

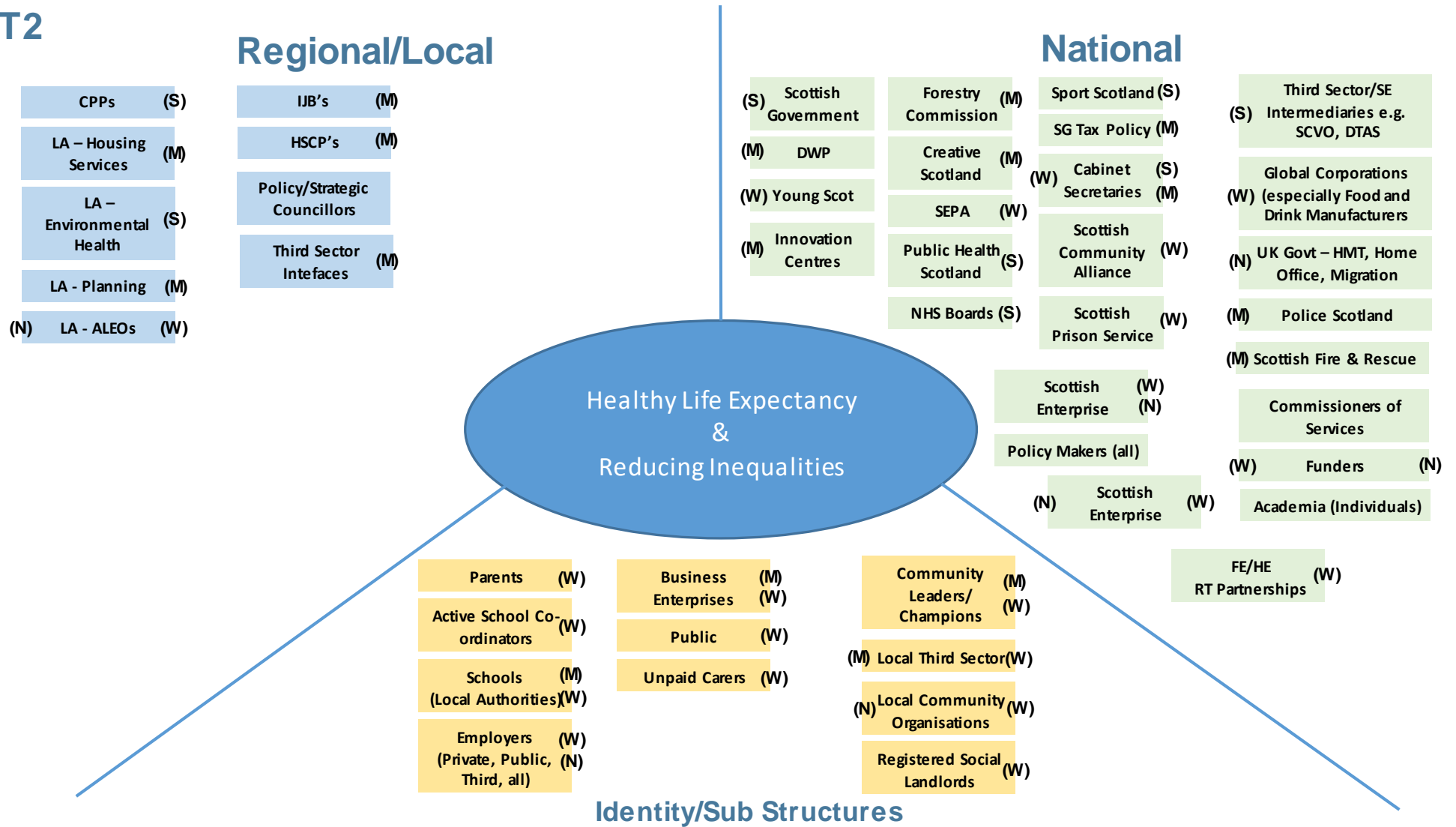
**PHR: Enabling the Whole System Event**  
**Thursday 24<sup>th</sup> January 2019**

**Table/Group: 2**

Session 1: Creating the conditions for Whole System Working

Key: strong (S), moderate (M), weak (W) or no engagement (N)

**T2**



Opportunities and Challenges;

