

BOARD MEETING: 22 March 2019

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-ceo@nhs.net

CHANGE AND TRANSITION UPDATE

Recommendation/action required:

Members are invited to:

- Note the latest update on Change and Transition
- Discuss any priority issues and confirm that this provides satisfactory assurance of actions being taken

Governance Issues arising from this paper:

For noting:	<ul style="list-style-type: none"> - The second round of recruitment for the Chair of Public Health Scotland is still expected to start soon. No changes to the overall timeframe have been proposed. - KPMG has been appointed to support the PHR Finance Project to enable detailed financial preparation work. - Discussions have taken place between HR Steering Group members (including Cath Denholm) and union representatives and in principle positions reached regarding: the management of policies such as VR and Job Review in both PHI and Health Scotland in the run up to Public Health Scotland; proposals for the process of recruiting the senior management team of the new organisation.
For decision:	- None identified

Author:

Sponsoring Director:

<p>Elsbeth Molony Organisational Lead for Communications and Engagement</p>	<p>Cath Denholm Director of Strategy</p>
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14 March 2019

CHANGE AND TRANSITION UPDATE

1. Purpose of Paper

This paper:

- Provides the latest internal update on Change and Transition
- Highlights current issues which may merit discussion

2. Governance of the Public Health Reform Programme

- The Public Health Reform Programme Board last met on 25 February. Gerry McLaughlin, Cath Denholm and Tim Andrew attended. The meeting focussed on:
 - Version 1.0 of the Target Operating Model, which incorporates feedback received on the earlier iteration (see below).
 - The progress of the Corporate Services project
 - HR arrangements for TUPE transfer
- A second round of recruitment for the Chair of Public Health Scotland is still expected to start soon. No changes to the overall timeframe have been proposed. Plans to begin to recruit the CEO from next month are still on track.
- The formal consultation to enable the legislative set up of Public Health Scotland is with the Minister for Public Health, Sport and Wellbeing. It is anticipated that publication will be delayed a few more weeks. We have plans ready to put into action to develop the response, with early engagement with the Board and with staffside. Staff communications have been prepared in order to alert staff as to how to get involved.

Implications

- During the discussion about the Target Operating Model, the PHR Programme Board reaffirmed their commitment to delivering a new body that supports and enables the whole system. They were also in principle supportive of an outcomes-based approach to demonstrating the intent of the new body to be influential and provide leadership across the whole public health system, but felt more work needed done to deliver a structure that would be viable from vesting day on 1 December. The additional feedback gained from staff and stakeholders over the next few weeks will help to shape the TOM and transition plan.
- The PHR Programme Board expressed concerns about timescales and prioritisation of action for day one readiness. Cath Denholm, in her capacity as Co Lead for the Corporate Services Project, has responded with a Plan for Priority Deliverables for March and April. This has been endorsed by the Senior Management Team of the Public Health Reform Team and is now being implemented.

3. Whole System & Stakeholder Issues

- The Whole System Working Group met on 6 March. The focus of the meeting was on learning from local experience, the options for deployment of the specialist workforce, and the Target Operating Model.
- The PHR team is leading a process of engagement with staff and stakeholders on the emergent Target Operating Model for Public Health Scotland. This included four large events on 14 and 18 of March for staff from NHS Health Scotland and Public Health Intelligence.
- The National Boards Collaborative stakeholder engagement plan is expected to be signed-off by Board Chairs and Chief Executives at the end of March. The collaborative work that Boards are doing with other bodies out with the NHS will be reflected in future communications.
- We have had pre-publication sight of a new study that looks at “the different failings of the Australian National Preventive Health Agency and New Zealand’s Health Promotion Association, and the relative success of Public Health England”. The authors identified the “key dilemmas that the advocates and architects of these new bodies face: whether to court or avoid conflict with key stakeholders, how to shape the remit of agency activities and responsibilities in contested policy terrain, and how to establish long-term credibility”.

