

Board Meeting: 28 September 2018

We are working towards all our publications being available in an accessible format. In the meantime if you require this paper in a more accessible format, please contact us using this email address nhs.healthscotland-ceopapersubmission@nhs.net

Quarter 1 Performance Report

Recommendation/action required:

The Board is invited to consider that the report sufficiently assures them that the performance of the organisation is on track in line with the delivery plan for 2018/19, and taking into account emerging priorities and change and transition as part of that context.

Author:

Sponsoring Director:

Tim Andrew Organisational Lead for Improvement	Cath Denholm Director of Strategy
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JULY 2018

Quarter 1 Performance Report

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Part 1: Summary

Highlights this quarter

The first quarter of this year has been busy, reflecting the full programme of work which we are committed to delivering alongside our change and transition programme. This report focusses on our performance in relation to our delivery. A separate report to the Board will cover the detail of change and transition.

This quarter saw the publication of the new national Public Health Priorities (PHPs). NHS Health Scotland welcomes these priorities, and the principles underpinning them. Our Strategic Framework for Action in 2017 generally aligns well with the PHPs and with their underpinning description of health inequalities as a matter of social justice.

Below we have detailed a number of highlights this quarter with specific reference to the new PHPs:

- **Priority 1:** A Scotland where we live in vibrant, healthy and safe places and communities (links to Strategic Priority 4).
 - The World Health Organisation has recently announced it will formally accredit the Place Standard tool. This is significant recognition of the tool at an international level that will elevate further its credibility both nationally and internationally, and also raise Scotland's profile on an international stage.
 - We gave written and verbal evidence to the Local Government and Communities Committee on access to greenspaces and the associated health benefits. The Committee have just announced they will be having a further session to explore this in detail.
- **Priority 2:** A Scotland where we flourish in our early years (links to Strategic Priority 2).
 - Scottish Government have accepted our proposal, developed on behalf of the Scottish Directors of Public Health and the Scottish Health Promotion Managers, for Scottish Government with recommendations on how to utilise the £50,000 identified in [Every Child, Every Chance](#) to further develop financial inclusion referral pathways in Scotland.
 - Scottish Government's Children and Families Directorate has identified £50,000 for an Adverse Childhood Experience pilot in Primary Care, which we will coordinate and evaluate. Eight Deep End GP practices are engaged to take part in the pilot.
- **Priority 3:** A Scotland where we have good mental wellbeing (links to Strategic Priority 1).
 - We explored the evaluation of the Mental Health and Suicide strategies with the Mental Health Policy Lead in Scottish Government.

- A more collaborative approach to mental health work was discussed with NHS 24, which could be undertaken through the national and regional collaborative work.
 - ScotPHN supported the Scottish Directors of Public Health special interest group on public mental health to consider its role in relation to new mental health PHP.
- **Priority 4:** A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs (links to Strategic Priority 1).
 - The 2018 Alcohol Monitoring (MESAS) Report was published and received widespread print, broadcast and social media coverage, including interviews with the report authors on BBC Radio Scotland.
 - Our Alcohol Minimum Unit Price (MUP) evaluation was referenced in a letter from the Cabinet Secretary for Health and Social Care in their letter to the Health and Social Care Committee, published as the MUP legislation for Wales passed its final legislative process. The letter reaffirms their plans to learn from our work and evaluation framework.
 - **Priority 5:** A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all (links to Strategic Priority 3).
 - The Scottish Government confirmed funding for the NHS Health Scotland co-led work to co-ordinate the planning of the citizens' basic income pilots across four local authorities.
 - The refreshed National Performance Framework now has a [new outcome](#), which reflects the work we have led to describe the importance of power inequalities have in society: "We tackle poverty by sharing opportunities, wealth and power more equally". We have been invited to assist the Scottish Government in how this will be framed.
 - **Priority 6:** A Scotland where we eat well, have a healthy weight and are physically active (links to Strategic Priority 1).
 - We contributed to the strategic development of Scottish Government's new [Diet and Healthy Weight Delivery Plan](#) and are leading on a number of actions in the new plan, including developing evidence-informed and cost-effective minimum standards and pathways for weight management programmes for adults, continuing to support Health Boards to deliver Child Healthy Weight Interventions and working with Health Boards to develop consistent and accessible healthy weight information and appropriate professional training – including training on weight bias and obesity stigma.

We engaged with a wide range of stakeholders during this quarter on a one-to-one basis, in groups and at events. One-to-one highlights include discussing human rights and the public health landscape with the Chair of the First Minister's Advisory Group on Human Rights Leadership.

There were several new engagements relating to drug misuse, including a meeting with the Scottish Drugs Forum and Substance Misuse Policy Unit

around a submission we developed with ISD to inform the national strategy. We presented at the Parliamentary Think Tank Scotland's Futures Forum on Drug Use in Scotland.

We used a variety of engagement methods at the NHSScotland Event to great effect. This included hosting a parallel session on both days of the event, presenting on human rights and the right to health at the 70th birthday theatre space and presenting two posters.

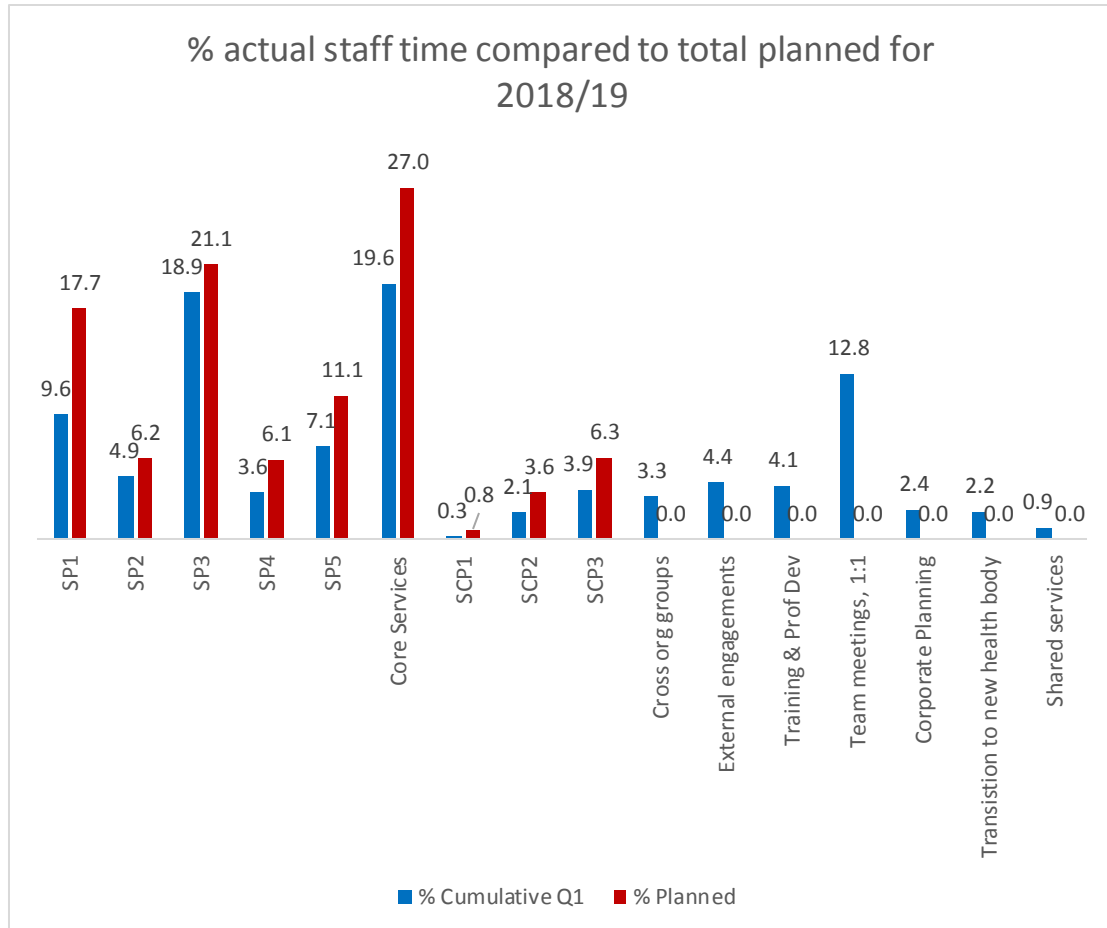
Together with the Women's Support Project, we hosted 'FGM and Health: A national conference on possible health impacts of Female Genital Mutilation' in Glasgow. The event considered the mental, physical and sexual health issues for women living with the aftermath of FGM. It was part of an ongoing series of engagements which will work collaboratively with community champions to reach out to women in communities where FGM is practised.

Having been part of the expert group developing recommendations to make school food and drink even healthier, we took part in the launch of the consultation on the recommendations together with the Deputy First Minister.

Part 2: Strategic Priority Update

Overview of staff time data

The table below shows the percentage of staff time spent on Strategic Priorities and Strategic Change Priorities compared to what was planned.



This chart shows the percentage of the total days actually spent within each strategic priority against the percentage of total planned days identified at the conclusion of the planning process.

The last 7 are the corporate outputs. These have been split from the rest of Core Services to give a more realistic view of the time identified and spent in Core Services

At the conclusion of the planning process 27,206 days (187 WTE staff – this figure is always lower than our actual WTE because we keep time back for in-year requests) had been identified as the total number of planned staff days to achieve each of the outputs contained within their respective Delivery Commitment and overall Strategic Priority. This information was captured from the uploaded data from the Corporate Planning Tool.

Strategic Priority 1: Fairer and Healthier Policy

Highlights this quarter

- Income interventions in the Informing Investment to reduce Inequalities (Triple I) tool were remodelled using the EUROMOD tool, which is a tax-benefit microsimulation model for the European Union.
- Local Scottish Burden of Disease data were used for strategic workforce and intervention planning in three pilot areas (Greater Glasgow and Clyde, West Dunbartonshire and Clyde Gateway).
- We participated in the WHO working group on national approaches to physical activity and proposed the use of outcome focussed planning and improvement methodology.
- Together with the Women's Support Project, we hosted 'FGM and Health: A national conference on possible health impacts of Female Genital Mutilation'. The event considered the mental, physical and sexual health issues for women living with the aftermath of FGM.
- We established a multi-agency Advisory Group on Gender Based Violence and Learning Disabilities, in response to concerns raised by key stakeholders. The group will to raise awareness of the issue and improve and enhance capacity to address this in a multi-sectoral way.
- ScotPHN commenced support for the development of the existing Public Health Nutrition group as a special interest group of the Scottish Directors of Public Health (SDoPH) and supported the Public Mental Health special interest group to consider its role in relation to the new mental health PHP.
- The 2018 Alcohol Monitoring (MESAS) Report was published and received widespread print, broadcast and social media coverage, including interviews with the report authors on BBC Radio Scotland.
- An expert group was convened, which developed a series of recommendations to raise awareness about the Chief Medical Officer (CMO) drinking guidelines, which will be presented to the CMO and Scottish Government policy colleagues.
- We contributed to ongoing work on the Suicide Prevention Action Plan through Ministerial and policy team engagement.
- The Welsh Government has reaffirmed their plans to learn from our work on MUP evaluation in a [letter](#) to the Health and Social Care Committee of the Welsh Assembly.
- We presented at a Scotland's Futures Forum event on drugs and were extensively quoted in the report and our key messages appear throughout it as part of the general frame of the report.
- We contributed to the strategic development of Scottish Government's new [Diet and Healthy Weight Delivery Plan](#) and are leading on a number of actions in the new plan, including developing evidence-informed and cost-effective minimum standards and pathways for weight management programmes for adults.

Performance Information

Strategic Priority 1 has 12 Delivery Commitments, two of which have Performance Indicators due for completion this quarter.

Delivery Commitment	Performance Indicator for Q1
Work with Scottish Government and national partners (Samaritans Scotland, Information Services Division (ISD), Public Mental Health Special Interest Group) to influence the contents of the new Suicide Prevention Action Plan and to support the ongoing implementation of the Mental Health Strategy	We have influenced the new national Suicide Prevention Action Plan through engagement events GREEN We ran five engagement events across the country in March and April, enabling a wider range of stakeholders to influence the development of the plan, which will be published on 27 June.
Progress the Scottish Burden of Disease study, including improving the estimates, identifying the burden of risk factors, projecting burden (and the workforce implications and costs) and exploring the highest impact preventative actions	We have published deprivation and local area reports AMBER Resource issues at the ISD side continue and this continues to slow down the speed of delivery. We should publish the deprivation report in Q2 and the local area reports in Q3.

Delivery Commitments at risk of not delivering on time

7 of the 12 Strategic Priority 1 delivery commitments have one or more outputs with issues affecting delivery:

- 1.1.1: Progress the Scottish Burden of Disease study, including improving the estimates, identifying the burden of risk factors, projecting burden (and the workforce implications and costs) and exploring the highest impact preventative actions
- 1.2.1: Implement the evaluation plan for Minimum Unit Pricing (MUP), including establishing and managing the component studies, co-ordinating with other relevant studies and engaging with stakeholders
- 1.3.1: Sustain the cross-cutting work of the public health collaborations we manage (the Scottish Public Health Network (ScotPHN), the Scottish Public Health Observatory (ScotPHO), the Public Health Evidence

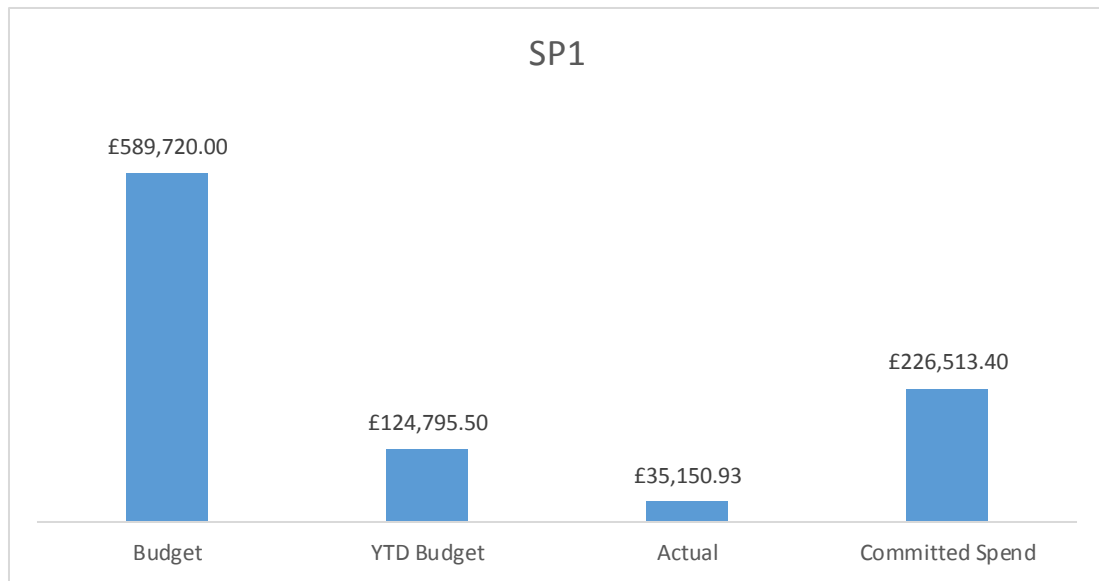
Network (PHEN) and the Health Economics Network for Scotland (HENS)) in order to deliver an agreed range of effective, efficient and sustainable public health actions on a 'Once for Scotland' basis

