

Public Health Reform Programme Board – Thursday 2 May 2019

Corporate Services Project – Outline Design Brief for Shared Services (NSS)

1. Background

At the PHR Programme Board meeting on Thursday 28 March 2019, a recommendation was accepted that, of the 13 workstreams being developed under the Corporate Services Project, 8 of the workstreams should be understood as likely to be delivered in-house from Public Health Scotland and that NSS should be formally invited to develop detailed shared service proposals for the other 5.

Good progress has been made on a number of aspects of the Project since that meeting, including agreement between those acting for NSS and the Project on an outline design brief, process and timetable to guide the development of proposals for those 5 service areas.

2. Recommendation

The Programme Board are asked to note the attached outline design brief that has been agreed.

COSLA/Scottish Government Public Health Reform Programme

Corporate Services (CS) Project – Outline Design Brief for Shared Services



1. Background

A new national public health body for Scotland, called Public Health Scotland, is being established. Public Health Scotland will bring together expertise from NHS Health Scotland, Health Protection Scotland and Information Services Division.

It is agreed that NSS have first refusal over the delivery of shared services to Public Health Scotland on Day One, with a working presumption that these service arrangements will be put in place for 36 months, subject to standard reviews.

On 28 March 2019, the PHR Programme Board agreed that the following 5 corporate services (of the 13 identified under the corporate services project) should be considered for shared services at this stage. Further details on these services can be found in Appendix 1:

1. Finance & Legal Services
2. People Services
3. IT Services
4. Procurement Services
5. Operational Facilities

2. Process and Timescales

The proposed process and timescales (based on 1 April 2020 Vesting Day) are as follows:

Action	Deadline by
Commission design brief to NSS	Monday 29 April
NSS to submit detailed service options for 5 areas (including clarity on costs, staffing resource, etc.)	Friday 14 June
Review Panel (reps of SG/COSLA/PB, CS Ref Group/CS Design Leads) for detailed assessment of options	Friday 28 June
Feedback/discussion/further refinement with NSS	Friday 2 August
Final recommendations issued to PB for	Tuesday 27 August (Programme Board)

endorsement following any negotiation and refinement of options via Panel and NSS.	
SLAs to be agreed including detail of job roles etc.(especially those confirmed for transfer from PHI/HS to NSS)	Tuesday 1 October
Issue detailed consultation with affected staff *	Monday 28 October
Detailed consultation with affected staff closes	Monday 27 January
SLAs/budgets in place and staff transfers reflect detailed consultation ahead of 1 April.	Wednesday 1 April 2020

* detail subject to agreement with representative unions

3. Relationship with the Corporate Services Project

The purpose of the Corporate Services Project is to define the complete set of corporate services required by Public Health Scotland to meet the ambitions of the TOM and to make recommendations to the programme board on the design of those services. This includes all services, whether provided in house or through a shared services route, in order that the overall provision is integrated and aligned with Public Health Scotland's requirements.

The 13 workstreams includes workstreams on the 5 service areas specified above and Design Leads and Groups are established. Each workstream has multi-disciplinary membership, consisting of staff from NHS Health Scotland, Public Health and Intelligence and NSS, both service suppliers and service users. Their purpose is to define what Public Health Scotland needs, based on staff and stakeholder feedback and alignment with the TOM. These future designs are underway and being shared with NSS as they are developed. The Design Leads are instructed and supported to work collaboratively with each other and with the Chairs/members of the relevant PHR Projects (Accommodation, HR, IT, Finance etc).

At the Panel Review stage of the process, the Future Designs put forward by the Workstreams will support assessment of the feasibility and completeness of the service that NSS wishes to offer.

The co-leads of the Corporate Services Project are responsible for the coordination of interaction between the Workstreams and with the PHR project leads, for ensuring that information is openly shared with NSS and for taking final recommendations to the review panel and then to programme board.

The Senior Supplier for NSS is responsible for the coordination and production of the service offers from NSS to the agreed timelines and to the level of detail specified in Appendix 1.

Public Health Scotland Shared Services Design Brief

Purpose of Design Brief

The purpose of this design brief is to request the detailed offer(s) from NSS to deliver a service to Public Health Scotland for the following services, which are outlined in more detail in the table below:

1. Finance & Legal Services
2. People Services
3. IT Services
4. Procurement Services
5. Operational Facilities

Specification

Each option provided should include:

- The current service provision as a minimum for each of these service areas to PHI.
- The detail and nature of those services, their scope and benefits.
- Full and total costs of the service, including any service charges, etc.
- The service structure and staff resource (e.g. WTE, grade breakdowns) required by NSS to deliver that service.
- Risks and dependencies across different services (particularly implications).

