

Minutes & Actions

Meeting: Public Health Reform Programme Board
Date: Tuesday 25th September 2018, 10am to 1pm
Location: Hilton Edinburgh Carlton, North Bridge, Edinburgh EH1 1SD

In Attendance:

Members

- (MB) Marion Bain, Co-director, Co-director, Public Health Reform Executive Delivery Group
- (PC) Phil Couser, Business Change Manager, Director of Public Health and Intelligence, NHS National Services Scotland
- (LD) Linda DeCaestecker, Directors of Public Health Representative
- (GM) Gerry McLaughlin, Business Change Manager, Chief Executive, NHS Health Scotland
- (EM) Eibhlin McHugh, Co-director, Public Health Reform Executive Delivery Group
- (GO) Geoff Ogle, Public Body Chief Executive, Food Standards Scotland
- (SP) Susan Paxton, Scottish Community Development Centre (SCDC)
- (JW) John Wood, Senior Responsible Owner, Public Health Reform

Subject Matter Experts in attendance

- (AR) Andrew Robertson, Corporate IT Project Lead
- (RR) Ruth Robertson, NHS Education for Scotland Representative (in place of Karen Wilson)
- (KS) Kenny Small, HR Project Lead
- (LW) Louise Wilson, Faculty of Public Health Representative

Support

- (CM) Chris Mcgrogan, Programme Support Officer, Public Health Reform Team
- (RS) Robert Skey, Head of Public Health Reform, Scottish Government
- (AT) Amanda Trolland, Programme Manager, Public Health Reform Team

Apologies

- Mahmood Adil, Clinical Professionals' Representative, NSS and Health Scotland
- Gareth Brown, Policy and Programme Director Public Health Reform
- Ian Cant, Employee Director, NSS
- Patricia Cassidy, Integrated Joint Board (IJB) Chief Officer Representative
- Michael Craig, Trade Unions' Representative
- Paul Dowie, Improvement Services Representative
- Julia Egan, Public Health Nursing Representative
- Andrew Kerr, SOLACE Representative
- Liz Manson, Community Planning Representative
- Mark McAllister, Communications Lead, Public Health Reform Team
- Alan Morrison, Society of Chief Officers of Environmental Health Representative
- Maggie Sandison, SOLACE Representative
- Andrew Scott, Senior Responsible Owner, Public Health Reform
- Karen Wilson, NHS Education for Scotland

1. Welcome and Apologies

JW welcomed attendees to the 7th meeting of the Programme Board. Apologies were noted.

2. Minutes of the Last Meeting (*Paper 1*)

It was agreed that the August minutes should be amended to reflect the political decision to establish Public Health Scotland as a Special Health Board.

The Board discussed the importance of communicating this important decision and recommended that the Scottish Government highlight this in their regular update to Health Board Chief Executives.

Action 01 (25/09/2018) – PHR team to ensure Health Boards are advised of the decision to establish Public Health Scotland as a Special Health Board.

Action 02 (25/09/2018) – CM to amend the minutes of the August minutes to reflect the political decision.

There was discussion around Estates and the Board agreed that this topic should be brought forward to the October Programme Board in the form of a new PID.

Action 03 (25/09/2018) – CM to add Estates PID as an item for discussion on Octobers Programme Board Agenda.

Action 04 (25/09/2018) – AT to develop an Estates PID for discussion at the next Programme Board.

With the above noted amendments, the Minutes were agreed as a true and accurate reflection of the meeting.

3. Programme Performance Monitoring / Management (*Paper 2*)

Executive Delivery Group (EDG) – General Update

MB provided an update on current activity and highlighted the challenges being identified by Commission Leads as they progress the detailed work. MB noted the good progress being made within and across Commissions and the related IT and HR connections that are being identified. The next stage is to bring all this work together.

In relation to whole system work, EM advised that the stakeholder mapping task has drawn to a conclusion and the team are now focused on engagement, the priorities, resourcing and leadership aspects.

It was noted that Faculty of Public Health members located in remote, rural and island areas have expressed an interest in being involved in the engagement activities. EM confirmed that the team are thinking about how to enable this.