- 1.4.1: Provide expertise and guidance on policy (development, monitoring and evaluation) and effective interventions to tackle inequalities in diet and obesity, including improving access to healthier food choices for key populations groups across a range of priority settings.
- 1.4.3: Support NHSS implementation of the National Strategy on Violence against Women and Girls, establishing a multi-sectoral approach to strengthen and improve the health sector response to GBV'
- 1.4.6: Support implementation of the refreshed tobacco control strategy, including improving access to smoking cessation support in Prisons (to support Smoke Free Prisons by 30 November 2018), and maintenance of print and e-learning products
- 1.4.9: Lead, support and advise on the design and implementation of actions relative to the Scottish Government's Active Scotland Framework and National Physical Activity Delivery Plan

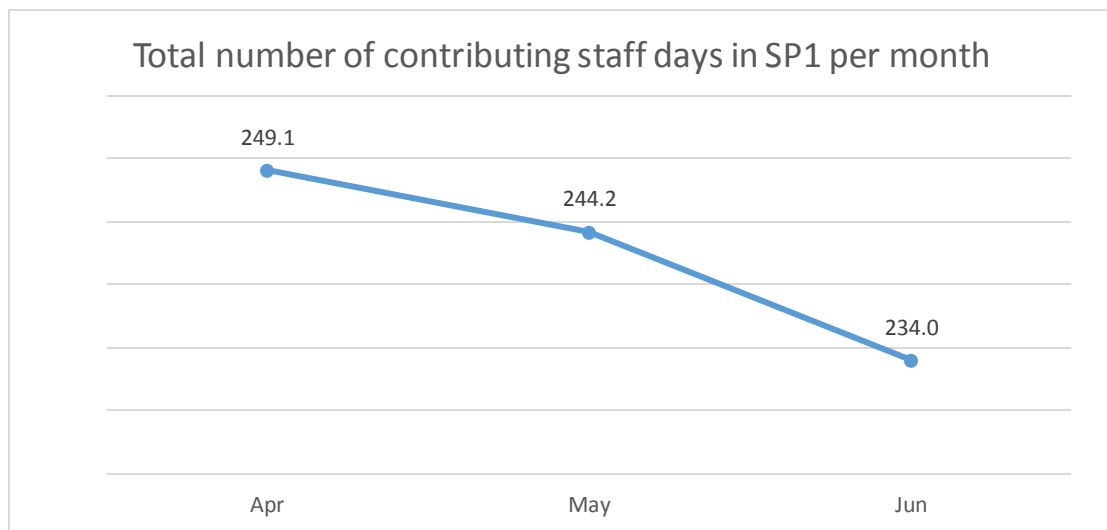
Issues affecting delivery

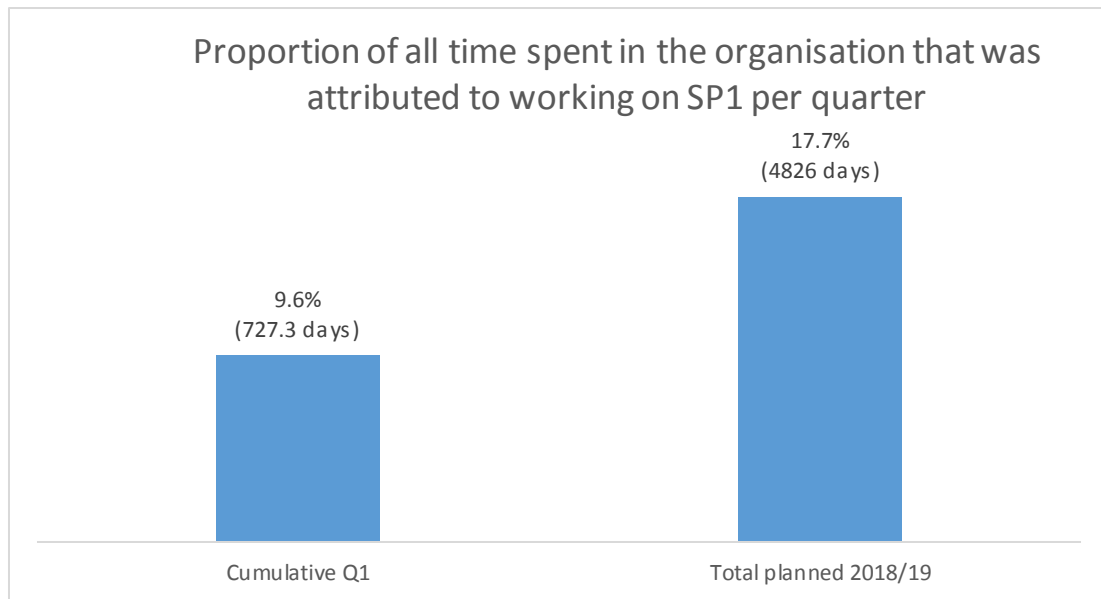


Financial data



Staff time data





Issues of note

- It has not yet been possible to identify capacity for all of the work we had planned to do. At the time of writing this includes a shortfall in capacity to accelerate delivery of the implementation of the National Physical Activity Pathway (as required by the Health and Social Care Delivery Plan), or support the development of the Active Scotland Delivery Plan governance.
- Following an implementation analysis of our commitments for 2018/19, there is insufficient capacity within our Marketing and Digital Services function to deliver everything planned in outline. Further prioritisation and consideration is now underway, including the potential to increase the capacity of the team.
- There are a number of capacity gaps within Strategic Priority 1 arising from vacancies and unsuccessful recruitment rounds. Recruitment and new models of working are being explored.

Coming up next quarter

- We will support national and local activities to promote Suicide Prevention Week 2018 (data briefings, digital imagery and paper resources, communication messages, Twitter feeds).
- The Scottish Burden of Disease Study will publish burden by levels of deprivation.
- We will start an evaluability assessment of the drug and alcohol treatment strategy.

Strategic Priority 2: Children, Young People and Families

Highlights this quarter

- We developed a proposal, on behalf of the Scottish Directors of Public Health and the Scottish Health Promotion Managers, for Scottish Government with recommendations on how to utilise the £50,000 identified in [Every Child, Every Chance](#) for the further development of financial inclusion referral pathways in Scotland. Scottish Government accepted the proposal and described it as “a sensible, pragmatic and proportionate approach to helping embed the principles of Healthier Wealthier Children.
- The Scottish ACEs Hub (hosted by NHS Health Scotland), in collaboration with the Scottish Government, hosted a seminar on research and evidence on childhood adversity and trauma and its implications for policy and practice. Delegates heard from academic professionals involved in research from a diverse range of areas.
- We launched an [animation](#) on Adverse Childhood Experiences (ACEs) and what they mean for Scotland. The animation generated significant engagement through social media and drove a high volume of traffic to our website.
- Our draft European Adaptation of the WHO Global Accelerated Action on Adolescent Health was peer reviewed by experts from across Europe and we will launch this document at the International Association of Adolescent Health meeting in Moldova in October in a keynote address.
- A cross-organisational group has been set up within NHS Health Scotland to oversee our work with education colleagues in Scottish Government, Education Scotland and in practice.

Performance Information

Strategic Priority 2 has 7 Delivery Commitments, none of which has Performance Indicators due for completion this quarter.

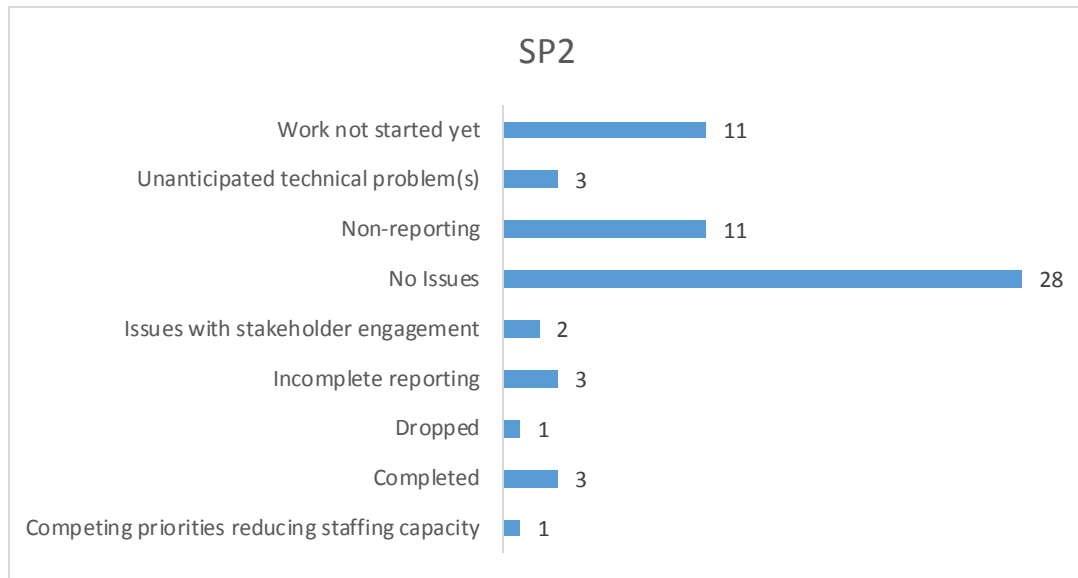
Delivery Commitments at risk of not delivering on time

4 of the 7 Strategic Priority 2 delivery commitments have one or more outputs with issues affecting delivery:

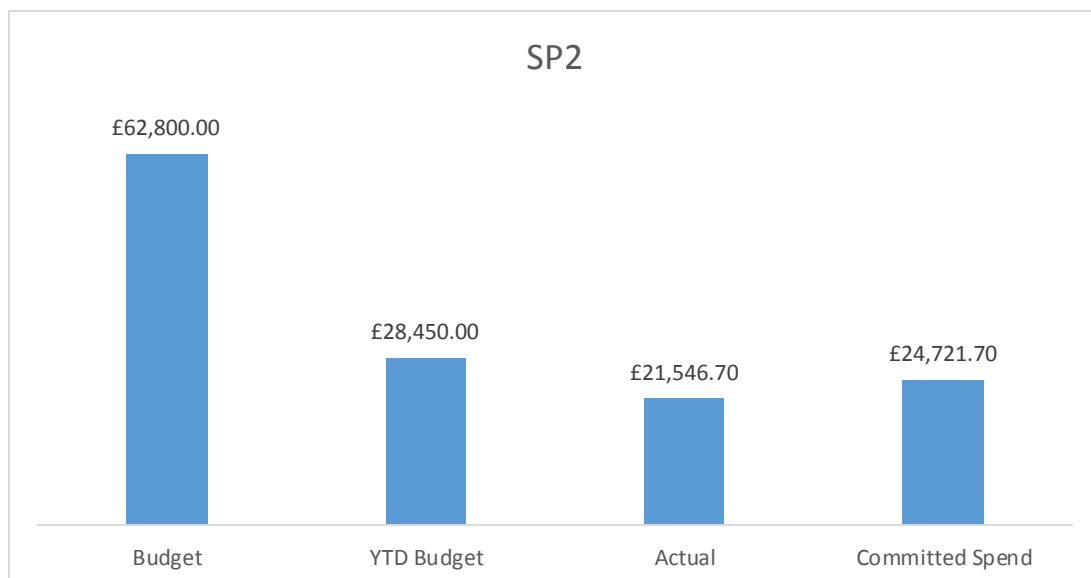
- 2.1.1: Provide expert input to the collection of health and wellbeing data on pre-school and school-aged children, to ensure that local and national partners have the most relevant information to inform action on health inequalities

- 2.1.3: Support the development and implementation of a Monitoring and Evaluation framework for the Scottish Government Early Learning and Childcare programme.
- 2.2.1: Implement agreed priorities for action on adverse childhood experiences (ACEs) in collaboration with Scottish Government policy leads and the Scottish ACEs Hub.
- 2.7.1: Provide the World Health Organization with up to date evidence and technical support for Child and Adolescent health strategy implementation.

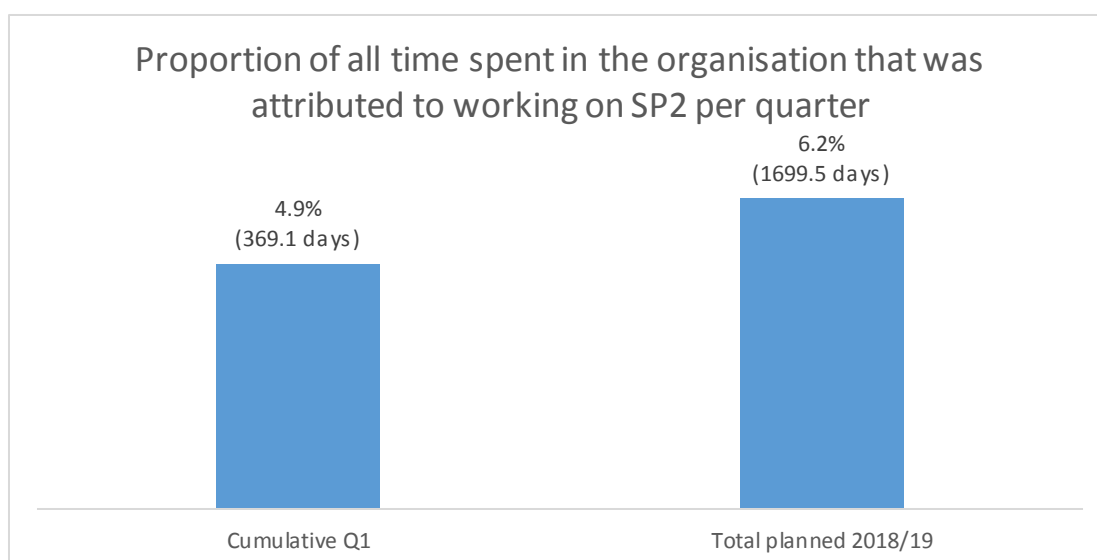
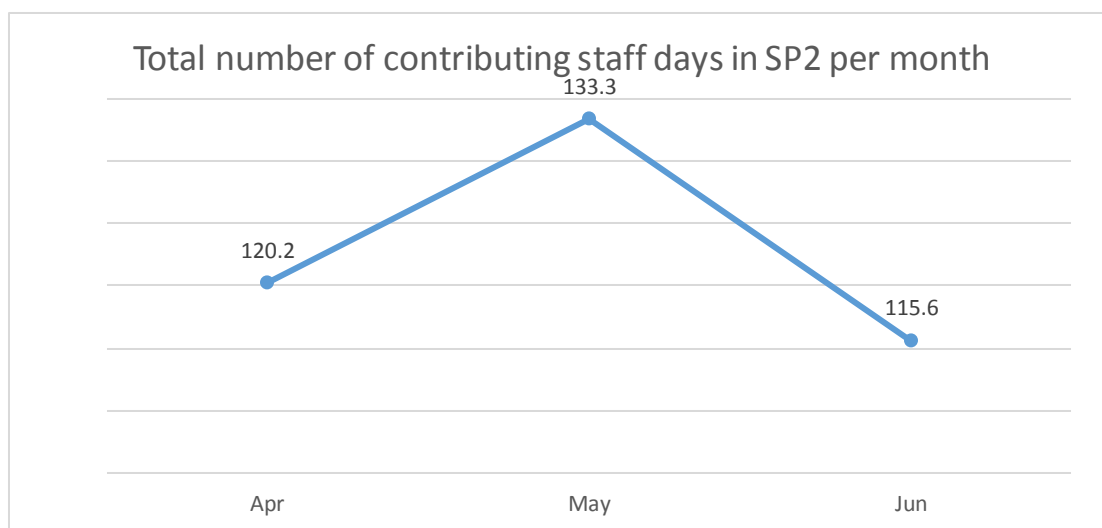
Issues affecting delivery



Financial data



Staff time data



Issues of note

- The collaborative bid for funding from DG Sante with WHO to work on frameworks to prevent all forms of violence against children was unsuccessful. We were the highest placed bid and missed the funding cut-off by the narrowest of margins. We received useful feedback and now have an opportunity to revise the proposal and re-submit for the next funding round.
- The joint bid with St Andrew's University and the Social and Public Health Sciences Unit in Glasgow for funding from the UK Prevention Research Partnership to establish a Schools Health Research Network was unsuccessful. Work continues to establish this at a smaller scale, for example, we will continue to develop the concept of KIA linked to the school census and will contribute to the WHO Schools Health for Europe network.

