

ANNUAL STATEMENT OF ASSURANCE FOR NHS FIFE PUBLIC HEALTH & WELLBEING COMMITTEE 2022/23

1. Purpose

To provide the Board with assurance that NHS Fife is fully engaged in supporting wider population health and wellbeing for the local population, including overseeing the implementation of the population health and wellbeing actions defined in the Board's strategic plans and ensuring effective contribution to population health and wellbeing related activities.

2. Membership

2.1 During the financial year to 31 March 2023, membership of the Public Health & Wellbeing Committee comprised: -

Tricia Marwick	Committee Chair / Chair of the Board
Martin Black	Non-Executive Member (to November 2022)
Christina Cooper	Non-Executive Member (to December 2022)
Rona Laing	Non-Executive Member (to May 2022)
Mansoor Mahmood	Non-Executive Member (from December 2022)
Alistair Morris	Non-Executive Member (from May 2022)
Arlene Wood	Non-Executive Member (from December 2022)
Margo McGurk	Director of Finance & Strategy
Dr Christopher McKenna	Medical Director
Janette Keenan	Director of Nursing
Carol Potter	Chief Executive
Dr Joy Tomlinson	Director of Public Health

2.2 The Committee may invite individuals to attend the Committee meetings for particular agenda items, but the Director of Health & Social Care, Associate Director of Planning & Performance and Board Secretary will normally be in attendance at Committee meetings. Other attendees, deputies and guests are recorded in the individual minutes of each Committee meeting.

3. Meetings

3.1 The Committee met on six occasions during the financial year to 31 March 2023, on the undernoted dates:

- 16 May 2022
- 4 July 2022
- 29 August 2022
- 7 November 2022
- 11 January 2023
- 1 March 2023

3.2 The attendance schedule is attached at Appendix 1.

4. Business

- 4.1 In July 2021, the Board approved a proposal to establish a new Standing governance committee of the Board, the Public Health & Wellbeing Committee. The principle behind its establishment was to give greater focus in the Board governance structure to wellbeing and preventative / proactive care (in line with the Scottish Government's direction of travel) and to consider placement of the public health aspects then within the remit of the Clinical Governance Committee and Finance, Performance & Resources Committee, to allow for enhanced input by the Board. The Committee met for its first meeting in October 2021 and initially focused on developing a detailed remit that was complementary to existing Committee coverage. The new remit was formally approved by the Board in November 2021. The Committee's Terms of Reference has been influenced by Public Health Scotland's areas of focus and the Public Health Priorities for Scotland. It also seeks to bring together into the one committee scrutiny of performance-related measures related to the planning and delivery of delegated services for which the Integration Joint Board sets the overall strategic direction. The Committee also takes the governance lead in oversight of the development of the new Population Health & Wellbeing Strategy and thereafter, once this approved, will focus on its implementation and delivery progress.
- 4.2 A comprehensive review of the Committee's workplan has also taken place, to help define and establish the cycle of business that will be considered by the Committee annually. This has been enhanced during the reporting year, particularly after a parallel review of both Clinical Governance and Finance, Performance & Resources remits and workplans, to limit the potential for any unnecessary duplication of effort and help clarify each committee's responsibilities over agenda items that might be tabled to more than one standing committee, as part of reporting through the governance structure. After completing its first full annual cycle of business during 2022-23, the Committee has settled on a comprehensive workplan to ensure appropriate coverage of business throughout the year. A rolling update on the workplan is presented to each meeting, for members to gain assurance that reports are being delivered on a timely basis and according to the overall schedule. A final version of the workplan for 2023-24 was approved at the Committee's March 2023 meeting.
- 4.3 The most significant work undertaken during the year by the Committee has been its input into the development of the Board's recently approved Population Health & Wellbeing Strategy. In May 2022, the Committee reviewed the plans being created for the follow-up engagement and consultative survey process, delivered by an external facilitator, which has been designed to help capture further public, staff and partner feedback, building on early community and colleague conversations carried out initially in December 2021. Members have fully discussed how participation of external stakeholders can best be enhanced, particularly via active outreach to people within Fife who are most affected by deprivation and communities who find it harder to access services, and through use of the new Healthcare Improvement Scotland Equality Framework for Engagement & Participation. Co-ordination with the Fife Health & Social Care Partnership's own engagement activities, being undertaken in the preparation of their own strategic plan, has taken place, to ensure a joined-up approach. Members have recognised the importance of ensuring the diversity of Fife's population is appropriately reflected and addressed in the organisational strategy. The Committee welcomed the fact that a dedicated Equality Impact Assessment (EQIA) has been drafted to ensure the different needs of our local communities are appropriately captured and secured in the overall strategy development process.
- 4.4 In July 2022, members also considered the outcome of a review led by Public Health of population health needs, the data behind which has informed the key priorities of the new strategy. Members took assurance from the conclusions of a well-attended workshop held with a wide range of colleagues to discuss the review, focusing specifically on NHS Fife's role in creating health and wellbeing and how this could best be captured in the new strategy. In August 2022, further detail was provided to the Committee on the strategy's alignment to the Scottish Government's National Care and Wellbeing Portfolio. At the same meeting, information was reviewed on the whole-system engagement work being progressed

