

**NHS HEALTH SCOTLAND**

**Minute of Health Scotland Board meeting held at 11.00am on Tuesday 23 June 2015 in Room G1/2, Meridian Court, Glasgow.**

Present: Ms M Burns (Chair)  
Ms J Fraser  
Dr AM Wallace  
Ms A Jarvis  
Mr M Craig  
Dr P Stollard  
Mr R Pettigrew  
Ms E Fullerton  
Ms M Mellon

In attendance: Mr G. McLaughlin  
Dr A Fraser  
Mr A Patience  
Ms C Denholm  
Ms C Duncan (item 8)  
Ms D Burnett (item 8)  
Ms M Kerrigan (Minute)

**ACTION**

**1. Apologies**

There were no apologies.

**2. Register of Board Members' Interests**

There were no interests declared.

**3. Minute of previous meeting**  
(HS Min 3/15)

The minute of the previous meeting held on 29 May 2015 was agreed as an accurate record.

**4. Matters Arising (Action Note)**

**ACTION**

The Action List was agreed, noting the following point:

Page 2: It was noted that the Board did discuss the staff survey results at its May meeting.

**5. Chair's Report**

The Chair reported on the most recent NHS Board Chairs meeting. Health and Social Care Integration was the key agenda item and the Cabinet Secretary spoke about the importance of this issue.

The Chair also attended NHS Health Scotland's Long Service celebration in Meridian Court, Glasgow on 10 June 2015.

**6. Chief Executive's Update**

The Chief Executive Officer advised the Board of a working initiative to strengthen leadership and cross organisation with four sessions being held with managers who report to Team Heads. These have been very positively received.

**7. EFQM**

This report had been discussed by the Audit Committee. It was proposed that the report will be shared at the October Board Seminar and improvement champions and assessors will be invited to join the session.

The EFQM report will be circulated to those members of the Board who are not members of the Audit Committee. DoS

**8. End of year impact report 2014/15**

The Board was asked to discuss NHS Health Scotland's End of Year Impact Report for 2014/15.

In introducing the report the Head of Strategy and Communication reported on two case studies.

***Case study 1: Communication & Engagement***

**ACTION**

The HoSC pointed out that the flow chart on page 14 demonstrated work being undertaken in a cross organisational way to have an impact on policy and decision makers.

The Health & Sport Committee work has been looked at as a case study as an example of how Health Scotland carries out that work.

The Board was informed that oral evidence and a written response had been given to the Committee in February and in April further work was provided to the Committee in terms of a written response. In January the Health & Sport Committee published its report and proposed an innovative approach to debating the report in Parliament and each Committee Convener had been asked to talk to the work of the Committee. NHS Health Scotland responded supporting that approach with a statement on its website. Committee Conveners were contacted with an offer of NHS Health Scotland support. In preparation briefings were submitted to MSPs, Party Researchers and through SPICe. Briefings were also produced through the third sector. MSPs were sent briefings on life expectancy per constituency in advance of the debate. The tram infographic was launched on the day of the debate.

As a result of this work NHS Health Scotland was mentioned eight times during the debate and two committee chairs requested a meeting, with a comment on how much more visible Health Scotland had been over the last year. It was noted that the media had also picked up on the work NHS Health Scotland is producing.

In discussion it was noted:

- the flowchart was helpful;
- the rhetoric was changing;
- 'what next' should be looked at;
- MSPs would be interested in updates/improvements.

***Case Study 2 : Welfare and NHS***

This case study demonstrates our approach to achieve better practice and stems from the outcome focus plan, with a 10 year horizon.

**ACTION**

The Income and Welfare Reform Manager described her work nationally and locally including her membership of the Money Outcomes Project Board and her work with local NHS Board pilots looking at how success is evaluated and what works. Several outputs have been achieved.

Other key contributions include:

- A financial inclusion section has been added to the Health promoting Health Service;
- Through the Money Outcomes Advice Project and work with Scottish Legal Aid Board a funders' framework with a health inequalities impact assessment is being developed for advice services, significantly extending our influence;
- The development of financial inclusion e-learning resources for health and social care staff.

In discussion the following points were made:

- the style of the impact report was impressive;
- The team were thanked for their work;
- It was felt the case study diagrams at the back of the report were difficult to follow with a suggestion that perhaps there should be a bit more detail;
- continue to nurture this approach.

The Board was happy with the impact reporting annually. The Board noted the paper as evidence of good impact in-year. The material will be used as a substantial part of our self-assessment report.

**9. Any Other Business**

There is to be a National Independent Officer to give external review of whistleblowing cases. There will also be on each NHS Board a non-executive who will be a whistleblowing champion, and there will be national training.

**10. Committee/Forum minutes/papers for noting**

The Audit Committee minute of 24 April 2015 was noted.

11. **Date of next meeting**

21 August 2015 in Room 1/2, Gyle Square, Edinburgh.