Coming up next quarter

- The evidence briefing describing the impact of children's social circumstances on educational outcomes is complete and scheduled for publication in Q2.
- Following direct engagement with Scottish Ministers, we have been invited to develop a proposal for a new multi-sector adversity hub that aims to establish a whole-system response to adversity for Scotland. We have established it as a dual proposal for NHS Health Scotland and the Public Health Reform team with the aim of embedding it into the design of Public Health Scotland. A meeting with the Public Health Reform team early in Q2 is expected to lead to further development work internally and with partners.

Strategic Priority 3: A Fair and Inclusive Economy

Highlights this quarter

- The Scottish Government confirmed funding for the NHS Health Scotland co-led work to co-ordinate the planning of the citizens' basic income pilots across four local authorities.
- The evaluation planning for the citizens' basic income pilots is progressing well following a series of workshops to clarify the outcomes of interest for the various stakeholders.
- We have had an abstract for the Basic Income Earth Network (BIEN) conference in Finland accepted to present a synthesis of learning from previous citizens' basic income pilots.
- We held a successful local councillor stakeholder group meeting for representatives in the four local authorities participating in the basic income pilot work. This was chaired by the chief executive of North Ayrshire council, Elma Murray and agreed a joint bid to the Scottish Government for funding the next two years of work.
- We have completed a report synthesising the evidence on the impact of changes in individual or household income on general health outcomes. This has been submitted to an academic journal for review and will inform the next iteration of the Informing Investment to reduce Inequalities (III) model.
- We have completed the qualitative interviews of urban policymakers to inform our understanding of the causes of excess mortality in Scotland. We are now analysing the interviews and writing a report.
- The systematic review of international health inequalities trends is progressing with all data collection and calculation of inequality indices now completed. This work will be presented at the annual Public Health Information Network for Scotland (PHINS) seminar in September.
- The refreshed National Performance Framework now has a [new outcome](#), which reflects the work we have led to describe the importance of power inequalities have in society: "We tackle poverty by sharing opportunities, wealth and power more equally". We have been invited to assist the Scottish Government in how this will be framed.

Performance Information

Strategic Priority 3 has 11 Delivery Commitments, two of which have Performance Indicators due for completion this quarter.

Delivery Commitment	Performance Indicator for Q1
<p>Maximise the use and quality of digital channels in response to customer preferences for accessing Healthy Working Lives services</p>	<p>Our new healthyworkinglives.scot website is fully functioning</p> <p>GREEN The Healthy Working Lives web site is up and running as planned.</p> <p>The Q1 development is under way and the next stage of the improvement plan will be taken forward by the end of June.</p>

Delivery Commitments at risk of not delivering on time

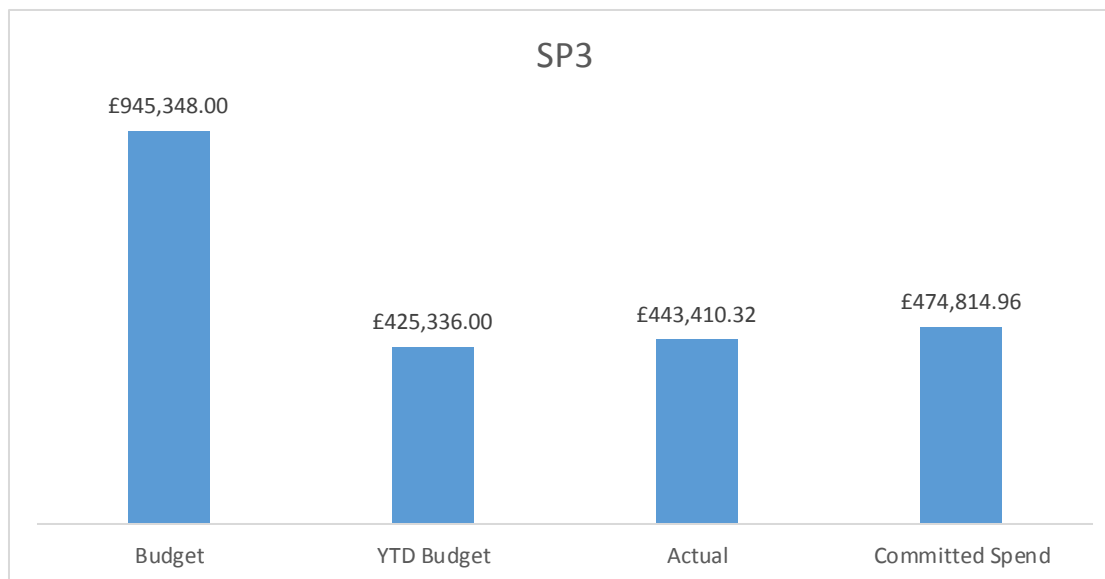
4 of the 11 Strategic Priority 3 delivery commitments have one or more outputs with issues affecting delivery:

- 3.1.3: Maximise the use and quality of digital channels in response to customer preferences for accessing Healthy Working Lives services
- 3.2.1: Influence policy and practice through sharing research, intelligence and experience to enable sustainable models for delivery of the healthy living and Healthy Working Lives awards
- 3.6.1: Disseminate evidence to stakeholders on the impacts of social security policies on health inequalities and measures that can be taken to mitigate these.
- 3.8.1: Collaborate with partners on knowledge dissemination and application for informed action on the distribution of power as a fundamental cause of health inequalities

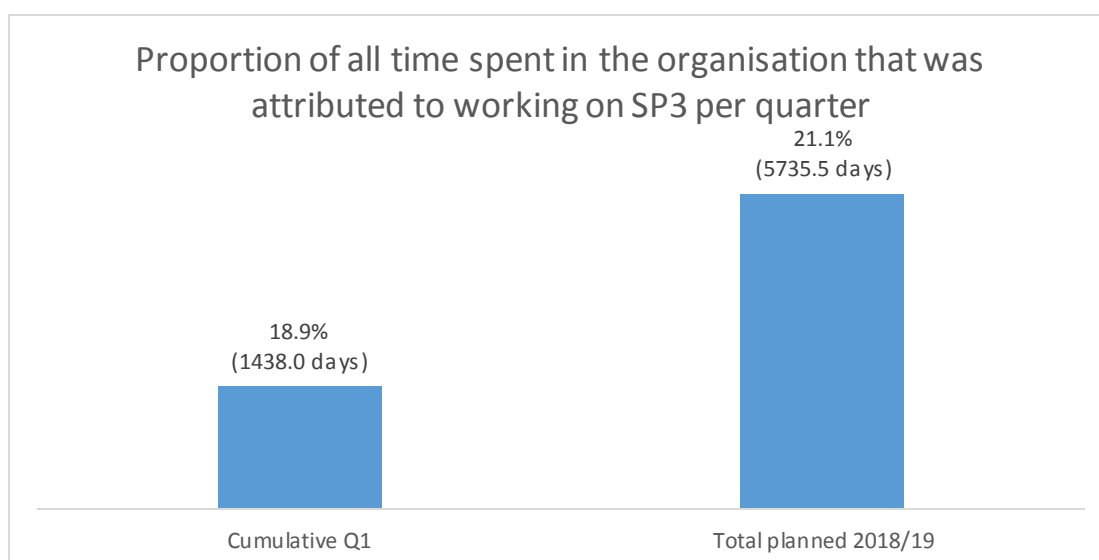
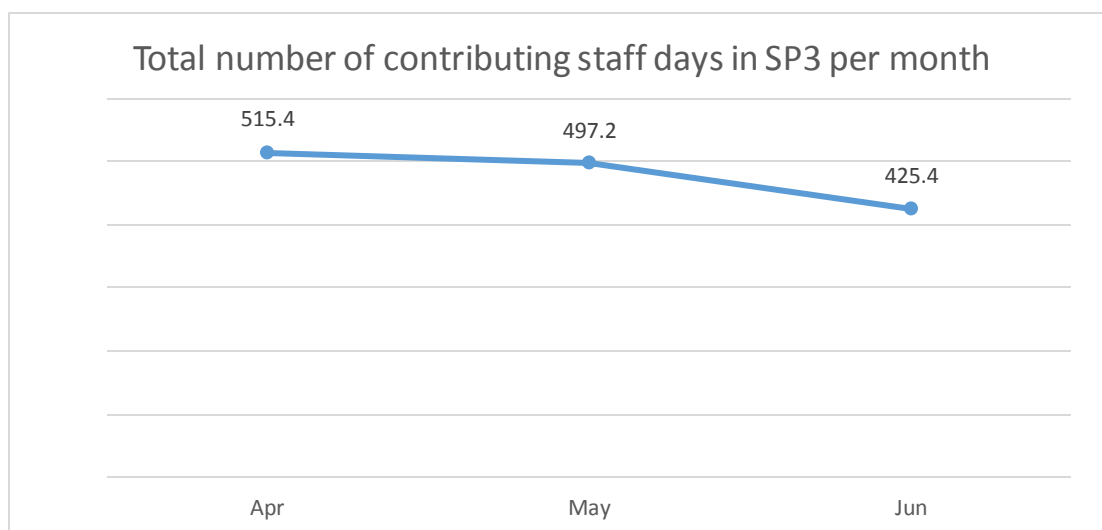
Issues affecting delivery



Financial data



Staff time data



Issues of note

- Following the successful launch of www.healthyworkinglives.scot in March, a further phase of planned improvement work was completed in Q1. However, as a result of high demands on the Marketing and Digital Services Team, any follow-on improvement work will be reviewed together with other requests of the team as part of in-year business planning.

Coming up next quarter

- We will be represented at the Basic Income Earth Network (BIEN) conference in Finland where we will present our work on the health impacts of basic income policies.
- We will be publishing our review of the impacts of changes to the social security system and the economic downturn, including a commentary on the recent trends in life expectancy in Scotland.

Strategic Priority 4: Healthy and Sustainable Places

Highlights this quarter

- We gave written and verbal evidence to the Scottish Parliament Local Government and Communities Committee on access to greenspaces and the associated health benefits. The committee has just announced that they will be having a further session to explore this in detail.
- We were invited to sit on the top table for a facilitated Cross Party Group debate on 'Landscape for Scotland'. This was a very wide-ranging debate but we were able to make the case that better landscapes improve health and the particular need to do this in our most deprived communities.
- We have had significant interest from and a firm commitment by key partners including Scottish Government and Adaptation Scotland to our planned work in relation to climate justice and health inequalities. This gives us a very strong mandate to move this agenda forward.
- We have been invited to co-chair the National Housing Partners for Health and Wellbeing Group. This is a very influential group bringing together a wide range of health and housing stakeholders mainly to plan and coordinate health and housing activity within health and social care.
- We organised and delivered another successful Place Standard Alliance event bringing together a wide range of stakeholders. The focus was on spatial planning and the day was chaired by the Director for the Royal Town Planning Institute. It had a number of keynote presentations including Eibhlin McHugh, Co-director, Public Health Reform Executive Delivery Group, Scottish Government who spoke about plans for public health reform and John McNairney (Chief Planner, Scottish Government) who gave an overview of the Spatial Planning Bill.
- The World Health Organisation has recently announced it will formally accredit the Place Standard tool. This is significant recognition of the tool at an international level that will elevate further its credibility both nationally and internationally. Scottish Government are particularly pleased as it raises Scotland's profile on an international stage.

Performance Information

Strategic Priority 4 has 8 Delivery Commitments, one of which has a Performance Indicator due for completion this quarter.

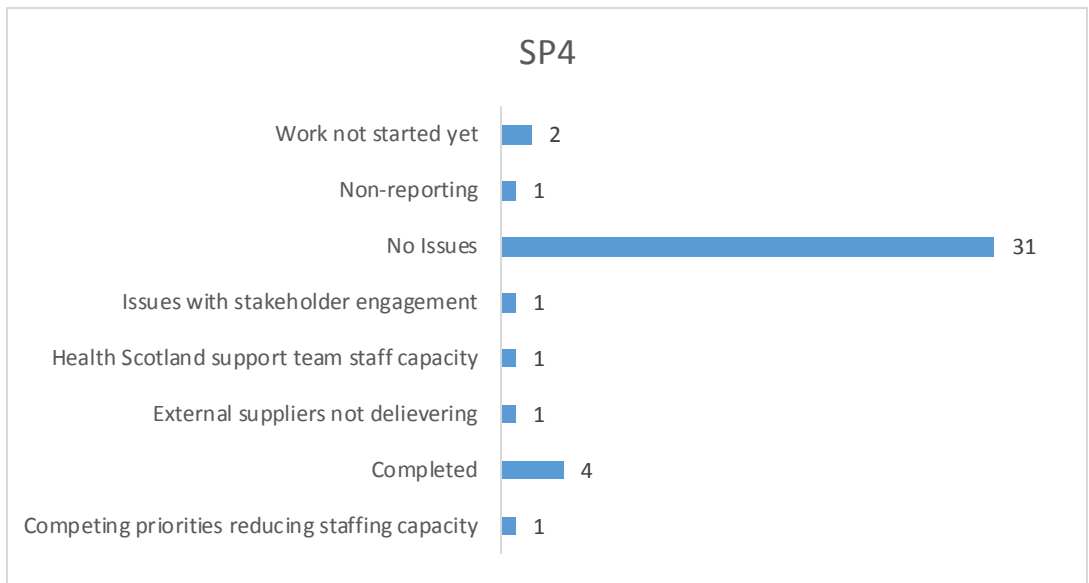
Delivery Commitment	Performance Indicator for Q1
Work collaboratively with key local and national stakeholders to coordinate action to maximise the	Housing is a standing agenda item on the Scottish Health GREEN This has been accomplished.

contribution of housing to health improvement and reducing health inequalities	Promotion Managers meeting agenda
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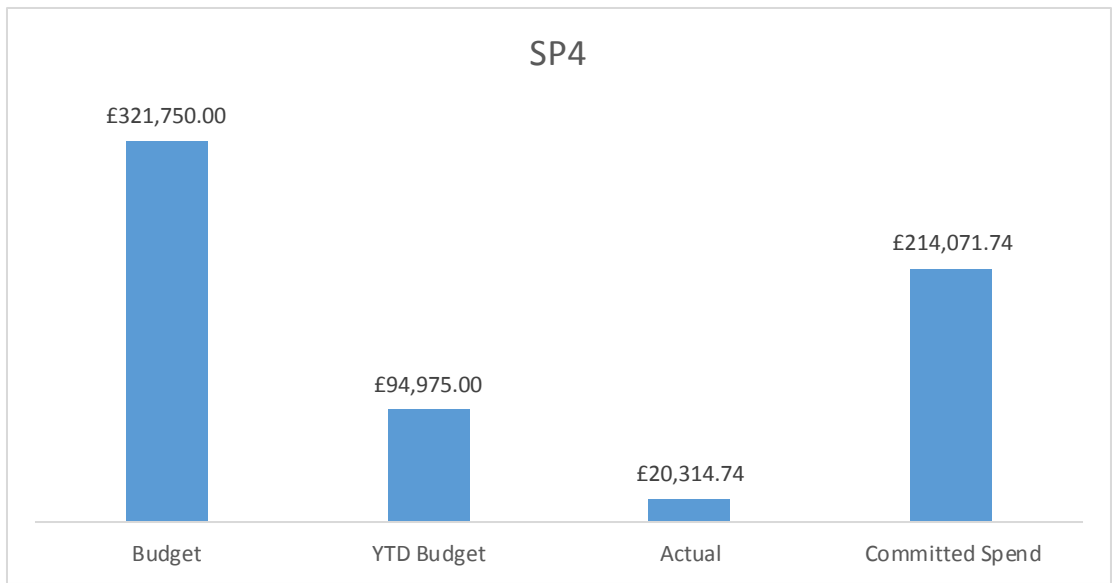
Delivery Commitments at risk of not delivering on time

None of the 8 Strategic Priority 4 delivery commitments outputs with issues affecting delivery.