internally, and with partners and external stakeholders, to help secure appropriate input into strategy development. Progress reports on the comprehensive programme of community and staff engagement undertaken to help develop the new Strategy were considered at the Committee's November 2022 meeting, which was aligned with the newly published Quality Framework for Community Engagement & Participation (itself the subject of a briefing paper at the same meeting). Part of this exercise has included a comprehensive review of the previous Clinical Strategy 2016-21, involving a wide range of clinical teams, to measure its actual deliverables and ensure that lessons have been learnt from the delivery of previous plans. The Committee received the full review assessment at its November 2022 meeting, taking assurance from the significant progress made on the delivery of recommendations made in the previous Clinical Strategy and noting the continuation of areas of priority within the drafting of the Population Health & Wellbeing Strategy.

- 4.5 As part of its scrutiny of the Board's overall strategy development process, the Committee has also had input into development and review of the Corporate Objectives for 2022/23, particularly those aspirations focused around the ambition of 'Improving Health & Wellbeing' in Fife. In-year updates on delivery of the 2021/22 Corporate Objectives have been given via substantive agenda items, as detailed further in this report. Assurance has also been given that the Directors' individual objectives not only support the direction of travel detailed within the new Population Health & Wellbeing Strategy, but are also suitably aligned to the four national care programmes. Further reports have been given to the Committee on the Board's progress in developing its Annual Delivery Plan, aided by the annual Strategic Planning & Resource Allocation (SPRA) progress, with a series of regular papers considered over the Committee's meetings held in July, August and November 2022. The Committee took broad assurance from the Board's achievements in meeting the Annual Delivery Plan targets and from the ongoing roll-out of the SPRA methodology in the allocation and prioritisation of resources via routine operational planning. In March 2023, an initial proposal for a suite of Corporate Objectives for 2023/24 were discussed at the Committee, with members' feedback helping shape these further prior to formal approval by the Board later in spring 2023.
- 4.6 Linked to the Committee's specific role in supporting the Board's strategy development, the Committee has also received updates (in May and August 2022 and January 2023) on the Board's progress in developing its Anchor Institution ambitions, linked also to NHS Fife's participation in the national Community Benefit Gateway initiative (an online portal that matches community and voluntary sector organisation 'needs' to NHS suppliers). Ways in which NHS Fife can support its local areas range from procuring products locally to youth employment initiatives for those seeking entry into the workplace. The Committee welcomed the fact that specific deliverables linked to this work will be captured formally in the next iteration of the Directors' Corporate Objectives. The development of a Greenspace Strategy also aims to support the Anchor Institution work, helping define how NHS Fife can use its varied range of physical assets for the benefit of the wider communities we serve. Members have also discussed the Board's role in addressing the Climate Emergency and ensuring that sustainability is at the forefront of our future activities, particularly those related to our estate. This has culminated in the presentation to members of the Annual Climate Emergency & Sustainability Report 2021/22, discussed at the Committee's March 2023 meeting, the priorities of which will be appropriately reflected in the Board's future strategic priorities.
- 4.7 Following detailed discussion at a number of full Board Development Sessions over the reporting year, in March 2023 the Committee considered the most recent update to the Population Health & Wellbeing Strategy document, before a final version was tabled for Board approval at its meeting on 28 March 2023. Strengthening the commitments around addressing health inequalities, in addition to improving the linkages to the Fife Integration Joint Board's strategic priorities for 2023-26, were some of the issues supported by members as the strategy moved towards its final stage of drafting. Following formal Board approval of the new Population Health & Wellbeing Strategy, the Committee expects to have a significant role in the year ahead in helping shape the delivery actions and gaining assurance on progress with the various implementation actions detailed within.