This led to a discussion about staff engagement and how best to communicate with staff. It was noted that the feedback from the Staff Briefing Sessions was positive, with the

sessions being well received. KS advised the Board that he and MM are in discussion about future communications and engagement activity and will bring details to a future Board meeting. The Board requested that Staff Side be involved throughout these planning and engagement sessions.

Action 05 (25/09/2018) – KS and MM to engage with Staff Side Representatives on what can be done to support engagement.

Summary Report including Milestone Chart – Paper 2

AT provided an overview of the dashboard and advised the Board that the overall RAG status is still reporting as green.

On Commissions, AT advised that Improving Services Deliverables 2 & 3 were delayed but noted that the Commission Leads have provided assurances for the rest of the deliverables. Improving Health have been issued with the product description for deliverable 4 but have advised they are only in a position to partially deliver and will provide an update to the next Board meeting. Paperwork has issued for the Specialist Public Health Workforce Commission (SPHWC). The Corporate Services and Target Operating Model PID's are on today's agenda.

PC asked if the SPHWC are expected to make wide-ranging recommendations that would have legislative consequences, as we need to be clear about this and ensure it is not a constraint.

RS noted that the reform programme has the scope and legislative space to set out the requirements for the new Public Health Body. Any additional legislation, especially primary legislation, would be outside the scope of the planned work for this phase of reform.

The timelines for establishing the new body and its vesting day were discussed. RS advised that the transfer of functions, staff etc will be no later than the 1 December 2019 and that he would provide details of the current timelines for the legislation and recruitment process to the Board.

Action 06 (25/09/2018) – RS to provide timelines for PHS legislation and Board recruitment activities.

The Board discussed the language used in the SPHWC Commission and agreed it was important to get this right. The Board agreed that further conversation around language should take place.

Action 07 (25/09/2018) – RR to provide feedback to AT around SPHWC language.

The Board were content with the milestone chart.

4. Specific Commission / Project Updates

Designing Public Health Scotland

Improving Services - Deliverable 2 (Paper 3) – For input

The Board agreed that this was an enormous amount of information which is very

comprehensive. They asked for this information to be summarised for the October meeting.

Action 8 (25/09/2018) – MB to seek a summary of Deliverable 2 from the Improving Services Commission.

The Board were advised that one of the Co Leads from Improving Services has stepped down from the role but it was noted that the EDG are working to identify a new Co Lead.

Improving Services - Deliverable 3 (Paper 4) – For input

The Board agreed that it was important for this Commission to come out of the engagement stage with a clear sense of what Public Health Scotland will provide. The Board noted that it would be helpful to have a planning lead involved.

Action 9 (25/09/2018) – PHR Team to provide feedback on Deliverable 3 to Improving Services.

Leadership for Public Health Workforce Development - Deliverable 2 (Paper 5) – For input

MB confirmed that this deliverable provided a helpful and comprehensive description of the current landscape.

EM noted that the scope of this Commission is challenging and highlighted the importance of the wider workforce being able to see themselves reflected in the work. EM advised that she is considering how best to describe such roles, specifically in the public sector and felt that it might be useful to use thematic groupings.

SP suggested that the Priorities could provide a framework within which the roles of the public health workforce across the wider system could be identified and enable the workforce to more easily associate their roles with public health.

PC noted that the Board need to communicate what Public Health means and to make sure there is a common language so that people can see their roles within the Public Health Priorities.

Action 10 (25/09/2018) – EM to provide more detailed feedback to Leadership for Public Health Workforce Development on Deliverable 2 to the Commission.

Leadership for Public Health Workforce development - Deliverable 3 (Paper 6) – For input

MB noted that the Stakeholder Engagement Plan needed more detail around the practicalities.

IH/PH/IS/UDI - Deliverable 4/5/6 Product Descriptions (Paper 10,11, 12 & 13) – For approval

GM asked if there could be a 4th Bullet point added in, which is could it be delivered by someone/thing other than PHS.

Action 11 (25/09/2018) – AT to update the Product Descriptions and circulate to the Commissions.

Corporate Arrangements

Corporate IT – presentation

AR provided a presentation on Corporate IT outlining progress, key messages and priority areas.

In order to progress the work and some key decisions quickly, the Board agreed that a Corporate IT Project Board should be established to govern the day to day work.

It was suggested that a colleague from the Digital Health and Strategy team should be involved.