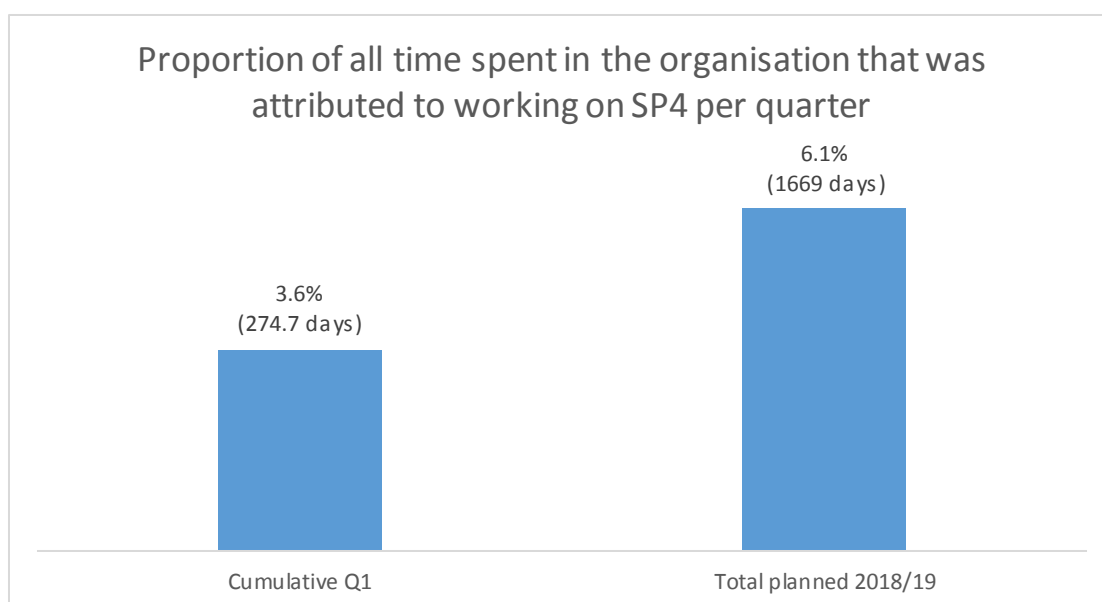
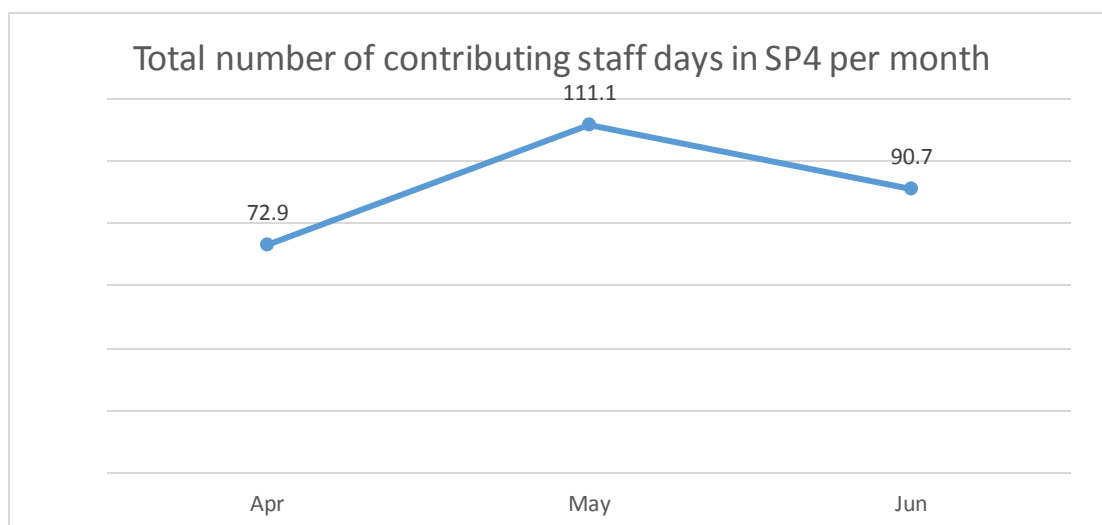
Issues affecting delivery



Financial data



Staff time data



Issues of note

- There are capacity concerns relating to the place and housing portfolios. This has been discussed by Commissioners and proposals for further staff capacity have been approved and are being progressed.

Coming up next quarter

- We will be running four regional events designed to bring local public health and housing leads together, principally to better integrate health outcomes into local housing strategies.
- We will be helping Scottish Government refresh the national guidance for production of local housing strategies.
- We will publish our evidence based learning platform and resource on housing and homelessness for frontline NHS Primary Care staff. The

learning resource will help to ensure staff have the necessary knowledge and skills to guide, direct and where appropriate, support patients to access relevant services and sources of information.

- We will start to allocate our community capacity building fund. This provides small scale investment (up to £2,000) to a large number of groups for the development of new and existing community food initiatives to address health inequalities through the medium of food.
- We will be running a joint workshop with Glasgow City Council to accelerate and broaden use of the Place Standard in Glasgow.
- We will begin the Place Standard improvement programme. This will include a detailed evidence review for each of the 14 Place Standard themes and piloting of an on-line modular learning tool for communities and voluntary sector.

Strategic Priority 5: Transforming Public Services

Highlights this quarter

- We jointly led a successful session with the Director of Public Health in NHS Lothian on Reducing Inequalities in the Bowel Screening Programme in Scotland at the Four Nations Conference in Edinburgh.
- A recent study uncovered flu vaccine hesitancy issues among Polish families and we are working with NHS Lothian to improve access to services.
- We facilitated a Health Inequalities Impact Assessment workshop focusing on the Routine Childhood Immunisation Programme (0-5 years). The workshop was intended to ensure equitable access to services and was attended by Vaccine Transformation Programme Business Change Managers from 10 local NHS Health Boards, Scottish Government and Health Protection Scotland.
- New Health Promoting Health Service (HPS) outcomes were published by the Chief Medical Officer (CMO) and we are testing reporting on the new framework through active engagement with NHS Board partners.
- We hosted a British Sign Language (BSL) learning event for the NHS, which evaluated positively. We were able to report good progress to Scottish Government on a range of actions such as online BSL awareness training for Health and Social Care staff.
- The Outcomes Evidence Performance Board (OEPB) endorsed our approach to evaluation support (to fulfil the action we have in the OEPB work plan). We have since engaged with seven CPPs to begin scoping this work.
- The joint report we wrote with Audit Scotland and the Improvement service, 'Local Outcomes Improvement Plans Stock-take: Emerging Themes', has been published.
- Introductory sections of the 'Leadership on inequalities learning hub for non-executives and Integrated Joint Board (IJB) directors' was showcased at the national NHSScotland conference.
- Scottish Government's Children and Families Directorate has identified £50,000 for an Adverse Childhood Experience pilot in Primary Care, which we will coordinate and evaluate. Eight Deep End GP practices are engaged to take part in the pilot.
- The detailed primary care outcomes logic model we developed was well received by Scottish Government and stakeholders and has appeared within the National Primary Care Workforce Plan.
- It has been confirmed by Scottish Government that we will undertake evaluation of Community Link Worker early adopter sites.

- We will be exploring options to collaborate with Eurohealthnet on a project related to our WHO Collaborating Centre work in child health across Europe.

Performance Information

Strategic Priority 5 has 10 Delivery Commitments, one of which has a Performance Indicator due for completion this quarter.

Delivery Commitment	Performance Indicator for Q1
Support the National Boards Delivery Plan to strengthen public health capability	The public health contribution to improved health and social care is clearly described within the National Health and Social Care Delivery Plan GREEN This has been accomplished.
Provide once for Scotland strategic and delivery support for a refreshed HPHS framework	We have updated the Health Promoting Health Service framework with Scottish Government, including outcomes and indicators for Health Boards GREEN This has been accomplished.
	We have delivered a shared learning event for healthcare and planning staff across Scotland GREEN This has been accomplished.

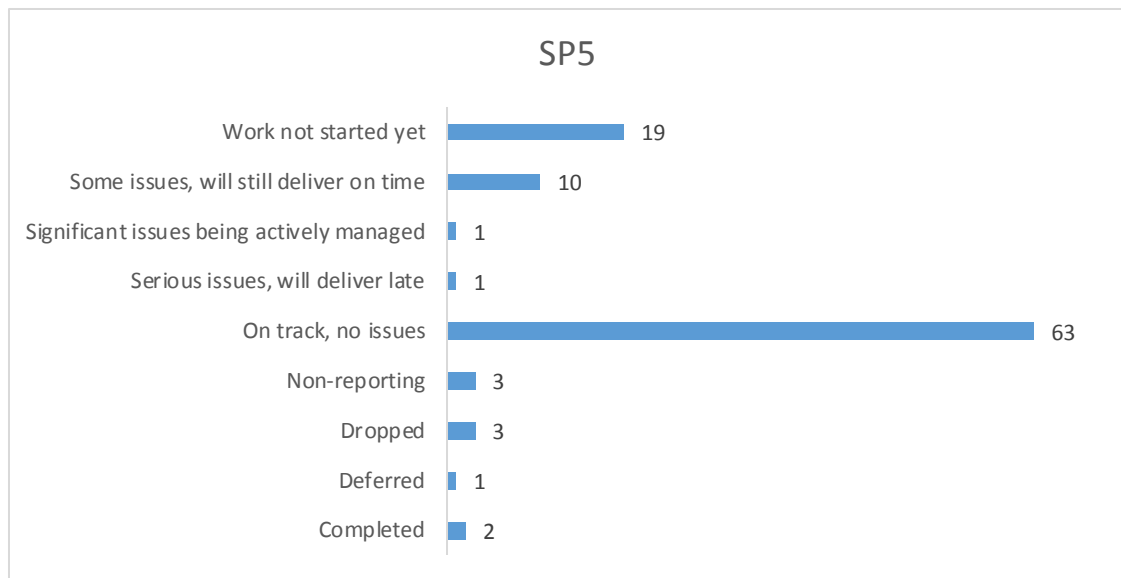
Delivery Commitments at risk of not delivering on time

5 of the 10 Strategic Priority 5 delivery commitments have one or more outputs with issues affecting delivery:

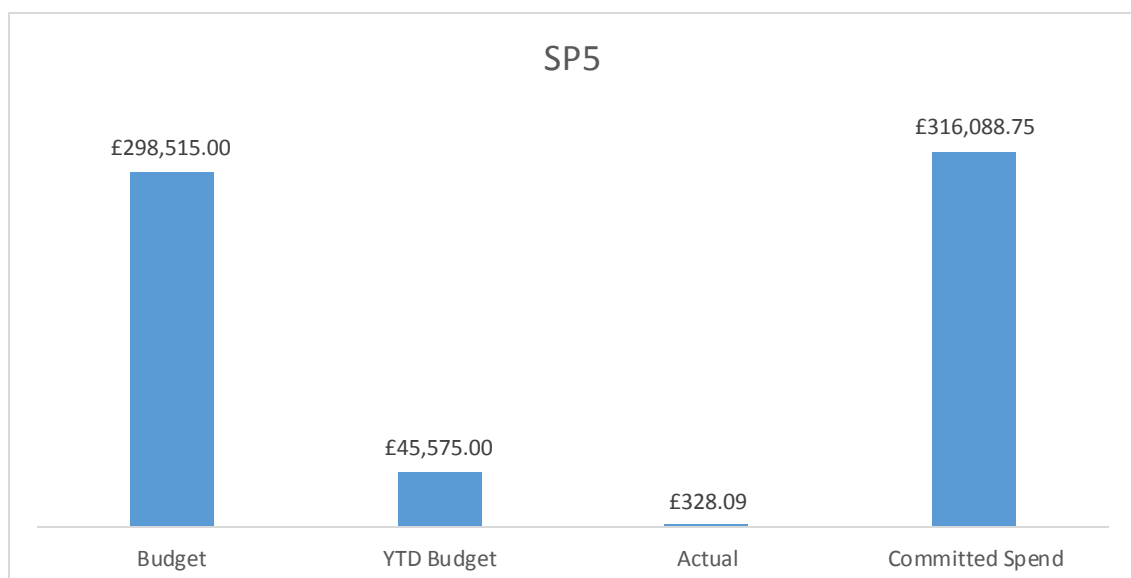
- 5.5.2: Work in collaboration with key stakeholders to support the strategic development of the core public health workforce in Scotland

- 5.6.3: Produce public and professional facing information and guidance, in order to advocate for and support informed and equitable access to immunisation and screening services
- 5.6.6: Work with key partners and stakeholders in Community Planning and Health and Social Care Integration to influence strategic direction, priority setting and resourcing to address inequalities
- 5.6.7: Provide support and guidance to key partners and stakeholders in Community Planning and Health and Social Care Integration to increase understanding of inequalities and inform practice and delivery that leads to more equitable outcomes in our communities
- 5.6.8: Work with a range of key stakeholders to scope and gain a better understanding of the wider workforce development infrastructure and learning needs with particular focus on local government

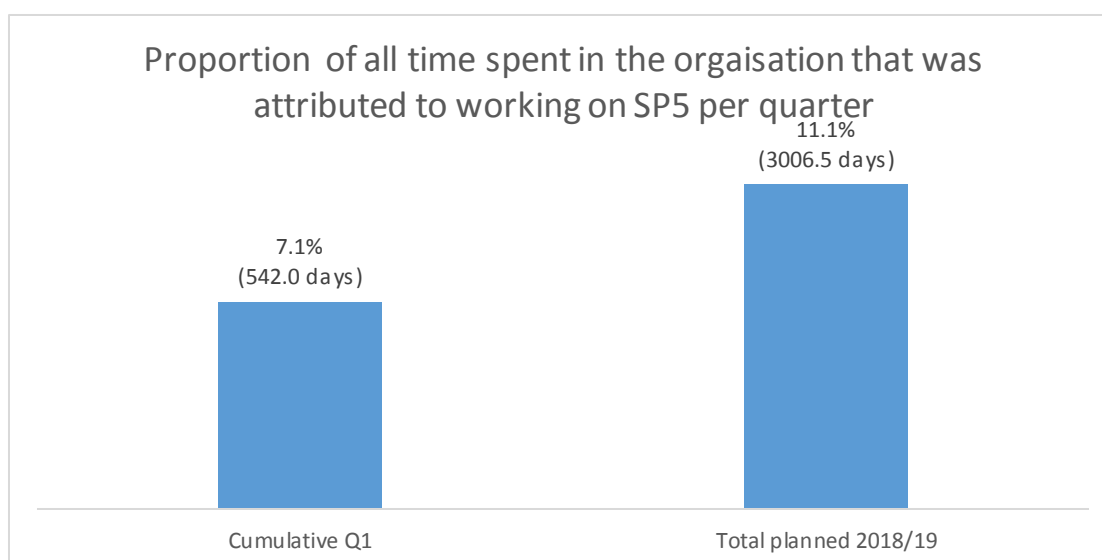
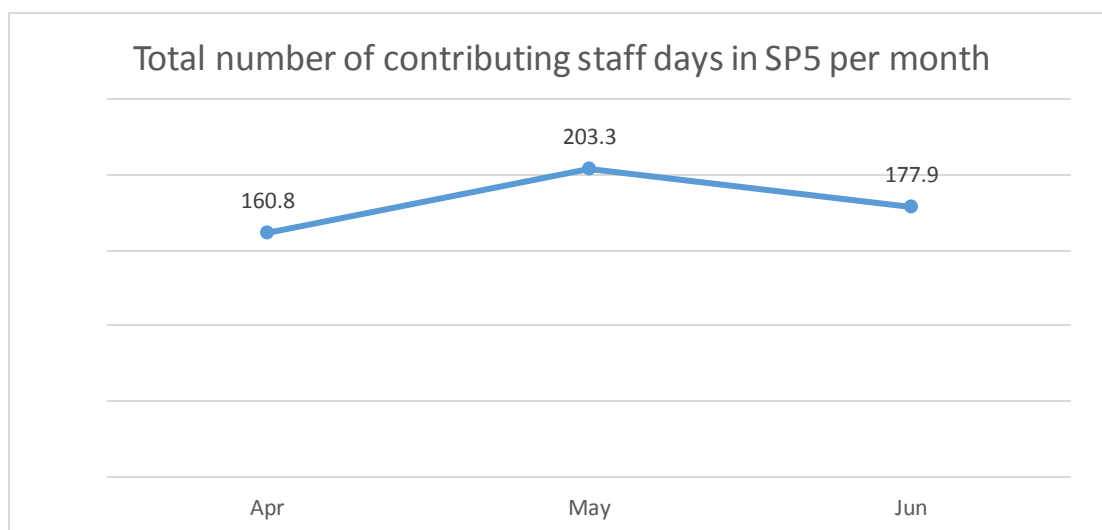
Issues affecting delivery



Financial data



Staff time data



Issues of note

- Internal discussions took place with our Corporate Management Team to consider how we can integrate the Health Promoting Health Service into new public health landscape.
- The importance of NHS staff health and wellbeing is recognised, although there are no firm plans in place yet to address it. The planning process identified a gap in evaluation capacity to fully deliver the primary care complex and broad agenda. Additional resources were allocated by Directors.

