="list-style-type: none"> • Co-chair meetings of the Improving Services commission project team • Report progress to the PHR project team • Accountable for the delivery of the PHR programme's objectives and deliverables • In partnership with NSS lead, provides clear leadership and direction to the project team
Lorna Jackson Associate Director Analytics and Intelligence, PHI, NSS	Chair & NSS lead	<ul style="list-style-type: none"> • Co-chair meetings of the Improving Services commission project team • Report progress to the NSS ePHB Programme Board and the PHR project team • Accountable for the delivery of the PHR programme's objectives and deliverables • In partnership with IJB lead, provides clear leadership and direction to the project team
Josephine Pravinkumar Consultant in Public Health Medicine, NHS Lanarkshire	Public Health Service Improvement Interest Group representative	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
William Moore Consultant in Public Health Medicine, NHS Grampian	Public Health Service Improvement Interest Group representative	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
Pauline Craig Head of Population Health, NHS Health Scotland	NHS Health Scotland representative	<ul style="list-style-type: none"> • Provides Subject Matter Expertise • Supports the programme's vision
June Wylie Head of Improvement Support, Healthcare Improvement Scotland	Healthcare Improvement Scotland representative	<ul style="list-style-type: none"> • Provides Subject Matter Expertise • Supports the programme's vision
Vicki Elliot, Unison Staff Side	Partnership Representative	<ul style="list-style-type: none"> • Represents staff interests • Provides Subject Matter Expertise • Supports the programme's vision
Hester Ward Consultant in Public Health Medicine, PHI, NSS	NSS PHI representative	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
Alex Stirling Consultant in Public Health Medicine PHI, NSS	NSS PHI representative	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
TBC, Third Sector Representatives	Representative from the Alliance	<ul style="list-style-type: none"> • Third sector representative • Provides Subject Matter Expertise • Supports the programme's vision •

TBC Regional or IBJ Planning lead	Planning and commissioning	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
TBC Medical Director	Medical Director representative	<ul style="list-style-type: none"> • Clinical lead • Provides Subject Matter Expertise • Supports the programme's vision
Safia Qureshi Programme Director, NSS	Programme Management	<ul style="list-style-type: none"> • Provide support to the project team to achieve its goals • Responsible for the planning and designing of the programme and proactively monitoring its overall progress • Managing and resolving risks and issues, escalating where appropriate • Ensuring the delivery of the products or services from the projects meets the programme requirements and is to the appropriate quality, on time and within budget • Manage communications with stakeholders
Alan Madden, Project Manager, PgMS	Project Management	<ul style="list-style-type: none"> • Supports the co-ordination and delivery of the project team's goals • Provide project management expertise including day to day management • Support the planning and designing of the programme and proactively monitoring its overall progress • Managing and resolving risks and issues on an operational level, escalating where appropriate • Ensuring the delivery of the products or services from the projects meets the programme requirements and is to the appropriate quality, on time and within budget • Support the management of communications with stakeholders

2. Governance Structure

The National Services Scotland, the IJB Chief Officers' Group and Healthcare Improvement Scotland and will report via their own internal governance structures, to the programme board via the programme team as outlined in the governance structure below. Monthly progress reports will be submitted to Amanda Trolland in the programme team.



3. Timeline for draft and final deliverables

Deliverable	First draft for review	Final deadline
1. Membership of the project team, its governance structure and a timeline for draft and final deliverables.		8 th August 2018
2. Current HCPH functions and how they support service delivery.		31 st August 2018
3. Approach to customer engagement, including stakeholder mapping.		31 st August 2018
4. Outline of customer requirements.		31 st October 2018
5. Current and proposed future state for the HCPH function, including: <ul style="list-style-type: none"> – proposed benefits and benchmarks – organisational structure diagrams – senior management roles & responsibilities – additional skills and training requirements – additional IT systems, infrastructure and processes – additional physical equipment and building – additional business processes, support processes or service management functions – related financial costings for any additions to current arrangements. 		31 st December 2018
6. Product list, timeline and risk register for the transition of current and any proposed new HCPH functions from its existing organisation to the new public health body.		31 st December 2018
7. Updated and finalised due diligence intelligence set out in Annex C of the commission		31 st October 2018

Note:

Timelines aligned to Underpinning Data and Intelligence Commission timelines given overlap of key content/stakeholders

Risk specifically associated with this commission will be identified and any which may affect the overall programme will be raised to Programme Board and added to board level risk register

4. How we will work together

The members of the Improving Services Commission are committed to producing options for delivering a strong, effective and forward looking HCPH domain at national level within the new public health body; and in turn, describe how this will support and enable Public Health activities at the regional and local level across the wider Scottish health system.

We recognise that change can be challenging and bringing together different perspectives, cultures and ways of working can, at times, lead to conflicting views and opinions. We want to acknowledge these differences and to work with them to shape and challenge our thinking in order to reach the best outcome. There is clear decision-making role for the members of the Improving Services Commission. However, we would also wish to note that where consensus can't be reached, the minority view will be reflected in the options that are presented to the Programme Board.

In working together, we will individually and collectively aim to reflect the values of the Public Health Reform Programme

- 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.

5. Document Control Sheet

Title:	Public Health Reform Programme Improving Services Commission Deliverable 1
Date Published/Issued:	
Date Effective From:	
Version/Issue Number:	1.0
Document Type:	Response to commission
Document Status:	Submitted
Author:	Safia Qureshi
Owner:	Lorna Jackson, Allister Short
Approver:	Improving Service Project Team
Approved by and Date:	
Contact:	
File Location:	

Revision History:

Version:	Date:	Summary of Changes:	Name:	Changes Marked:
0.1	06/07/2018	First draft	Lorna Jackson	
0.2	26/07/2018	Second Draft	Allister Short; Lorna Jackson	How we will work together; update membership details
0.3				
0.4		Additional members	SQ/LJ	
1.0	07/08/2018		SQ	Accepted changes

Approvals: This document requires the following signed approvals.

Name:	Signature:	Title:	Date:	Version:

Distribution: This document has been distributed to

Name:	Title/Division:	Date of Issue:	Version:
Project Team members as per section 1		06/07/2018	0.1
Ditto		16/07/2018	0.2
Co-chairs		03/08/18	0.4