- 4.8 Some programme workstreams to be encompassed within the new strategy are already underway, and the Committee received an update on the Year One activities of the High Risk Pain Medicines Patient Safety Programme in January 2023, taking a high level of assurance from the work undertaken thus far to prevent patient harm, address addiction and tackle linkages to involvement of prescribed medicines in drug deaths. Initial work has been undertaken to gather data, to fully understand the pertinent issues, and the production of a Stage 1 Equality Impact Assessment, to ensure equality issues are appropriately addressed, has been completed. Regular reporting of this programme will continue to the Committee in the year ahead. Related to equality issues, members have also considered the interim progress report on the Board's Equality Outcomes & Mainstreaming Plan for 2021 to 2025, reviewing the mainstreaming activity completed thus far and taking assurance from the progress made in delivering the full ambitions of the Plan.
- 4.9 Through the regular receipt of reports throughout the year, the Committee has gained assurance from the Board's ongoing work on Covid vaccination and testing (including the seasonal flu and Covid vaccine delivery programme for the 2022/23 Winter period). The Committee has gained assurance that planning and a substantive workforce were in place to deal with anticipated demand over the busy Winter season, made more acute with the heightened pressures caused by a seasonal wave of Covid and flu infection, resulting in high levels of activity at the front door. The response of the Board continued to be agile, with local teams working closely with national colleagues to deliver new tranches of the Covid booster and seasonal flu vaccines as these came on-stream. Lessons learned on the prior local implementation of the national scheduling tools have ensured that the appointing of patients for vaccination appointments has progressed smoothly. The Committee welcomed the fact that the Board has exceeded its targets for both Covid and Seasonal Flu vaccination over the 2022/23 winter period. The implementation of the Immunisation Strategic Framework, including therein plans to deliver its key priorities against a robust governance framework, has also been the subject of a detailed report to the Committee. This has helped support learning for the 2023/24 Autumn / Winter Covid and Seasonal Flu vaccine delivery campaign, the early plans for which were considered by members at their meeting in March 2023.
- 4.10 At the meeting in August 2022, members took assurance from the updates provided on the Health Promoting Health Service programme, particularly how this had been influenced by the challenges of the Covid pandemic. At the same meeting, the Committee endorsed the Joint Health Protection Plan for 2022-24, which effectively demonstrated close partnership working between NHS Fife Public Health teams and Fife Council Environmental Health, focused around health protection priorities, provision and preparedness. The Child Poverty Action Plan was also considered by members, prior to further review at the Fife Partnership Board. In March 2023, an assurance report detailing how NHS Fife is fulfilling the requirements of the United Nations Convention on the Rights of the Child treaty was considered by members, noting its importance to a wide range of the Committee's work across the sphere of child health and wellbeing. Further work will be advanced in the next year on areas of development that seek to enhance the Board's ambitions for mainstreaming equality and diversity across its activities.
- 4.11 The Committee has received a series of detailed updates on Child and Adolescent Mental Health Services (CAMHS) performance (including recruitment challenges) and Psychological Therapies (PT) performance against Local Delivery Plan Standards, these reports being each considered in August 2022. For Psychological Therapies, new roles and different roles in relation to supporting workforce pressures and challenges are being brought forward. The focus is also on access to the service, against a background of high demand, and addressing the backlog of the longest waits. Members discussed what support was in place for those waiting for more intensive treatment, to ensure their condition did not worsen in the meantime. Assurance was also given on the Board's ongoing progress to eradicate the waiting list for CAMHS by March 2023. Support has been received from Scottish Government and a number of new posts are being recruited to. Recruitment challenges have a direct impact on meeting waiting list trajectories. Changes to the recruitment of staff, and methods for upskilling the current workforce, will help address the workforce challenges that have impacted upon the