Coming up next quarter

- A pilot of Adverse Childhood Experience Enquiry in primary care will commence in Quarter 2, with organisational readiness assessments and preparation for staff training across eight Deep End general practices.

- We will host two workshops on homelessness. The first in July on homelessness data based on a recently published Scottish Government report published last week, and the second in September to review the Homelessness and Health Group.
- The British Sign Language e-learning module will be launched and as well as the online leadership hub for health inequalities.
- We will deliver an event in August in partnership with the ALLIANCE & Strathclyde University, to showcase our partnership work on participatory action research, including the Right to Health.
- Our Public Sector Reform team will engage with Third Sector Interfaces (TSIs) to establish their current priority areas in addressing inequalities so that we can better understand how we can support the third sector in their efforts to address inequalities.

Strategic Change Priority 1: Leading Public Health Improvement

Highlights this quarter

- We brought together staff from NHS Health Scotland and Public Health Intelligence (PHI) for a staff learning event on policy advocacy and influence. The aim was to increase our knowledge by hearing from expert speakers and be challenged and inspired to think creatively about how Public Health Scotland could be most impactful around policy. The half-day session included presentations from the Global Public Health Unit, University of Edinburgh and the Department of History and Politics at the University of Stirling.
- ScotPHN published the [report](#) of the stakeholder engagement events conducted on behalf of Scottish Government on the Public Health Priorities.
- ScotPHN continues to support the three national public health leadership groups and associated special interest groups to fulfil their work programmes and ensure effective cross group working.
- We shared our expertise and learning around policy advocacy and influence in public health with the Faculty of Public Health in Scotland Advocacy Group and visited NHS Tayside to share more in-depth learning around political engagement with a fellow member of the subgroup.
- We used a variety of engagement methods at the NHSScotland Event to generate useful discussion on public health and prevention. This included:
 - Meeting new stakeholders at our exhibition stand, sharing our materials and showing them everything on offer on our website
 - Hosting a parallel session on both days of the event, entitled '*Enabling Healthier Behaviours – What is our role in achieving a healthier Scotland?*' Speakers included the Chief Nursing Officer, an IJB Chief Officer and health improvement manager.
 - Presenting on human rights and the right to health at the 70th birthday theatre space.
 - Presenting two posters; British Sign Language Provision in the NHS - Improvement Plan; and Developing Excellence in Challenging Times: NHS Health Scotland's Approach.
- A final report on the work of the Shared Services Portfolio - Public Health Programme (Phase 2) 2018/2019 was submitted to Board Chief Executives, with the accepted recommendation that governance should now transfer to the Public Health Reform team and the outputs inform the work of relevant Commissions.
- One of our Senior Communications and Engagement Officers, has been nominated to the Executive Board of EuroHealthNet. Having representation on this Board provides one of the best opportunities to keep and consolidate a relationship with an important European stakeholder and influence its future direction.

Performance Information

Strategic Change Priority 1 has 5 Delivery Commitments, two of which have Performance Indicators due for completion this quarter.

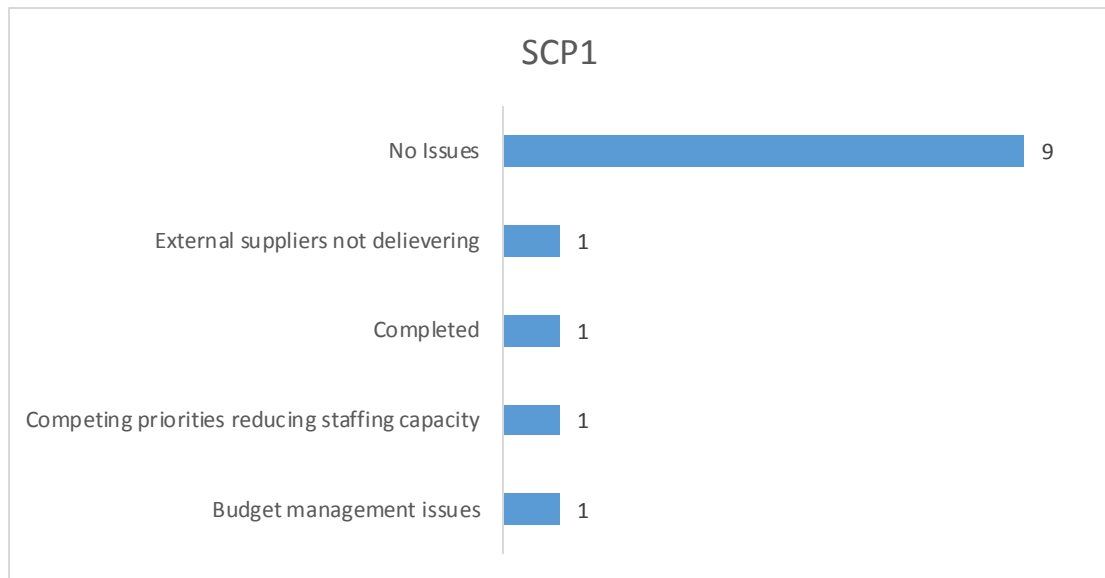
Delivery Commitment	Performance Indicator for Q1	
<p>Work with NHS National Services Scotland to discuss learning and enable improved practice around the gathering and use of data on key stakeholders</p>	<p>We have shared our approach to the gathering and use of data on key stakeholders with NSS, and specifically the Public Health Intelligence business unit, and learnt from their approach</p>	<p>AMBER We have agreed to work with the NSS Programme Director for the NSS Public Health Body Programme on this. We have liaised with NSS around managing partnering engagements, to learn from their approach.</p>
<p>Work with targeted stakeholders to promote and position fairer health improvement within the emerging public health landscape</p>	<p>Fairer health improvement is well represented in the national Public Health Priorities</p>	<p>GREEN The six Public Health Priorities all relate to fairer health improvement and two of the underlying principles are of key relevance; reducing inequalities, and fairness, equity and equality.</p>
<p>Work with and through the Executive Delivery Group and Programme Board to ensure that NHS Health Scotland contributes effectively to the development, planning and delivery of change in support of public health reform</p>	<p>We have undertaken effective stakeholder engagement with the Executive Delivery Group and Programme Board to influence the public health priorities</p>	<p>GREEN This has been accomplished.</p>

Delivery Commitments at risk of not delivering on time

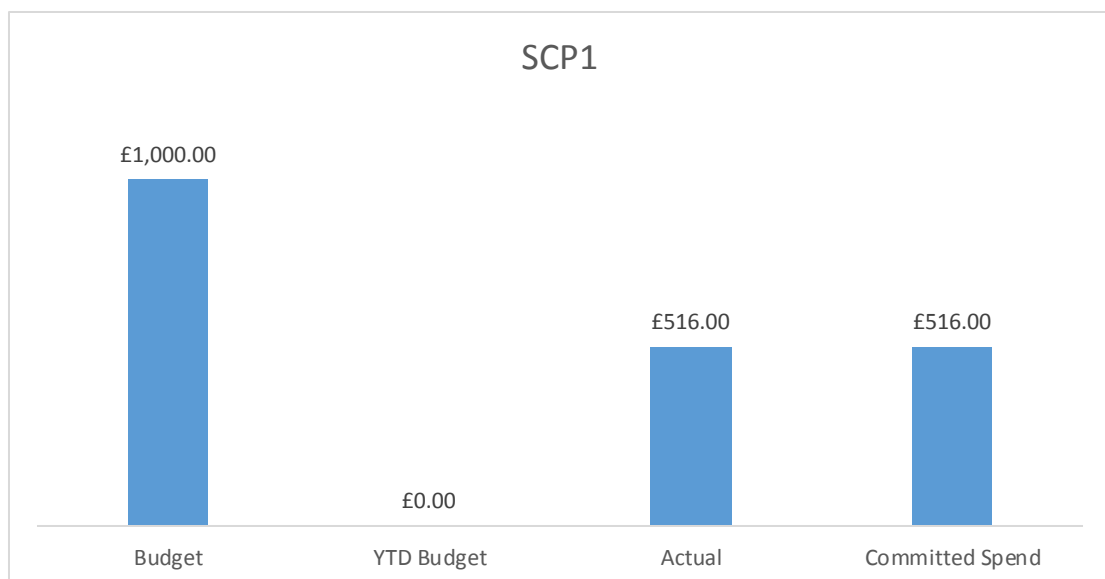
1 of the 5 Strategic Change Priority 1 delivery commitments have one or more outputs with issues affecting delivery:

- 6.2.3: Work with key stakeholders including the Faculty of Public Health in Scotland and the UK Public Health Network to share and embed learning around effective policy advocacy and human rights based approaches in public health

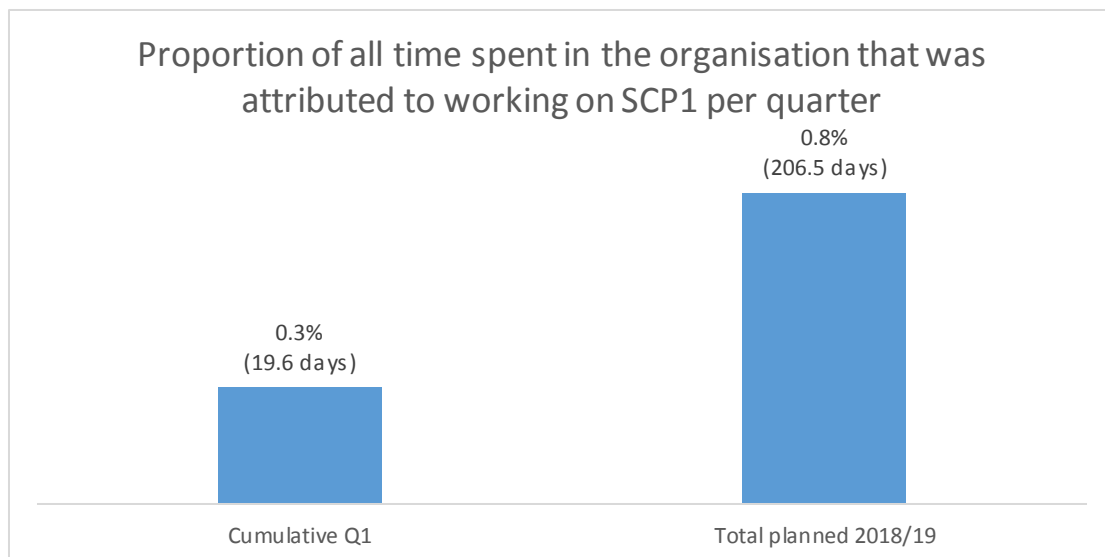
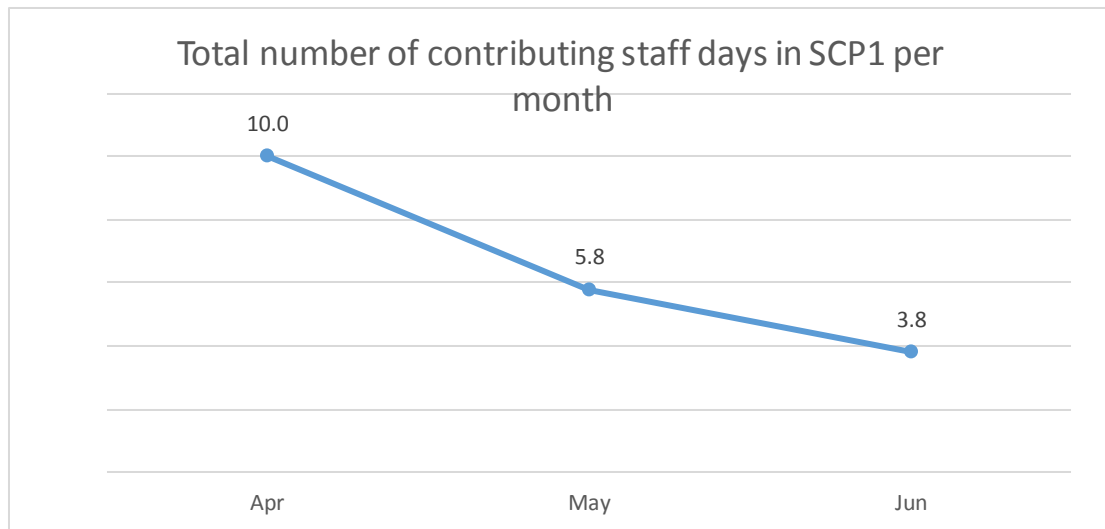
Issues affecting delivery



Financial data



Staff time data



Issues of note

None

Coming up next quarter

- We are working with NHS NSS colleagues and others to develop a more collaborative approach to stakeholder engagement around public health reform, and specifically around the Commissions. This work will be scoped at the beginning of August.

Strategic Change Priority 2: Making a Difference

Highlights this quarter

- We are on track to close the Well Scotland website by the end of Q1, with plans in place to rework specific identified content into the main NHS Health Scotland website.
- We are on track to close the Steps for Stress website by the end of Q1, with some content moving to NHS inform.
- We have provisionally secured the author of the new Ready Steady Baby! to write the new Ready Steady Toddler!
- We have finalised our proposed Open Government Licence (OGL) web and print content following input from the Chief Legal Office and are now preparing the roll out for Q2.
- The second version of the draft Ready Steady Baby! text – including topic expert inputs – is now complete and copy editing has begun.
- We have commissioned the new Ready Steady Baby! illustrations and photography commissioning is well underway.
- The accessible information policy has been submitted for internal review and is on track to be published in August.