The format of these written offers is at the discretion of NSS, however a consistent format across all five service areas is required. Therefore, all offers should aim to:

- Respond to what the Programme Board has agreed as the high level principles and ambition of Public Health Scotland's design set out below.
- Align with the outline rationale for the five service areas in scope (see table below).

Service offers are requested in draft by 31 May and will be reviewed by a panel. Thereafter, issues of clarification/addition/modification will be led through the co-lead of the Corporate Services Project and Senior Supplier for NSS. Once service offers are agreed, the detail of monitoring arrangements, service level agreements and so on will be developed.

Outline Rationale for Five Areas

The overall Ambition for Public Health Scotland is to:	
<ul style="list-style-type: none"> • Be a visibly new and different organisation • Take a whole system approach • Maintain a clear focus on supporting the local system • Support innovation • Maintain an external focus • Demonstrate strong partnering 	
1. Finance & Legal Services	
<ul style="list-style-type: none"> • Public Health Scotland will have an operating budget of £ c £60m • The majority of its funding will come from Scottish Government • Current funding models of PHI and HS are very different. This will be reflected in a complex system of funding streams. • It is assumed that governance of the finance, audit and financial strategy will be the role of Public Health Scotland's Board and that there will be at least minimal senior financial representation within PHS to support this. • It is assumed that consideration will need to be given to how PHS is supported to operate within a dual accountability model to COSLA and the Scottish Government. • It is assumed that financial services will be required to support an outcomes based model of planning and reporting, in line with the emergent TOM. 	
2. People Services (HR, Healthy Working Lives, OHS, Workforce Planning, Workforce Strategy)	
<ul style="list-style-type: none"> • Public Health Scotland will employ c1000 staff • It will have the status of a special health board and all staff will be on NHS terms and conditions • The NHS Staff Governance Standard and the NHS Partnership Working Agreement will apply, but it is legitimate to explore what more or how in particular these can be applied in the context of this unique organisation. • It is assumed that governance of the Staff Governance Standard, workforce planning and workforce strategy will be the role of Public Health Scotland's Board and that there will be at least minimal workforce specialist representation and expertise within PHS to support this. • It has been described as critically important that the organisation does not 'look or feel like an NHS body'. There are also a variety of cultural and values based ways of working, identified through the TOM and WNBOD that policies and approaches should actively support. • The business of public health is whole system. Staff need to engage with and understand themselves accountable to a wider public service. The business aims of Public Health Scotland need to drive workforce strategy and planning. 	
3. IT Services	
<ul style="list-style-type: none"> • PHS will operate on a principle of Digital First. There is an ambition for this to be more than 'name only' 	

<ul style="list-style-type: none"> • Much of the collaboration and innovation ambitions of Public Health Scotland will be supported by IT platforms, approaches and strategies • PHS must be positioned to play an effective and strategic partnering role with NES Digital and other national IT programmes and be seen to be the leader in public health IT solutions for Scotland • It is assumed that governance of the IT business decisions and strategy will be the role of Public Health Scotland’s Board and that there will be at least minimal IT representation and expertise within PHS to support this. • Staff and partners must be supported to work agilely and flexibly to maximise staff engagement and collaboration.
<p>4. Procurement Services</p>
<ul style="list-style-type: none"> • PHS will procure a range of services, including research and products to support its ambitions for innovation. • PHS will be a partner across the whole system, and procurement processes should actively support collaboration and strong evidence of social impact • It is assumed that governance of the procurement strategy will be the role of Public Health Scotland’s Board and that there will be at least minimal senior representation (most likely aligned with financial support) within PHS to support this. • Early attention will need paid to the existing shared service arrangement which HS has in place with the SAS procurement service.
<p>5. Operations Management (Accommodation, Facilities, Office Services, Business Continuity & Resilience, Health & Safety) Outline rationale for workstream development</p>
<ul style="list-style-type: none"> • PHS will employ c1000 staff • PHS has an ambition to be a very collaborative organisation and to support its staff work effectively across the whole system, which is likely to lead to flexible and shared locations. • Current office accommodation is likely to be used on Day 1, but this may change. • Identity of staff from Day 1 with PHS will be important. • Staff and partners must be supported to work agilely and flexibly to maximise staff engagement and collaboration • It is assumed that accountability for health and safety and all other legal requirements sits with Public Health Scotland’s Board and that there will be at least minimal requirement for reporting and management within PHS to support this. The day to day support of staff and proximity of those services to other services within Public Health Scotland (such as administrative services) is another consideration.

Document Control Sheet

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Revision History

Revision Date	Version	Summary of Changes	Owner
9 April 19	0.1	Initial draft	NT

Approvals

This document requires the following approvals. A signed copy should be placed in the project files.

Name	Signature	Title	Date of Signature
Cath Denholm	<i>C Denholm</i>	Director of Strategy, NHS Health Scotland	
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Distribution

This document has been distributed to:

Name	Title	Date of Issue	Version
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