

NHS HEALTH SCOTLAND

**Minutes of the Board meeting
held at 10.30 am on Friday, 17 February 2017
in Board Room 1/2, Gyle Square, Edinburgh**

Present: Mr D Crichton (Chair)
Mr G McLaughlin
Dr Andrew Fraser
Ms R Dhir
Ms A Jarvis
Ms J C Judson
Mr P McColgan
Mr P Stollard
Mr R Pettigrew

In attendance: Mr G Dodds
Mr A Patience
Ms D Thomas
Mr M McAllister
Ms M Riordan (minute)

ACTION

1. Apologies

Apologies were received from Mr M Craig, Ms C Denholm and Ms M McCoy.

2. Register of Board Members' Interests

No meeting specific interests were recorded.

3. Minute of previous meeting: 25 November 2016

It was noted that the following amendment had been made to the minute.

Page 4, Item 9, Strategic Planning Update

Bullet point 5 added:

It is also important that the plan makes clear that the organisation understands that the external context is very likely to change over the 5 year period and that we are prepared for outcomes, timelines and structures to be adapted over that time.

The minute was approved.

4. Matters arising

The Chief Executive explained the new format of the Action List, following comment at a previous Board meeting. It was noted that all items from the Board meeting in November had been completed.

In respect of Item 10, Risk Appetite, the Organisational Lead for Strategic Development gave a verbal update to the Board. The risk management statement was shared, and discussed, with staff who were comfortable with it. The statement will be incorporated into NHS Health Scotland's Statement of Risk.

In respect of Item 11, Schedule of Board/Committee Meetings 2017/18, it was noted that meeting requests were currently being sent to Board Members.

In respect of matters which had emerged since the 25 November 2016 Board meeting, the Chief Executive said that he would give a further update on the Health and Social Care Delivery Plan, discussed at the Board Seminar on the 3 February, in his update paper under agenda item 9.

In discussion it was felt that progress on strategic issues were still not clear for Board Members and that the new format of the action list did not address this point. In response the Chair said that the action list was a record of what had been agreed at the Board meeting. He suggested that the strategic issues point could be addressed within the Chief Executive's update paper to the Board. The Chief Executive said that progress on strategic issues was contained within the quarterly performance reports to the Board which allowed Board Members to raise any points they had. They were also, if required, scrutinised by the relevant Board Governance Committee. He agreed that specific strategic issues could be highlighted within the Chief Executive's update paper.

**5. Board Seminar 3 February: Summary Note
(HS Paper 1/17)**

The Organisational Lead for Strategic Development (OLSD) spoke to the paper. The purpose of the paper was to assure the Board that the points made in Seminar discussion on the draft Delivery Plan and Strategic Framework for Action had been recorded and would be reflected in the final documents to be presented to the Board for approval in March 2017. The OLSD said that in preparing the paper he had tried to capture the main elements from the discussion in a number of headlines and themes which he highlighted to Board Members.

In discussion of the paper, it was felt that at some point, the Board might need to review the current position with the Strategic Framework for Action in view of the changing external environment and to ensure that there was a clear organisational position on any substantive changes that may occur. It was also felt that the discussion at the Seminar on the Once for Scotland consultation had not been captured within the paper.

In response to a question on how the views of staff were captured, the Chief Executive said that a discussion had been held at a Partnership Forum meeting on the implications of the Health and Social Care Delivery Plan for staff. This was also an agenda item for the Partnership Forum meeting on the 27 April. He said that while the Employee Director role was an important role, Directors also had a responsibility to ensure staff views were reflected, and that this point was made at each meeting of the Partnership Forum.

It was agreed that Board Members required assurance that staff were fully engaged with the process. The Chief Executive assured the Board that if the Employee Director was not available to attend the March Board meeting, he would ensure that there was Staff Side representation at the meeting in the capacity substituting for the Joint Chair of the Partnership Forum.

CEx

It was agreed that a statement relating to the organisation's continued engagement with stakeholders and partners should be added to the paper.