Performance Information

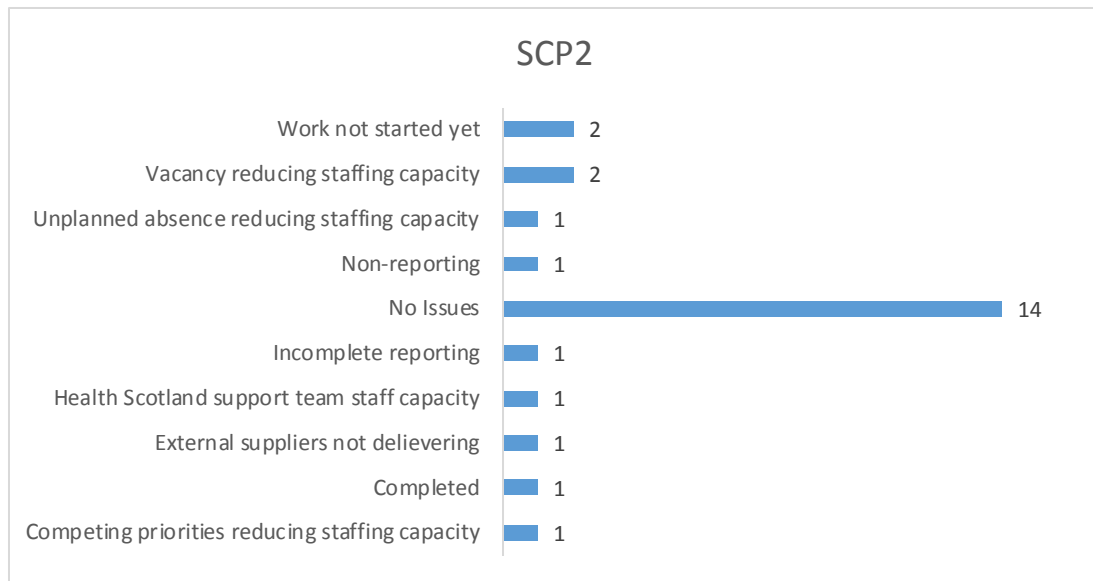
Strategic Change Priority 2 has 2 Delivery Commitments, none of which has Performance Indicators due for completion this quarter.

Delivery Commitments at risk of not delivering on time

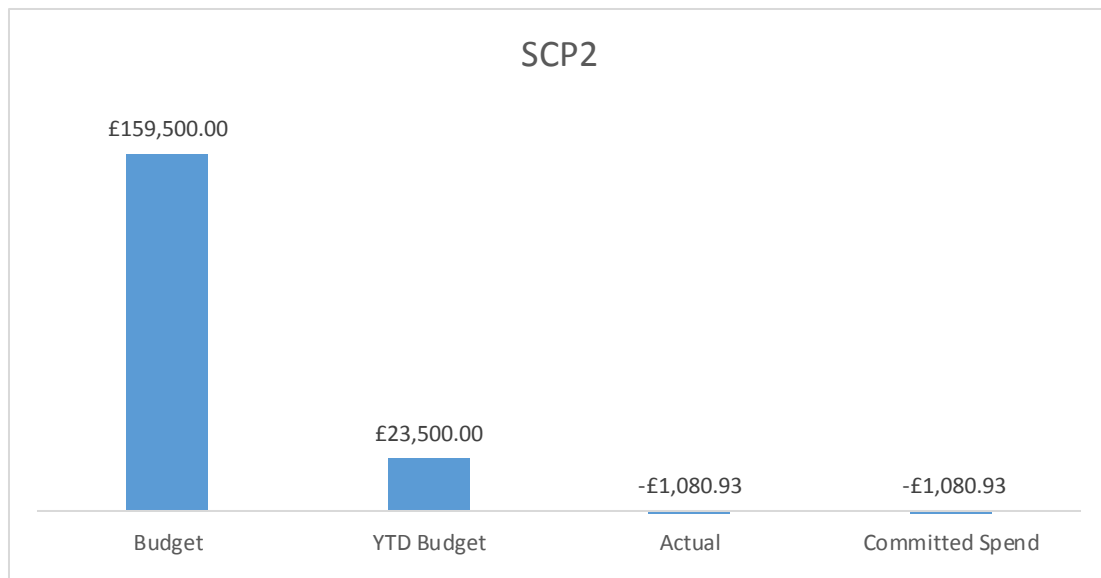
1 of the 2 Strategic Change Priority 2 delivery commitments have one or more outputs with issues affecting delivery:

- 7.1.2: Deliver Phase 1 of Redesigning Health Information for Parents (ReHIP)

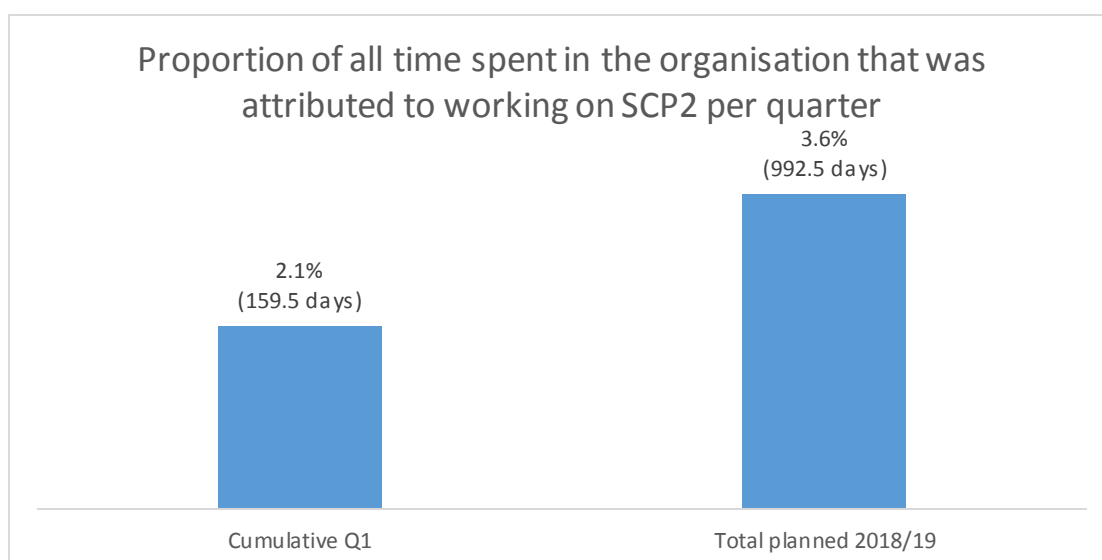
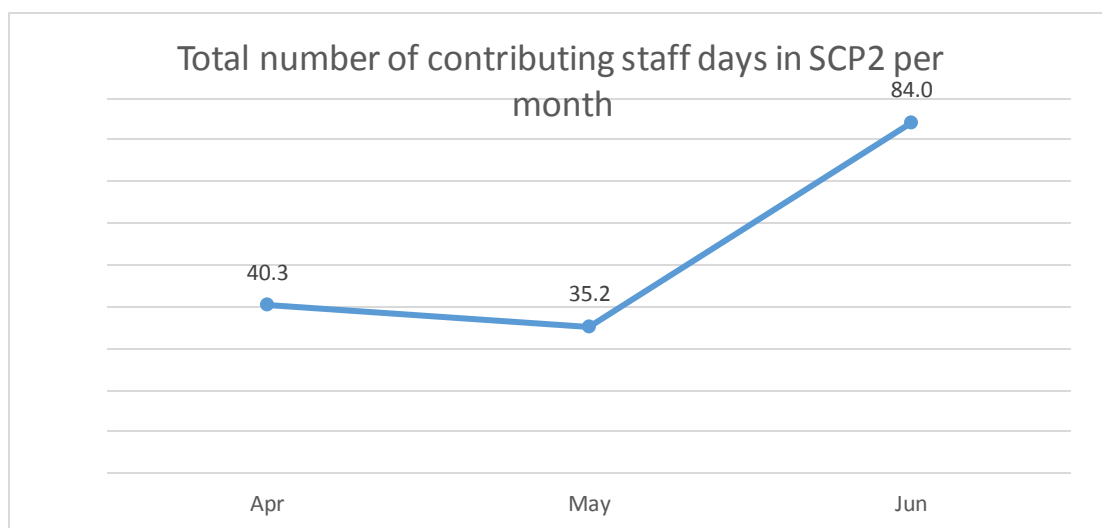
Issues affecting delivery



Financial data



Staff time data



Issues of note

- Implementation of the recommendations of the site audits of the Healthy Living Award and Maternity and Early Years websites are both on hold due to lack of capacity within Digital Services, but there is no significant risk associated with this delay.
- Progress moving the Gender Based Violence site content to the main corporate website has slowed due to a loss of contractor capacity before the project was completed, but again this poses no significant risk.

Coming up next quarter

- We will commence implementation of the Choose Life and Virtual Learning Environment audit recommendations.
- The new Accessible Information Policy will be published in August, with training rolled out thereafter.

Strategic Change Priority 3: Fit for the Future

Highlights this quarter

- We continue to work with other national boards to develop a Target Operating Model for Human Resources, Finance and Estates and Facilities.
- The Publishing Options Appraisal Working Group met in April. It was agreed not to recommend a single publishing unit at this time but to focus on quick-wins to ensure effective procurement and governance of print spend.
- A 'clipboard survey' of staff views on communication and change was carried out in May. 50 members of staff gave feedback, which has informed improvements to planned future communications.
- A range of sessions were held to support staff with change, including 45 NHS Health Scotland staff attending the Leading Successful Change Workshops alongside NSS PHI colleagues and internal leadership and change sessions with a number of teams.
- We reviewed, in partnership, how workforce resource decisions are made in the current climate and have implemented changes as a result.
- We have negotiated the removal of NHS Health Scotland from the remit of the Public Appointments Commissioner to support specific transition issues.
- We have started work with the NSS PHI business partner on IT due diligence.
- The Change Support Team has been focused on providing project management support to some of the PHR commissions and establishing due diligence processes.
- We refreshed our EFQM information to help inform the Public Health Reform commissions
- We completed our work to bring our information governance work into line with the General Data Protection Regulation by deadline of 25th May 2018 (GDPR live) across the organisation.

Performance Information

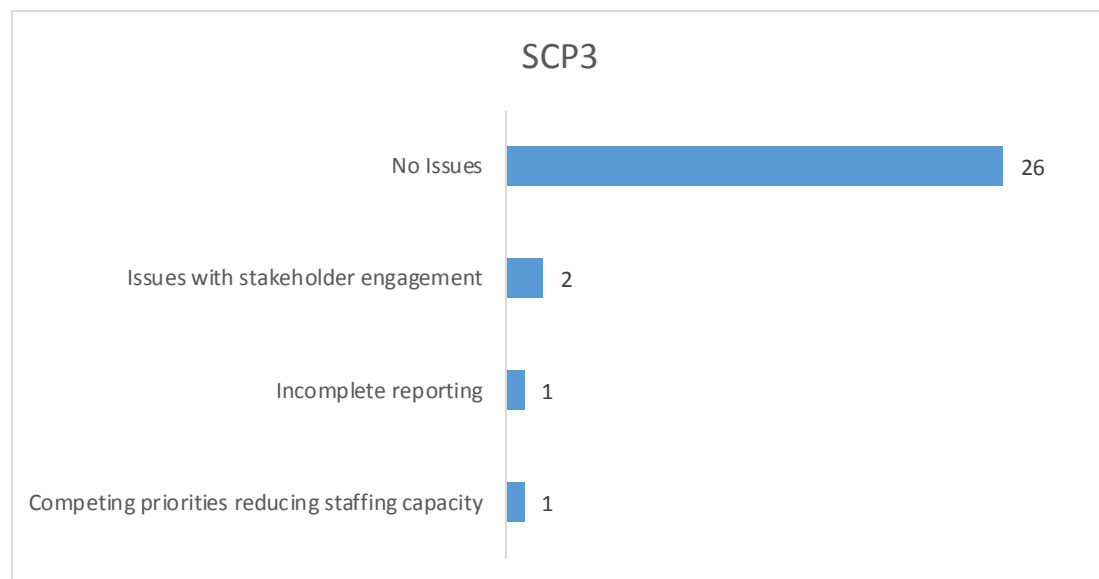
Strategic Change Priority 3 has 4 Delivery Commitments, one of which has a Performance Indicators due for completion this quarter.

Delivery Commitment	Performance Indicator for Q1
Undertake a programme of learning to promote and embed key behaviours required for the future context, working across organisational and agency boundaries	80% of staff have a completed Personal Development Plan recorded on Turas Appraisal by 31 May GREEN This has been exceeded - 96% of staff had a Personal Development Plan recorded.

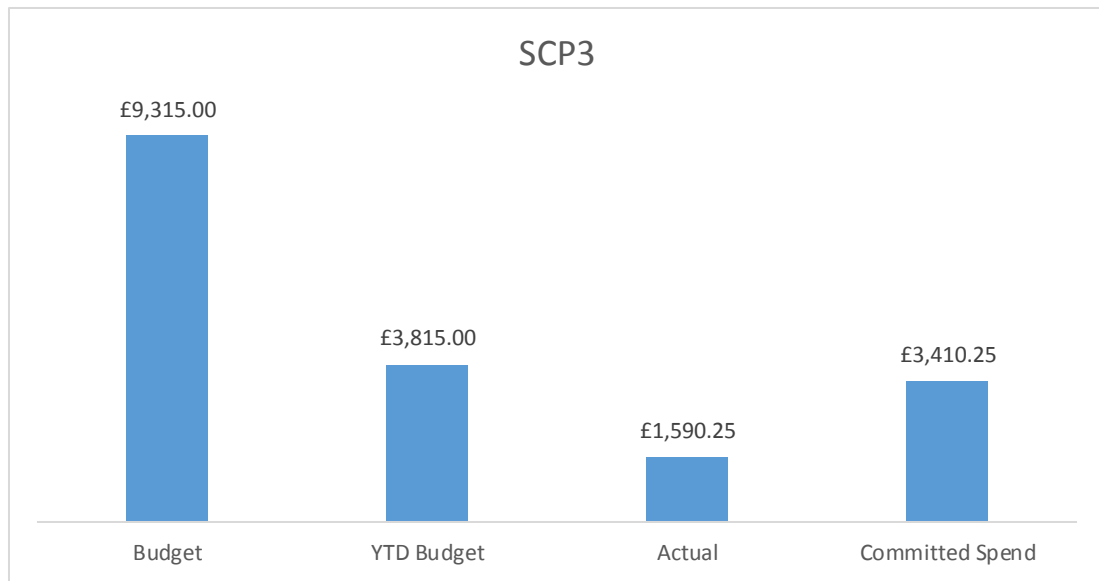
Delivery Commitments at risk of not delivering on time

None of the Strategic Change Priority 3 delivery commitments has one or more outputs with issues affecting delivery.