Implications

- In response to the study referred to above, we are setting up a seminar in May with two of the authors. The summary findings are:
 - a) creating agencies cannot solve the prevention problem, as the viability of agencies depends on a complex configuration of factors which shift over time;
 - b) such agencies may actually serve this agenda better by emphasising technical public health programmes and sneaking prevention in the back door rather than by offering the bold advocacy many envisage; and
 - c) building and maintaining widespread legitimacy for such agencies, and their work, may come at the expense of quick progress or radical action.

Board members will be welcome to attend this seminar and details will be circulated.

4. Public Health Reform Commissions and Projects

- The tables below outline the progress of the Commissions and Projects.
- Please see Appendix A for a timeline for future work around the creation of Public Health Scotland.

Implications

- The Specialist Workforce Commission is looking at options for the deployment of specialist public health staff working within public health departments across all national and territorial boards, staff working in public health intelligence, and environmental health officers. Although the six options under consideration have more direct and substantial implications for staff working in territorial boards, the outcome of this commission will also impact on how we work as part of Public Health Scotland in the future.
- The Programme Board has endorsed a number of recommendations from the HR for PHS Steering Group, designed to ensure that the consultation for staff on TUPE transfer into PHS will be as straightforward as possible. This has now been discussed with Unions and an in principle agreement has been reached regarding arrangements for TUPE consultation. Discussions have also taken place regarding a common approach to certain key policies in the run up to vesting day, and very recently, some proposals have been put forward regarding the management of recruitment into the senior management posts of Public Health Scotland.
- The Corporate Services Project is now one of the most significant pieces of work being undertaken around change and transition. This is both from the point of view of numbers of staff affected, and demand on capacity. A Day 1 Readiness Workshop is taking place on 19 – 20 March and the following five workstream areas have been prioritised for Future State workshops to take place in April. The purpose of these is to describe what will be required from these services by Public Health Scotland:
 - People services
 - IT
 - Operations management
 - Finance and risk
 - Procurement

Table 1: Update on Public Health Reform Commissions

Commission	Lead Organisations	HS Sponsor Director/Lead Contributor	Update
Improving health	<ul style="list-style-type: none"> - NHS Health Scotland - Integration Joint Board Chief Officers Group 	<ul style="list-style-type: none"> - Cath Denholm - Matt Lowther 	The commission is preparing a shared response to the Target Operating Model.
Protecting health	<ul style="list-style-type: none"> - National Services Scotland (NSS) - Scottish Directors of Public Health 	<ul style="list-style-type: none"> - Andrew Fraser - Phil Mackie 	The commission submitted their final deliverable in December. Some further work has since been commissioned by the PHR team.
Improving services	<ul style="list-style-type: none"> - NSS - Health Service Public Health Group - Improvement Service - Integration Joint Board Chief Officers Group (no co-chair yet) 	<ul style="list-style-type: none"> - Pauline Craig 	The commission submitted their final deliverable in December. A further meeting of the Commission Group in March 2019 to develop their response to TOM 1.0 re-iterated their commitment to the theory behind Population Integrated Care and that a clear outcome and staff capacity for achieving population health gain through service planning should be included in the structure and function of PHS. The group also recommended that a formal or semi-formal relationship should be established between PHS, Healthcare Improvement Scotland and NSS in order to establish partnership approaches to service planning.
Underpinning data and intelligence	<ul style="list-style-type: none"> - NSS - NHS Health Scotland - Improvement Service 	<ul style="list-style-type: none"> - Andrew Fraser - Diane Stockton - Gerry McCartney 	The commission submitted their final deliverable in December. Some further work has since been commissioned by the PHR team.
Leadership for public health	<ul style="list-style-type: none"> - Facilitated workshops undertaken by Scottish 	<ul style="list-style-type: none"> - Andrew Fraser - Phil Mackie 	The third engagement event for end users of research and evidence took place on 30 January with 53 delegates in