timeliness of treatment for some patients. In January 2023, the Committee received a further update on the performance of both CAMHS and PT, taking assurance from the fact that both services are on track to achieve delivery targets by the stated deadlines. Challenges remain in eradicating the historic backlog of referrals for both services, but members recognised the impact of a series of improvement actions, which combined have helped address the numbers of patients waiting. A deep-dive Development Session is to be scheduled for the Committee in early summer 2023, in order for members to understand the issues in greater detail.

- 4.12 In May 2022, members welcomed plans to establish a new Primary Care Governance & Strategy Oversight Group, to help direct the vision and support for development of a new Primary Care Strategy for Fife. An early focus of the group's work has been on enhancing sustainability and transformation of services, and building upon recent initiatives (such as ScotGEM) to support primary care resilience in the future. The Oversight Group is the mechanism for providing assurance both to Fife NHS Board and the Integration Joint Board, enhancing the whole-system approach to development of Primary Care Services. The Committee has received regular reports and outputs from this group, including a comprehensive update considered by members at the January 2023 meeting, with particular focus on sustainability of GP services and enhanced governance arrangements being implemented to develop long-term plans for services and their estate assets. A tender process for three of the five 2C Board-managed General Practices within Fife was begun in late 2022, and the Committee has considered the actions being undertaken to ensure sustainability of services via the tendering process. In March 2023, the Committee agreed to the target score on the Corporate Risk Register for the Primary Care Services risk being revised upward, to more realistically reflect the risk and the extent to which it can be mitigated locally in the challenging climate being experienced currently.
- 4.13 A comprehensive presentation on Dental Services and Oral Health Improvement work was given to members at the January 2023 meeting. The creation of the new Committee has allowed for greater Board scrutiny of topics such as this, and members found the update particularly useful, particularly in reference to understanding recovery pressures dating from the pandemic backlog and also linkages into overall sustainability issues and resourcing within Primary Care more generally. The Committee has also had opportunity to learn more about the urgent challenge across Scotland in relation to increasing drug and alcohol deaths, with members receiving a paper at their January 2023 meeting in relation to the adoption of Medication Assisted Treatment Standards by the Fife Alcohol & Drug Partnership. This will be an important area of focus for the Committee in the future, given the link to health inequalities and overall preventative health activity in relation to the new Population Health & Wellbeing Strategy.
- 4.14 In relation to capital projects, outline business cases for Kincardine and Lochgelly Health Centres were considered by the Committee in May 2022, focusing on the service models to be delivered in the new centres and its relationship to overall primary care service improvement. Internal plans continue to progress in relation to the development of these innovative two new health centres, despite noting that funding from Scottish Government in support of these business cases will be pushed into the latter half of the decade.
- 4.15 In May 2022 members received an update on the proposed redesign of the Mental Health estate, focused particularly on the early engagement work taking place with stakeholders on plans for improving mental health in-patient facilities across Fife. Via an update report on progress in the delivery of the Mental Health Strategy, considered at the July 2022 meeting, the Committee has gained assurance that the service continues to work towards implementing its main strategic ambitions. A refresh of the Mental Health Strategy for Fife post-Covid has been undertaken, in line with learning post-pandemic and new national requirements, such as suicide prevention and the imminent publication of the national review of mental health. The importance of this work linking with the Mental Health estates-related work has been fully recognised. Further amendments will ensure the Mental Health strategic priorities are fully aligned to the new Fife Health & Social Care Partnership Strategic Plan

and to the new Mental Health Strategy for Scotland. The latter in particular will impact on performance and outcome monitoring, aligned to new national indicators. This will be a focus in the year ahead.