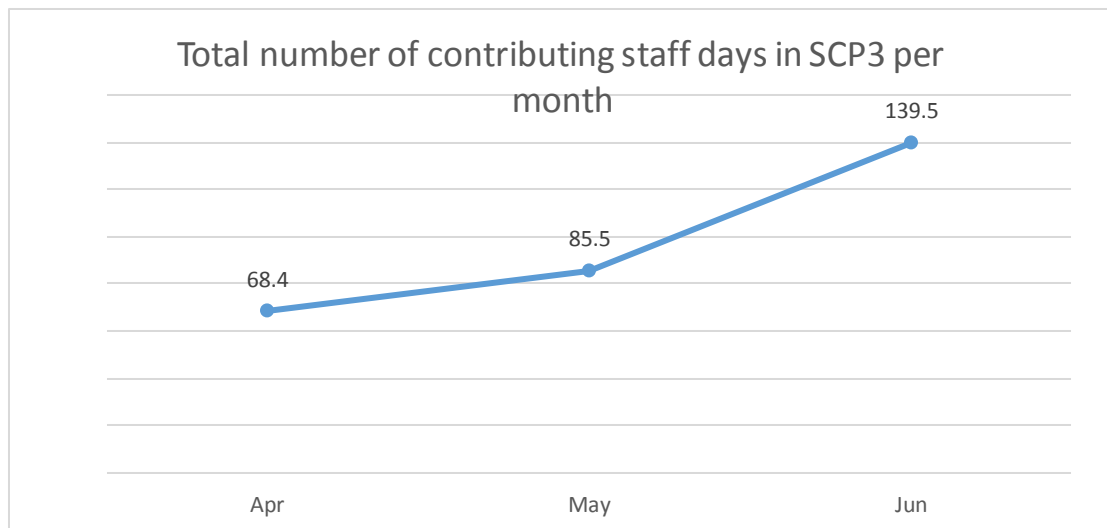
Issues affecting delivery

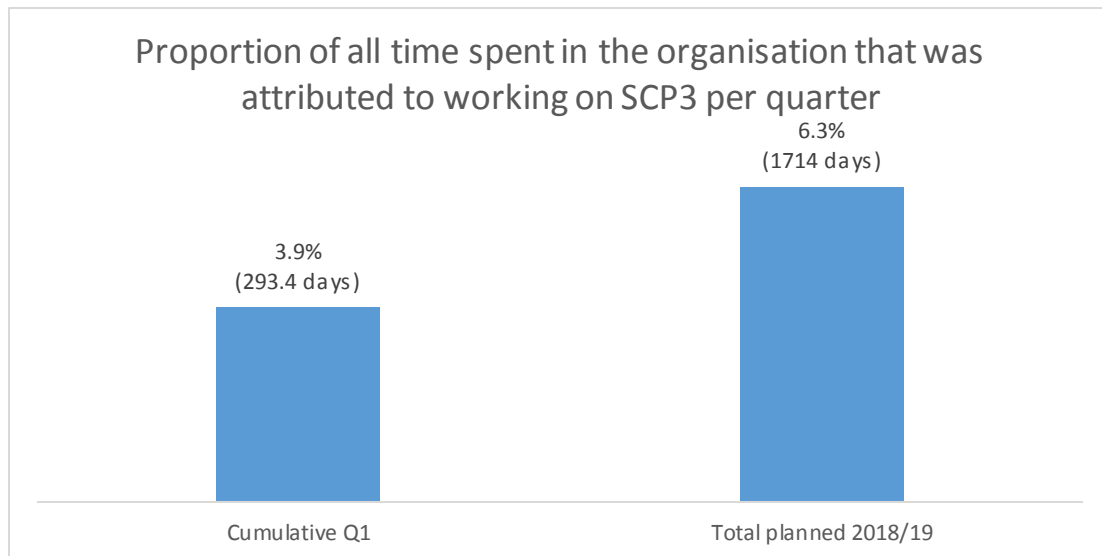


Financial data



Staff time data





Issues of note

- Uncertainty within core support teams as to the state of play with various shared services workstreams remains an issue.
- Generally, the capacity demands in supporting change and transition are rising. Teams are responding well to challenges to change ways of working and adjusting roles and priorities to accommodate new demands, but this requires monitoring.

Coming up next quarter

- Further meetings are planned with regards to the Target Operating Models
- The secondary legislation process using the Scottish Statutory Instrument is likely to have completed its progress through Scottish Parliament by October 2018.
- Further change and leadership support initiatives are planned, including the launch of Insights Discovery (profiling using psychometric tool and related training), to help people understand themselves and others and improve communication and relationships in the workplace.
- The new Change Hub will be completed and launched in response to staff feedback.
- A mapping exercise will be undertaken of knowledge and research held by the organisation and a decision taken on whether the project will progress in partnership with PHI or once Public Health Scotland is established.

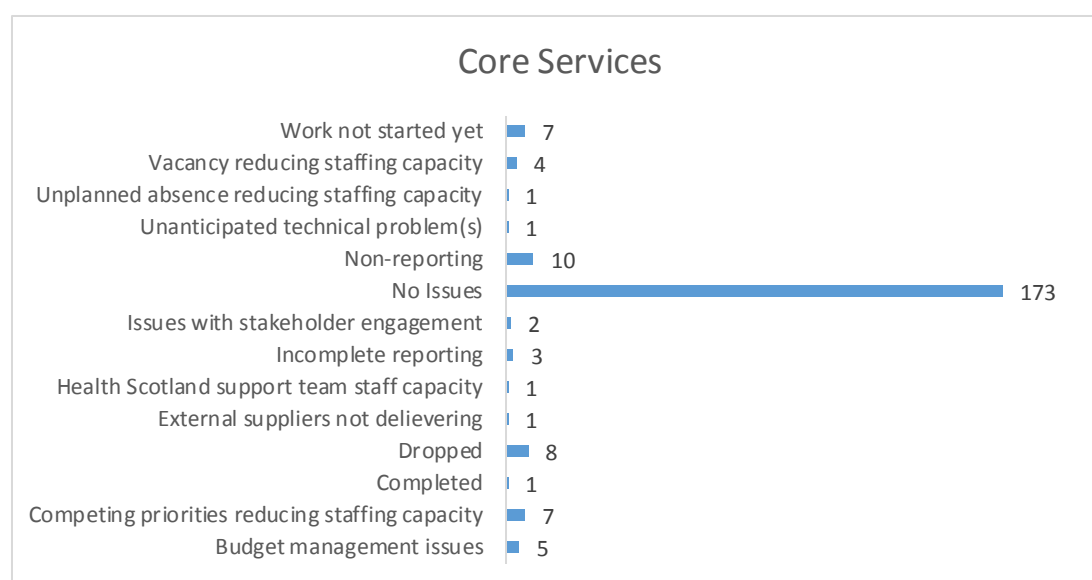
Part 3: Core Services

Performance Information

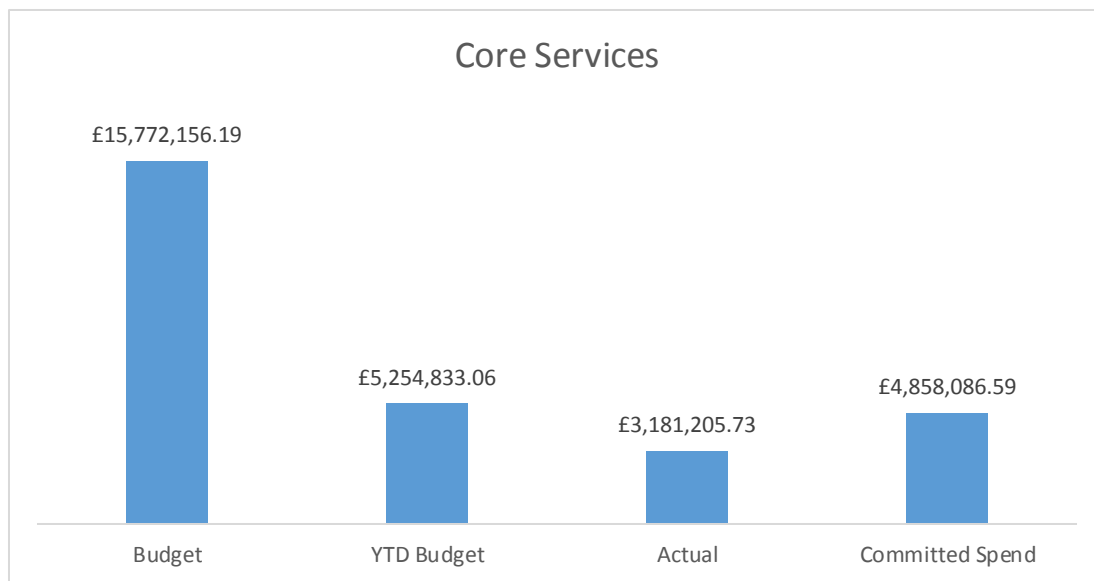
3 of the 12 Core Services delivery commitments have one or more outputs with issues affecting delivery:

- 9.1.3 Planning and delivery: deliver specific improvements in how we plan so that our delivery and impact is improved
- 9.1.7 Finance and procurement: provide the financial resources and services required to support the organisation to achieve our Delivery Plan and meet audit standards
- 9.1.11 Product delivery: ensure that our products are designed and delivered to high standards of quality and effectively disseminated to customers through a variety of channels

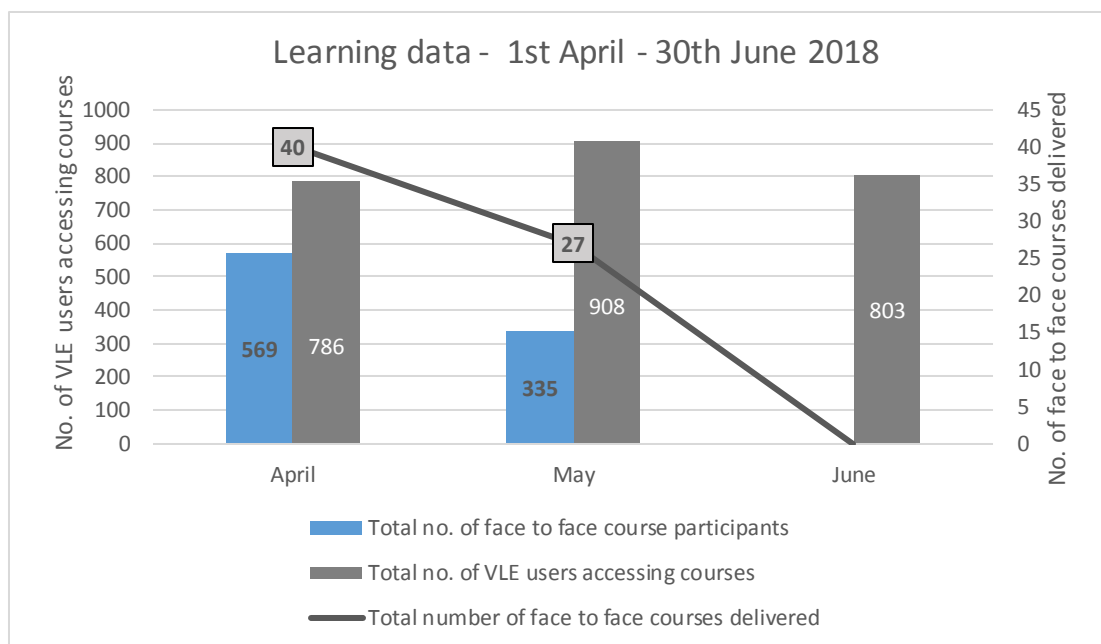
Issues affecting delivery



Financial data

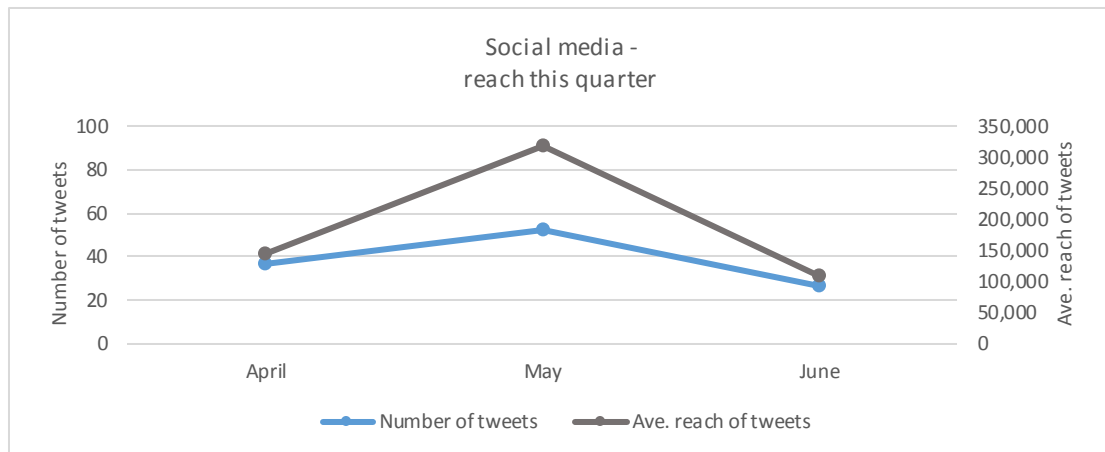


Learning data



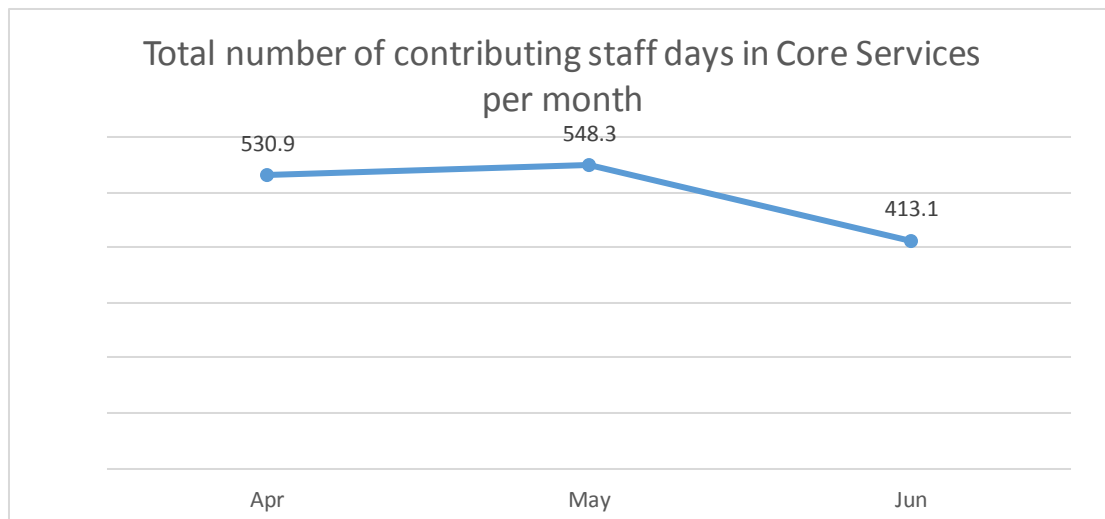
- The figures for face to face training are only an approximation as accurate figures can only be determined after approximately eight weeks once trainers who have locally delivered training send their feedback forms in for data processing.
- Virtual Learning Environment users may be counted more than once as they often access more than one course in the three month period, especially if they are new starts doing modules as part of their induction.