OLSD

It was also agreed that the April Board Seminar should discuss, as an agenda item, the new Public Health body.

E&GL

In respect of paragraph 7, Planning Documents: Themes to Strengthen, it was agreed that Health Scotland should demonstrate the sustainability of relevant projects and programmes once its own contribution was complete.

It was felt, however, that in respect of paragraph 14 of the paper, Promoting Fairness, the Board's position on human rights was clearly articulated in that while Health Scotland took a human rights approach, it was not a human rights body.

The Board endorsed the paper as an accurate summary of key points discussed at the Seminar on the 3 February.

6. 2016-17 Quarter 3 Performance Report
(HS Paper 2/17)

The Organisational Lead for Strategic Development (OLSD) spoke to the paper which provided a report on key achievements, progress against corporate priorities and risks as well as performance against the Delivery Plan 2016/17. He advised the Board that there had been a slight change in the structure and format of the report to comply with accessibility requirements.

The OLSD then drew the Board's attention to page 3 of the report which highlighted the following events which had taken place during the quarter:

- Launched healthscotland.scot on the 14 November 2016.
- Hosted Health Scotland conference on adverse childhood experiences.
- Submitted evidence to the Scottish Parliament's Health and Sport Committee.
- Undertook stakeholder survey.
- Formally concluded functional realignment.
- Maintained the Healthy Working Lives Gold Award.

It was noted that, in respect of the stakeholder survey, a report would be presented to the Board at their March 2017 meeting.

DoS

The OLSD then drew the Board's attention to the issues of note contained within page 4 of the report. It was noted that the press coverage relating to Health Scotland's evidence to the Health and Sport Committee was being handled by the Scottish Government.

A discussion of the paper then took place. In response to a question relating to how unexpected items are dealt with, the Chief Executive said that in terms of planning, staff work within an 80:20 rule to allow capacity for in-year items that may arise. He said that the Commissioners play a key role in the management of this and that this was an ongoing leadership and management issue within the organisation. Staff need to be supported and challenged to make sure they are not including more in their team or work programmes than can be delivered in any one year. The Chair said that making a day to day judgement was a challenge for the management team which was recognised.

A question was raised on whether there was an opportunity to reflect on what Health Scotland would expect to deliver over the next two years and to set some expectations in respect of this and whether this could be managed within the planning process. In response the Chief Executive said that within the business planning process, staff were asked to report on outputs. He said that considerable progress had been made in this area but that further work was required.

In response to a question as to whether reports could be provided quarterly on outcomes as well as outputs, the Chief Executive said that the Board had previously agreed that the appropriate frequency for outcomes reporting was annual and is captured in the End of Year Impact report presented to the Board. The focus of quarterly reports is on performance against planned outputs.

In responding to further questions on the sufficiency of integration of our work and on push back to Scottish Government where work requested may not be seen as a priority for us, the Chair suggested that the respective contributions of different teams could be articulated within reports, thereby capturing the extent of integration. The Chief Executive agreed and gave as an example of push back, Health Scotland's involvement in the Scottish Government's Mental Health Strategy.

In concluding the discussion, the Chair said that some issues had been raised during discussion of the report which would be appropriate for future strategic and seminar discussion. He said that where there were competing priorities this should be contained within reports. There would be occasions where the Board required to know this information in order to support executive team decisions.

The Board noted the report.

**7. Draft Board Development Plan
(HS Paper 3/17)**

The Chair introduced the paper which proposed a draft Board Development Plan for 2017/18 for which the Board was collectively responsible. The Chair informed the Board that he had made the decision not to produce an iMatter report as he felt it would not add anything to what had already been gained from the diagnostic tool and seminar discussion.

The Chair said that the Plan recognised that training and development as a board was not just about formal training programmes and events. Development as a board was about personal behaviour and confidence in the Board's governance and scrutiny role. The Plan set out quite clearly what the Board had to achieve in the run up to the new public health body. Board members had to feel that they could articulate confidently and consistently our views on the priorities and objectives of the new body. The Development Plan would help to work towards a consistent approach to take.