research and innovation	Public Health Network (ScotPHN)		attendance. A survey has been issued to academics to understand the wider contribution of academic disciplines to research on the health of the public.
Leadership for the broad public health workforce	<ul style="list-style-type: none"> - NHS Health Scotland - NHS National Education for Scotland - Improvement Service 	<ul style="list-style-type: none"> - Andrew Fraser - Wilma Reid 	Continued stakeholder engagement is planned with Scottish Care, Skills Development Scotland, Public Health England's wider workforce research lead, the Alliance Third Sector group and selected leads in CPPs. Meetings have been set up with project team members to develop the future state of workforce development and the future framework, taking a whole system approach. Amanda Spark has joined the project team as a co-lead from the Improvement Service
Workforce of the new body: organisational development	<ul style="list-style-type: none"> - NHS Health Scotland - NSS 	<ul style="list-style-type: none"> - Cath Denholm - Jim Carruth 	<p>The findings of 17 recent one hour sessions for managers have been shared with the PHR Team. The sessions were delivered to 285 (37%) PHI and 52 (45%) of HS line managers to understand their current challenges while leading their staff through change and support required to address them. Findings tell us there's a lack of knowledge and understanding of public health, organisational strategy and the Vision for PHS; communications are mostly in written format, very corporate and high level, managers want more face to face and 'in a nutshell' updates (3-5 key headlines), and more visible leadership. They want more opportunities for joint working, networking, sharing experiences with peers, managing difficult conversations and holding the ambiguity. Anxieties around practical changes such as accommodation, flexi system, agile/flexible working.</p> <p>Six two hour joint focus groups were held in February with, approximately 80 PHI and HS staff attending. The purpose was to develop values further by creating supporting</p>

			statements and behaviours staff expect to see embodied and ideas on how to embed them.
Optimising specialist public health workforce arrangements	<ul style="list-style-type: none"> - Dona Milne (Director of Public Health, NHS Fife) - Audrey Sutton, Head of Service, Connected Communities, at North Ayrshire Council 	<ul style="list-style-type: none"> - Gerry McCartney 	The Commission has proposed six options for the deployment of specialist public health staff in the future. Stakeholder engagement is now underway.

Table 2: Update on Public Health Scotland Supporting Arrangement Projects

Project	Lead	HS Sponsor Director/Lead Contributor	Update
HR for the new body	- Jacqui Jones, NSS	- Cath Denholm - Jim Carruth - Shonaidh Dyer	The Steering Group last met on 12 March.
Budgets and financial management	- Carolyn Low, NSS	- Andrew Patience	The Finance Project has met for the first time. KPMG have been appointed to support certain aspects of the work.
Governance and accountability	- Public Health Reform Team	- Della Thomas	A formal PID has been drawn up and will be submitted to the March Programme Board for approval. A new member of the PRT Team began work at the end of January 2019 with a remit for developing the PHS Board and Board Committee structures, processes and products. Della Thomas will shortly start working with the PHR Team for three days a week to assist with the development of this work.
Legislation	- Public Health Reform Team	- N/A	Initial policy instructions and parliamentary handling advice have been drafted, awaiting detailed Scottish Government Legal Department input. The public consultation is expected to be issued imminently.
Corporate services	- Cath Denholm, for Public Health Reform - Billy Murray, Scotland Excel	- Cath Denholm	13 Workstreams have been commissioned. A model for corporate services has been drafted. Workshops are planned for March and April to deal with Day 1 Readiness and Future State of 5 service areas respectively.
Accommodation	- COSLA	- Josephine White	Deliverables 2 and 3 have been submitted and approved at the January Programme Board. Work on requirements for vesting