Social media

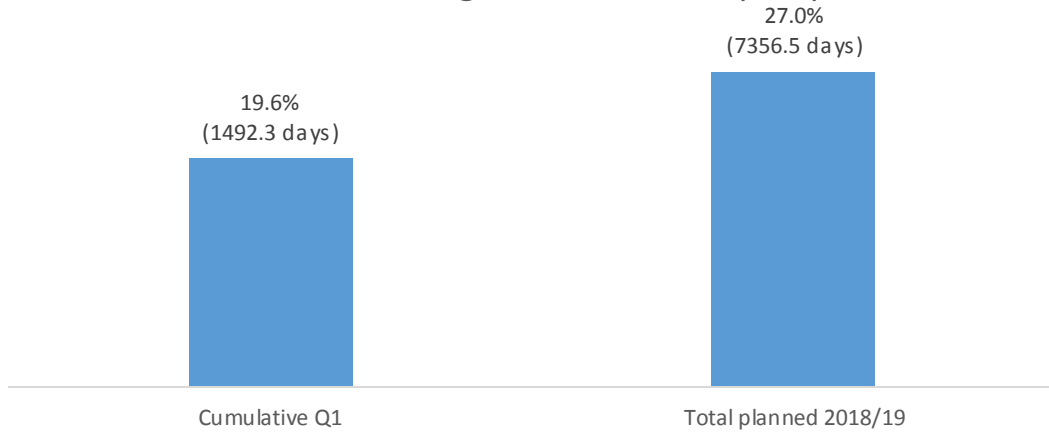


- The graph above displays the reach of tweets for Q1 for SP1-SP5.
- Our average engagement rate was 1.1%; meeting our monthly engagement rate target.
- The number of followers continually grew during the quarter.
- Our impressions are higher than in Q4 of 2017/18. This is mainly attributable to the launch of the ACEs animation in May which was widely shared and we earned 65,000 impressions based on this single tweet. Public Health Lothian, ACE stakeholders and child poverty stakeholders were pro-active in engaging with tweets from the NHS Children, Young People and Families (NHS CYPF) twitter account.

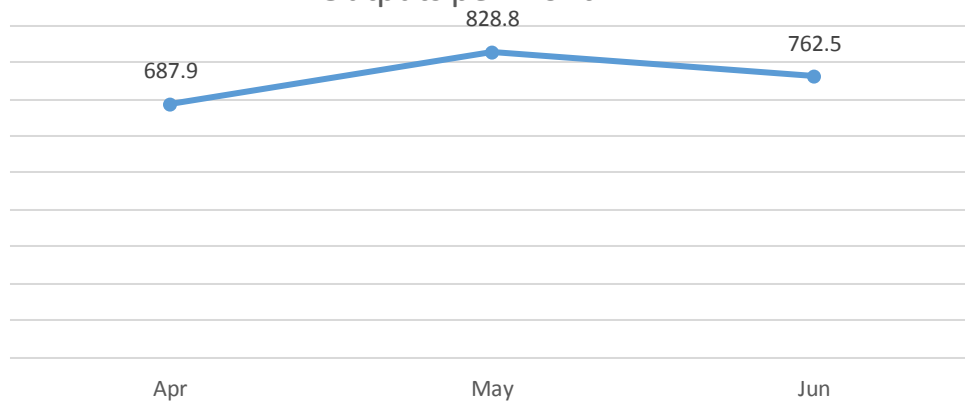
Staff time data



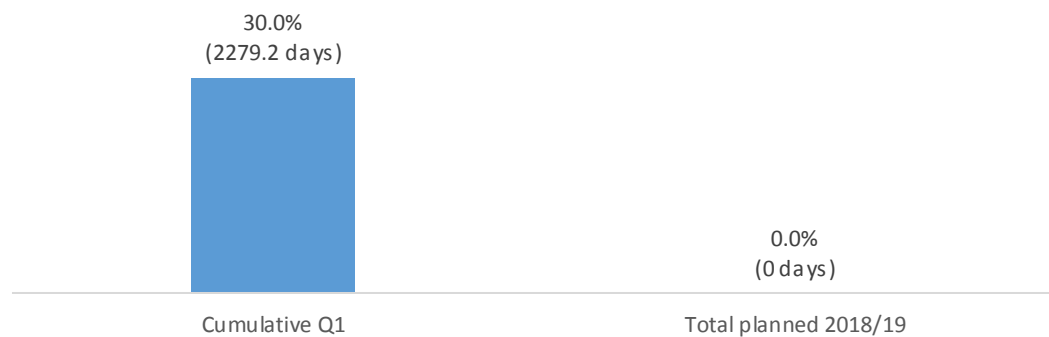
Proportion of all time spent in the organisation that was attributed to working on Core Services per quarter



Total number of contributing staff days in Corporate Outputs per month



Proportion of all time spent in the organisation that was attributed to working on 7 Corporate Outputs per quarter



Part 4: Corporate Risks

Risk 18-1: Reduction in Core Funding

Description

As our core funding reduces, there is a risk that we cannot deliver everything we want or our funders expect in 2018/19.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-1 these were identified as follows:-

Controls in Place

- Budget setting process for 18/19 in place in March 2018
- Original budgets identified unallocated budget and contingencies
- Commissioner tasked with identifying bids v shortfalls in business/operating plan in June 18
- CMT reviewing unallocated budgets each week v demands/operational issues
- Management Accounts produced each month
- y/e Forecasts produced from June 18

Action Plan

- To be developed depending on controls during 18/19

Measures

- Unallocated budgets each month
- Year end Forecast surplus

Risk 18-2: Delivering our Commitments

Description

As a result of needing more of our resources than anticipated to manage the transition to the new public health body, there is a risk we do not deliver all our commitments for 2018/19.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-2 these were identified as follows:-

Controls in Place

- Commissioners reviewing business plan including deliverables each month
- CMT/COG reviewing demands across the organization on an ongoing basis

Action Plan

- Appropriate action as a result of the output from control measures.

Measures

- Outstanding deliverables - traffic light system on strategic priorities

Risk 18-3: Transition of Governance

Description

As a result of the transition of governance to the new public health body or a lack of contingency planning for a delayed start date, there is a risk there are gaps in accountability, resulting in reputational damage.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-3 these were identified as follows:-

Controls in Place

- The Board are scheduled to approve a range of NHS Health Scotland plans in March 2019 e.g. Draft NHS Health Scotland Delivery Plan 2019/20, Workforce Planning Assumptions 2019/20, Financial plan 2019/20, however the Board will cease to exist in November 2019. Given the new public health priorities for Scotland have been published and the PHR Commissions underway, an approach to planning for 2019/20 will need to be discussed with Scottish Government and agreed by CMT and approved by the Board.
- The approval of the 2019/20 NHS Health Scotland annual accounts would normally take place in June 2020 when the Board will no longer exist.

Action Plan

- Board Governance Transition Plan is scheduled to return to Board in September 2018. Issues such as this will need to be flagged and included.

Measures

- During this transition period the governance and accountability for public resources is clarified and line of governance sight maintained using and agreed plan and approach.

Risk 18-4: Different cultures and practices of the legacy bodies

Description

As a result of issues in the process of creating the new public health body, there is a risk that the different cultures and practices of the legacy bodies become an impediment to the effectiveness of the new body.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-4 these were identified as follows:-

Controls in Place

- Current strong commitment to iMatter, Turas, Partnership working, governance structures and financial and performance reporting

Action Plan

- Within the Commissions ensure that the strengths of both organisations are appropriately captured alongside those of others The first phase of commissions should be completed by December 2018 In addition culture of the new organization will be considered within the Organisational Development commission

Measures

- Prior to the new public health body being set up, monitoring of effectiveness of current culture through iMatter and CPT reporting

Risk 18-5: Impact on productivity and staff turnover

Description

As a result of changes to the new public health body and shared services, there is a risk of an impact on productivity and staff turnover, and so we do not deliver all our commitments for 2018/19.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-5 these were identified as follows:-

Controls in Place

- Impact on productivity is monitored monthly and reported through quarterly reporting and staff turnover is monitored monthly through HR and reported through Partnership Forum.
- The Commissioners Group will also monitor overall progress against strategic priorities and delivery commitments with the responsibility to reallocate available spend to struggling delivery commitments.
- During planning, staff were encouraged to hold back some unallocated delivery time to help with delivery and unexpected demands

Action Plan

- the movement of the WRG group responsibilities to CMT is aimed to help ensure staff resource is allocated to current priorities in year

Measures

- Output progress through CPT and staff turnover captured in graph monthly throughout year

Risk 18-6: Engaging Local Authority and 3rd sector in creating new Public Health body

Description

As a result of not engaging local authority and third sectors in creating the new public health body, key perspectives are not heard, reducing its credibility.

Update

The first month of reporting was to identify the Controls in Place, the Action plan and the measures

For Risk 18-6 these were identified as follows:-

Controls in Place

- stakeholder strategy approved by board, content informed by stakeholder survey
- stakeholder strategy in place and regularly reviewed
- stakeholder engagement captured weekly at Directors meetings

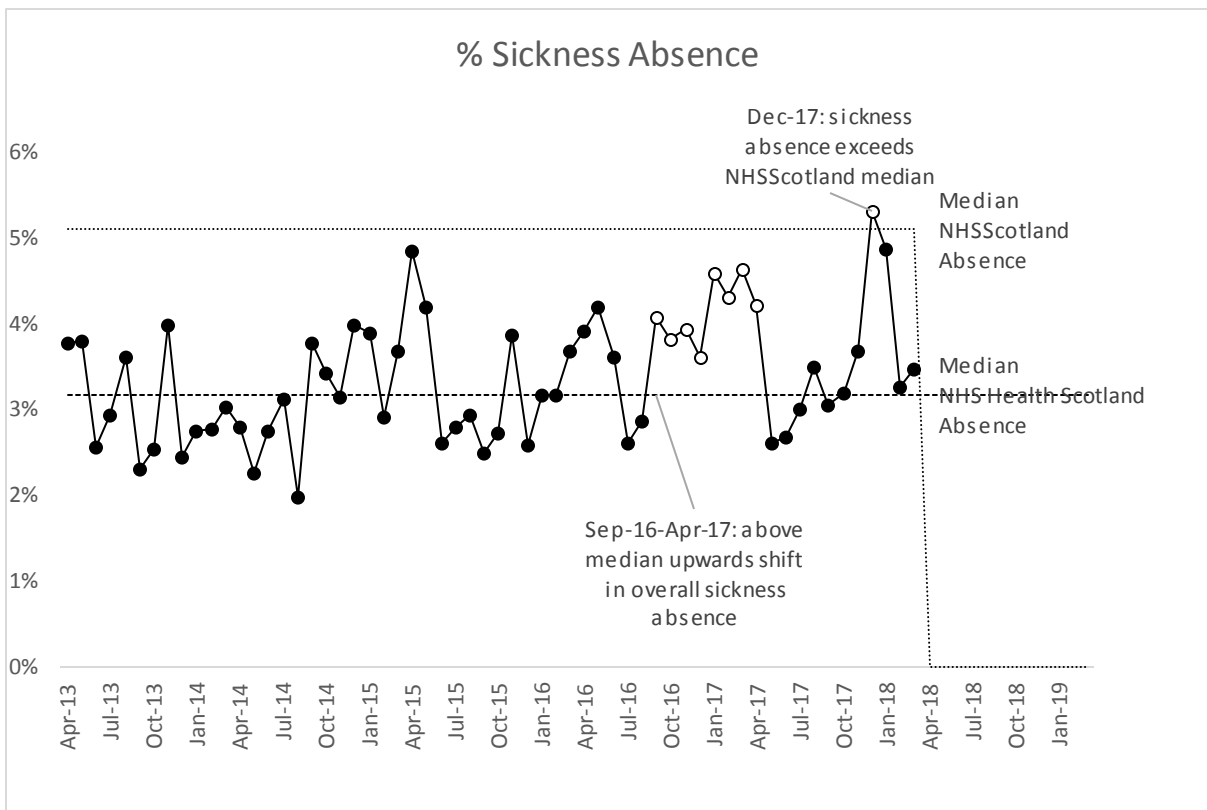
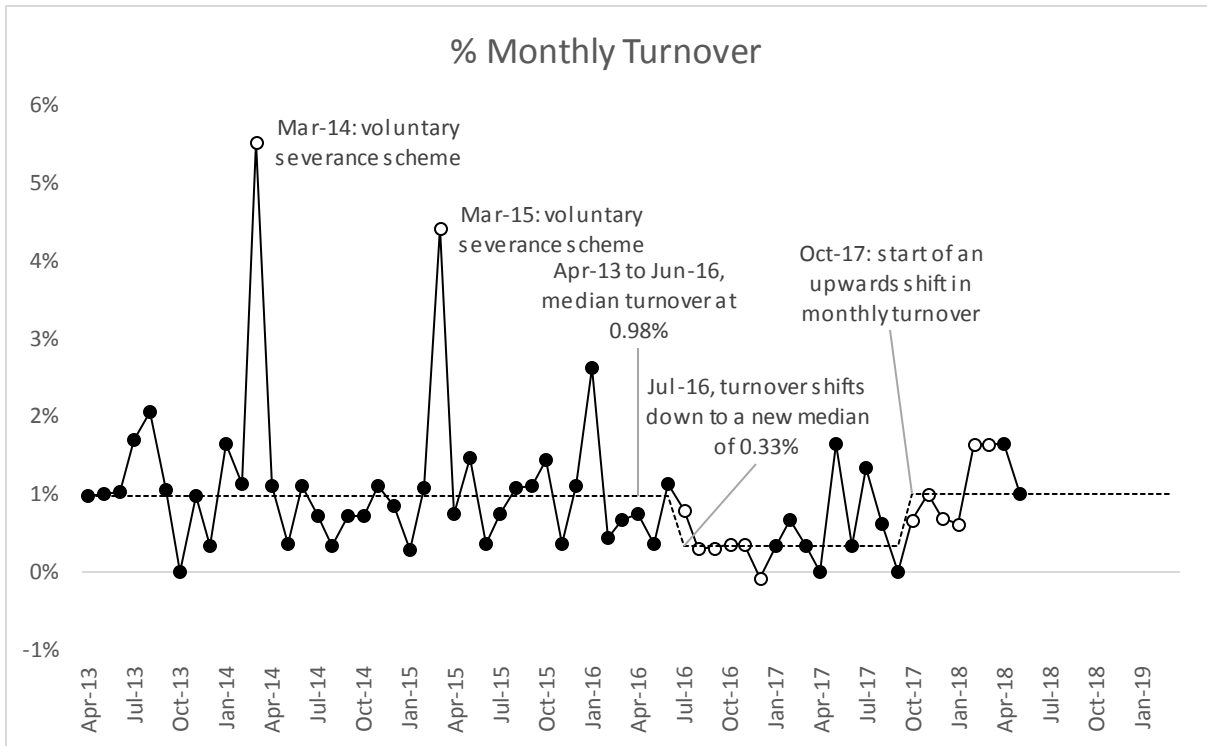
Action Plan

- regular reviews of effectiveness of stakeholder engagement
- further actions and plans to be developed

Measures

- % of key stakeholders engaged monitored

Part 5: Workforce Statistics



Part 6: Finance Report

NHS Health Scotland's draft financial position for the 3 month period ending 30 June 2018 is summarised below. It will be reported in detail to the Audit Committee at their 7 September meeting.

- The Board's 2018/19 RRL as advised in the 2 July allocation letter from the Scottish Government was £18,576k which includes a baseline of £18,265k (£18,400 less smokeline of £135k) and non-recurring allocations of £311k.
- The £151k underspend against the phased budget consists of 2 elements; an overall underspend of £149k on staffing and a net underspend of £2k on projects.
- Staffing: Our revised vacancy target of 5% gives a salaries budget (net of vacancy factor) at £12,696k. This is made up of the original staff budget at £12,601k plus additional staff core budget in March/April of £54k and non-core staff funding of £41k. The £149k saving to date is expected to increase by the year-end to at least £200k but we will be preparing detailed staff forecasts throughout the year.
- We have committed to a £325k saving on revenue as part of our financial and operational plan for 18/19 being our assessment of our contribution to the £15m target from the National Boards.
- The collaborative savings across the National Boards against the £15m target for 2018/19 amounted to £11.6m from individual plans. The shortfall of £3.4m has still to be identified.
- Our year-end forecast is at £365k as we have a general contingency of £200k and a specific contingency against the pay award of £140k as SG have signalled they will be funding the pay award above 1%. We expect the position to be clarified over the summer