The Executive and Governance Lead (E&GL) said that she would incorporate into the Plan some of the discussions which had taken place at this Board meeting. The E&GL said that there could be an opportunity to discuss and review Health Scotland's strategic direction at the Board Seminar in October which could be used to look again at external horizon scanning issues. She said that some of the governance and scrutiny questions which were contained within the Terms of Reference for the Health Governance Committee could also be used for the Board and incorporated into the Boards standing orders and way of working.

It was noted that it was planned to hold two informal Board sessions in 2017/18, possibly following a Board meeting. These sessions would be used to develop a dialogue on the new public health body.

A discussion on the paper then followed. It was felt that it would be useful to have the informal sessions but that an existing seminar slot should be used for this. It was agreed that the Board should make the most efficient use possible of meeting dates already agreed.

The Board endorsed the Development Plan.

The Chair reminded Board Members that the Executive and Governance Lead was available to provide support to Board Members.

**8. Chair's Report
(HS Paper 4/17)**

The Chair spoke to the paper and drew the Board's attention to the following:

- Meeting with the Minister for Public Health and Sport held on the 30 November 2016. The meeting was primarily to discuss the new public health body. It was noted that feedback from the Scottish Government officials present at the meeting had been very positive.
- Senior Leaders Forum on the 11 January 2017. There had been a clear message from government to both national and territorial boards of the need to plan collectively and more consistently. Resources need to be planned on a much more collective basis. The Chair said that this would have some implications for Health Scotland's budgeting and the use of shared resources.
- Health Inequalities Forum held on the 24 January 2017. The Chair informed the Board that he had attended the Forum and had found it to be very useful. He invited Board Members to attend future sessions.
- NHS Chair's meeting – 30 January. It was noted that a presentation had been given to the Chairs on measuring the value of diversity on public bodies. The Chair said that he was keen to put Health Scotland forward as an example of a diverse board in terms of skills and experience.

During the meeting the Chairs also received a brief update on the Review of Targets which is scheduled to report in September 2017. The Board would be kept fully informed.

9. Chief Executive's update
(HS Paper 5/17)

The Chief Executive spoke to the paper. He informed the Board that having received the Minister's Annual Review letter, work was taking place with colleagues in Scottish Government in respect of this. The actions from the Minister's letter would be incorporated within the Delivery Plan for 2017/18.

The Chief Executive informed the Board that he had met with the Director of the Glasgow Centre for Population Health and the Director of Public Health at Greater Glasgow and Clyde. It had been agreed to raise the focus of how Health Scotland could support Greater Glasgow and Clyde in the work they are doing with Clyde Gateway, with a clear line of what each would contribute.

A very positive meeting had also taken place with the Chief Executive and Health and Social Care representative at COSLA. During the meeting common areas of interest were highlighted, including how COSLA were preparing for the work of setting new public health priorities for Scotland and their contribution to the shape and positioning of the new public health body for Scotland.

In respect of the new public health body, the Chief Executive said that he anticipated that the Oversight Group would commence in Spring 2017.

The Board noted the paper.

10. Committee/Forum minutes for homologation

The following Committee/Forum minutes were presented for homologation by the Board.

- Staff Governance Committee: 12 August 2016
- Audit Committee: 26 August 2016
- Audit Committee: 23 November 2016
- Partnership Forum: 30 June 2016
- Partnership Forum: 11 October 2016
- Partnership Forum: 1 December 2016

The Board noted the minutes.

11. Any other business

11.1 Third Sector

In respect of engagement with the Third Sector in relation to the new public health body, the Chief Executive said in meetings with Scottish Government colleagues he had asked how the government would engage with the Third Sector. This was still under consideration as to how this would be done. He said that it was important that the Third Sector were involved in discussions on the new public health body.

11.2 External Attendee – 24 March Board meeting

It was noted that there would be an external attendee at the March Board meeting.

12. Date of next meeting

Friday, 24 March 2017, Room G1/2, Meridian Court, Glasgow.