			day and approach to engagement underway. Scottish Futures Trust will be invited to join the project team.
Data science	- Brendan Faulds, NSS	- TBC	This project has concluded and a report submitted.
IT and digital services	- Andy Robertson, ABR Consultancy	- Monica Renicks - Cath Denholm - Jane Weir	The Project Team has completed a series of technical workshops to provide the detail required for Objective two, “define the immediate IT requirements Public Health Scotland will require in order to deliver its functions on vesting day.” Dedicated project teams have been established to deliver the defined requirements through three work packages. An IT and Digital Governance Group has been established to provide direction on strategic roadmaps and future needs. Stakeholder engagement is ongoing, in order to ensure that PHS’s roadmap aligns with Digital and eHealth Government strategies.
Branding and identity	- Public Health Reform Team	- Jane Weir	Following agreement on the approach from the Programme Board, a design agency has been identified and work to produce a brief is underway. Three or four options will be produced and taken to stakeholders (including staff) to gather views.
Communications and Engagement	- Jill Walker, Scottish Government	- Sharon Hammell - Jane Weir - Claire Dea	The Project Team is making good progress. An audit of assets and policies and procedures is underway and agreement has been given to utilise the same a design agency being used by the branding project to support the development work.

5. Technical Change Processes

- Financial Due Diligence is ongoing. A Finance Group has been established and the Corporate Services Finance & Legal Workstream has also been commissioned. George Dodds is the Design Lead for the Workstream and will liaise closely with the Finance Group.
- It has been confirmed that the auditors KPMG have been appointed to support the financial transition work and detailed work can now get underway.
- An Internal Audit of the governance of Change and Transition has been in progress. The draft report is under review by the Chief Internal Auditor prior to being shared with NHS Health Scotland for comment before being finalised.

Implications

- The Corporate Services Project has highlighted a new risk with regard to due diligence to the Programme Board. The risk concerns the level of detailed finance and resource information still missing, particularly with regard to services required to run the organisation.

6. Staff Engagement and Communications

- The Change Oversight Group (COG) has been relaunched to reflect major focus of COG over the remainder of this year to be on keeping all of our staff involved and engaged in change. This includes opening up COG to any member of staff to attend any meeting to find out what is going on and share views. Also, we have set up a new 'Ask COG' page on the Change Hub so that anyone can feed their questions in anonymously at any time. COG will review these at every meeting and ensure either that they are answered immediately following the meeting or steps taken to determine and communicate the answer.
- We are moving COG meetings from fortnightly to monthly, but also have 'Coffee with.....' sessions in between COG meetings so that there is another opportunity to ask questions or to explore a response that COG has given in more detail. Dates have been set up for the remainder of the year for staff to engage informally with Directors and staffside representatives.

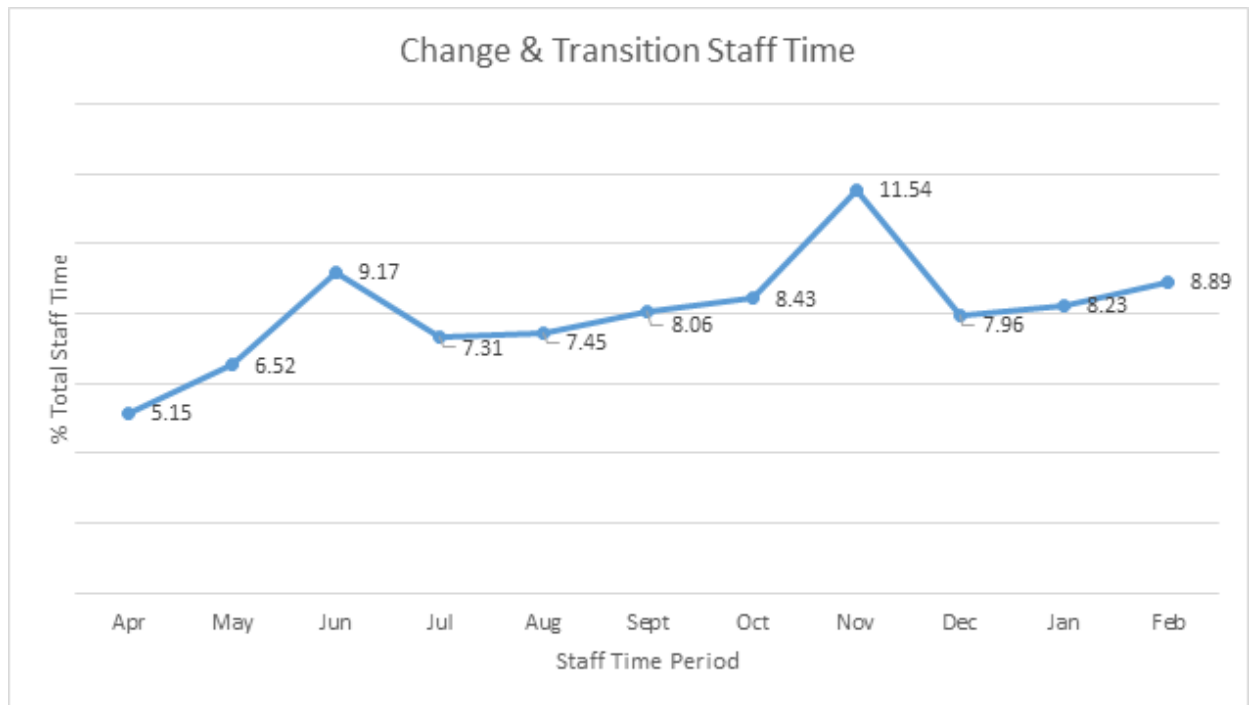
- The draft TOM was shared with on all staff on 18 February, together with a briefing for managers for use at team meetings and a joint video message from Phil Couser and Gerry McLaughlin. Care is being taken around clear messages about how the TOM has been developed and its purpose, and the level of influence staff will have in shaping the final version. The staff information and engagement events referenced earlier in this update will bring staff up to speed with the TOM before the proposed final version is presented to the PHR Programme Board at the end of March. Both events will be led by Gerry McLaughlin and Phil Couser.
- As reported above, the recent leadership sessions for managers have highlighted a call from staff for communications to provide definitive information on aspects such as timelines and how staff will be affected. We have developed a timeline of future milestones which is prominent on the Change Hub and kept updated with the best available information.