Action 12 (25/09/2018) – AT to invite Christine McLaughlin to nominate a colleague to join the Corporate IT Project Board.

On Priority Areas, it was noted that universities are missing from the list.

HR for the new body – presentation

KS provided a presentation on HR for the new body.

The Board agreed it would be helpful to make a connection with the Organisational Development Commission and understand the linkages for the body. In order to progress the work and some key decisions quickly, the Board agreed that a Corporate HR Project Board should be established to govern the day to day work.

There was a discussion around finances. The Board were advised that an intent exists for all current assets to be protected and for any savings delivered to be retained by the new body.

Action 13 (25/09/2018) – JW asked the Board to send all questions in relation to HR for the new body to Kenny Small via email.

Shared services PID –

RS provided an overview of the Shared Services PID and the milestones that need to be delivered.

The Board discussed the PID and the related corporate arrangements and agreed to rename the PID to 'Corporate Services'.

The Board agreed that this Project can now begin. They asked for some re-drafting of the functions section before being published.

Action 14 (25.09.2018) – AT to re-draft the Corporate Services PID and circulate to the Board.

Target Operating Model PID (Paper 15) – For approval

RS provided an overview of the Target Operating Model (TOM) and advised there are nine

deliverables in total and that a team is needed to begin this piece of work. The Board approved this PID while noting that COSLA resource needs to be involved.

5. Communications and Engagement

Faculty of Public Health Event – Proposal (Paper 17)

Due to time constraints this was not discussed.

6. Risks and issues (paper 18)

Due to time constraints this was not discussed.

7. AOB

The subject of funding for year 2019/2020 was discussed. It was agreed that this would be brought to the next Programme Board in October.

8. Date of Next Meeting

Monday 22nd October from 2pm – 5pm at COSLA, Verity House, 19 Haymarket Yards, Edinburgh, EH12 5BH

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Action Ref.	Action	Due Date	Revised Due Date	Owner	Update
September Programme Board					
01 (25/09/2018)	PHR team to write to all Health Boards advising them on the decision of Public Health Scotland becoming a Special Health Board.			PHR Team	
02 (25/09/2018)	CM to amend the minutes of the August meeting to reflect the decision of Public Health Scotland becoming a Special Health Board.			CM	
03 (25/09/2018)	CM to add Estates PID as an item for discussion on Octobers Programme Board Agenda.			CM	
04 (25/09/2018)	AT to develop an Estates PID for discussion at the next Programme Board.			AT	
05 (25/09/2018)	PHR Team to ensure that all areas have an equal opportunity to participate in engagement events.			PHR Team	
06 (25/09/2018)	EDG to engage with staff side reps on what can be done to support engagement.			EDG	
07 (25/09/2018)	RS to provide a timeline on PHS legislation activities to the Board.			RS	
08 (25/09/2018)	RR to provide feedback to AT around SPHWC language.			RR	
09 (25/09/2018)	RS to provide timelines for the recruitment of the PHS Board to the Programme Board.			RS	

10 (25/09/2018)	MB to seek a summary of Deliverable 2 from the Improving Services Commission.			MB	
11 (25/09/2018)	PHR Team to provide feedback on Deliverable 3 to Improving Services.			PHR Team	
12 (25/09/2018)	EM to provide more detailed feedback to Leadership for Public Health Workforce Development on Deliverable 2 to the Commission.			EM	
13 (25/09/2018)	AT to invite Christine McLaughlin to join the Corporate IT Project Board.			AT	
14 (25/09/2018)	JW asked the Board to send all questions in relation to HR for the new body to Kenny Small via email.			The Board	
15 (25/09/2018)	AT to redraft the Corporate Services PID and circulate to the Board.			AT	
July Programme Board					
02 (23/07/2018)	PHRPT to ensure future meetings provide protected time for the Programme Board to review the outputs from the Commissions and to consider this against the vision and ambitions of the programme.	29/08/2018	25/09/2018	AT/CM	Under review
06 (23/07/2018)	GM to produce a narrative around the new public health Priorities and the national framework linkages.	29/08/2018	25/09/2018	GM	Carried over
12 (23/07/2018)	AT to speak to PHR Comms team around the production of a checklist for documents to be published.	29/08/2018	25/09/2018	AT	Carried over