Relationships working well/Opportunities	Relationships not working	Opportunities for Influence
Scottish Government and Local Government – shared policy ambition to tackle inequalities	Funding relationships - Disconnected/not prioritising well-being. E.g. SG P.E Fund for schools, national lottery, windfarm community benefit	Use the new PH Priorities to drive all SG Policy/Cab Sec decisions
CPPs focusing on well-being and prioritising most vulnerable	Public Policy on welfare reform (e.g. not enough money to buy food)	Leadership and culture of all stakeholders aligned/focused on PH principles and innovation (training and development activity required)
Gradual improvement on wider understanding of “environmental” organisations (e.g. SEPA, FC, Trans, RTPs) contribution to health and well-being.	Focus in school attainment (literacy, numeracy) not necessarily well-being	Better Prioritisation of co-ordination of funding towards Public Health
Wider public awareness of health and well-being (but it’s related to financial choice in most cases to implement it)		

Whole System Definition Comments;

- Resources – who is in control (power)
- Enable is too passive – more driven
- Power balance exists (co-production)
- Compromise; refocus your priorities
- More action originated
- Mostly “systemy”, not people focussed
- Generating collective leadership
- Very jargonistic ; long and complex
- Not inquisitive about the system

Session 2: Developing the Plan

	Who	What	How	When	Where
Communication	Not just “top tiers” cascade throughout the whole system.  Locally	Sharing what works from other projects  Shared Leadership Programme  Understanding of where “I” fit in/contribute.	All media used especially social media.  Understandable visual representation of Whole System  Being Brave, Being Visible  Personal behaviours + statements  Check that messages being received and understood  Recognise flexibility is necessary and can be adapted to suit local civics.	Start ASAP! Build on work already being done by PHR Team.	- National - Regional - Local - Community
Leadership (This whole proposition is about leadership)					
Structures	Scottish Govt Cab Secs; SFRS; POLS; SENT; Local Govnt Cllrs; Community Leaders; Civic Champions; TSIs; IOBs; Civic Champions; NHS Boards; PHS; Private Sector	More impact of CPPs  Change power balance between Orgs – not a hierarchy, all have a distinct role to play.	Listening to communities & people  Collective accountability  PHS reporting to FM? Not Health Cab Sec or Local Govt Cab Sec?		- National - Regional - Local - Community
Culture and Values	PHS Key Role; Prof Assoctns.  Early adopters across all stakeholders	PHS facilitating whole system approach through structures – esp CPPs  Share the vision – clarity about what we want to see in 25/30 years in terms of the improvements to public health and share vision about how we’ll work to achieve that	Increased awareness of the contribution of wide range of orgs to PH.	Start now! People involved can be getting the <b>ugut</b> culture about transformational change being essential; collective responsibility; outcome focussed not outputs; listen to community/public – professionals don’t have all the solutions or answers Power balance needs to change to realise our vision.	- National - Regional - Local - Community
Workforce (& Volunteers)	S Govt Civil Servants LA Officers NHS & H+SCP Officers All Employees	Everyone has a PH contribution – a PH qualification isn’t necessary.	To be clear about what it means to <u>me</u> – how I fit in, what I can do.		- National - Regional - Local - Community
Relationships	All stakeholders	Map out the links between people so they see where need to develop and maintain.	Trust & Honest as shared values across all players.  Shared ownership of the pblms  Celebrate success & Good practice.		- National - Regional - Local - Community

	Who	What	How	When	Where
Finance	Cabinet Secretaries Councillors Boards (NHS, H+SCP, Third Sector Orgs) Funders (e.g. Lottery) Private Sector Community Planning Partnerships	Pay living wage to all employees across all sectors.  Identify the ££ invested in LOIPs more specifically than at present.  Subsidy of public funding  PH current spend at local level goes to CPP to determine.  No ring fencing by SG by subject or partner.	Use data & intelligence to identify need.  Prioritism of available money towards most in need; Communities of place (EG SIMD) & Communitie of interest (EG Protected Chavactes)  Change how we commission services (co-production needs to be the norm)  "PB" exercises of the collectice LOIP financial resources; back engineer within partners to meet their governance/audit requirements systems basis using the LOIP as the plan.  Use the power of GEUL Competence.	LOIP guidance already requires OPPs to identify funding being contributed to these outcomes – (but in practice is not meaningful or detailed)	