Implications

- The stage that we have reached with regard to the TOM, Corporate Services and emerging plans for consultation and staff transfer, means we now require sustained and meaningful engagement with our workforces. As several commissions are finishing and corporate projects are picking up pace, the focus now very much has to be on how information is consolidated and shared with staff and how we now engage staff in how all this information is used to shape and form our future needs.
- Concerns have been raised about the constraint on staff-side from both organisations to be able to field enough representatives for all key meetings.

7. Resourcing Change

- The Corporate Services Project has been boosted with three additional staff, who will be located within the Change Support Team.
- The total anticipated cost of our support to the PHR Team over the next 9 months is being calculated and will be shared with the PHR Team shortly.
- The chart below shows the recorded staff time spent on change and transition as a proportion of the total time recorded.



Elsbeth Molony
Organisational Lead for Communications and Engagement

14 March 2019

Appendix A: Timeline

These are planned delivery dates and are subject to change.

March 2019

- Staff engagement events to be held on the Target Operating Model through March 2019.
- Organisational Development project submits their final report on moving to the desired culture, values and ways of working for Public Health Scotland.
- HR project submits a detailed plan for the delivery of the HR solution for Public Health Scotland to the Public Health Reform Programme Board.
- Accommodation project submits identified options and a detailed implementation plan to the Public Health Reform Programme Board for approval.
- Final Target Operating Model to be submitted to the Public Health Reform Programme Board at the end of March 2019.

April 2019

- Corporate Services project submits identified option to the Public Health Reform Programme Board.

May 2019

- Public Health Scotland is constituted but not yet operational.

June 2019

- Branding project submits options to the Public Health Reform Programme Board.
- Corporate IT project submits a detailed implementation plan for IT provisions to the Public Health Reform Programme Board.
- Corporate Services project submits a final framework document to the Public Health Reform Programme Board.
- Public Health Scotland Chair is appointed.

July 2019

- Branding for Public Health Scotland is agreed.

August 2019

- Public Health Scotland Board is appointed.

September 2019

- Public Health Scotland CEO is appointed.

November 2019

- Corporate Services project implementation complete.

December 2019

- 1 December 2019: Public Health Scotland is vested and fully operational.