- 4.16 Following a Board-wide review of the Integrated Performance & Quality Report (IPQR), a set of performance-related metrics specific to the Committee has now been established, to allow for appropriate, regular scrutiny of these at each meeting. Further enhancements have also been made to provide information on corporate risks within the IPQR, aligned to the various improvement outcomes. The Committee considered a report on the outcome of the IPQR review process at its July 2022 meeting and supported its recommendations on the enhancement of metrics and targets to be scrutinised by the Public Health & Wellbeing Committee.
- 4.17 Consideration of CAMHS and PT performance (specifically those metrics linked to the waiting list improvement trajectory for both services) has now fully transitioned over to the Committee. Consideration has also been given to identifying a number of other metrics relevant to the Committee's remit, for inclusion in the dedicated Public Health & Wellbeing section of the revised IPQR. There has been opportunity to identify areas which have not previously been reviewed in depth by Board-level committees and include them in the IPQR, such as immunisation (including child vaccination), screening programmes and the self-management of long-term conditions, dependent on the regularity of data reporting.
- 4.18 In addition to the regularity of IPQR performance reporting, the Committee has considered detailed updates on Smoking Cessation & Prevention work and waiting list performance and post-diagnostic support for individuals and families affected by dementia (both reviewed by members at the July 2022 meeting). Stand-alone reports have been presented on the Sexual Health & Blood Borne Viruses Framework and the Board's response to the required actions thereunder. Also, a briefing to the Committee in November 2022, focusing on lessons learned, was delivered in relation to a recent national coding incident impacting on individuals wrongly being offered a Shingles and Pneumococcal vaccination, with members gaining assurance that local adverse events processes have addressed the low-level risks to the small number of patients affected. In January 2023, members reviewed the learning from a Breast Screening Programme adverse event linked to nationally provided equipment, with assurance taken from Fife's local response to the issues raised by this incident.
- 4.19 As Covid activity has generally transitioned into business-as-usual activities for the Board, performance tracking for this area has moved to being situated within the monthly performance reporting within the IPQR, rather than via stand-alone updates to the Committee. Winter performance has also been encapsulated into the regular review of the Board's progress against its Annual Delivery Plan targets, with the Committee taking assurance from that separate stream of performance reporting.
- 4.20 During the year, the Committee has also received subject-specific reports on i) the Director of Public Health's Annual Report 2020/21; ii) the Health Promotion Service Annual Report 2020/21; iii) Immunisation Annual Report 2021; iv) Community Children Services Annual Report; v) Integrated Screening Annual Report 2022; vi) Pharmaceutical Care Services Report 2021/22; and vii) Violence against Women Annual Report 2021-22. Members have welcomed the comprehensive detail provided in each.
- 4.21 Minutes of Committee meetings have been approved by the Committee and presented to Fife NHS Board. The Board also receives a verbal update at each meeting from the Chair, highlighting any key issues discussed by the Committee at its preceding meeting. The Committee maintains a rolling action log to record and manage actions agreed from each meeting, and reviews progress against deadline dates at subsequent meetings. The format of the action log has been enhanced, to provide greater clarity on priority actions and their due dates.

5. Best Value

- 5.1 Since 2013/14 the Board has been required to provide overt assurance on Best Value. A revised Best Value Framework was considered and agreed by the NHS Board in January 2018. Appendix 2 provides evidence of where and when the Committee considered the relevant characteristics during 2022/23.

6. Risk Management

- 6.1 From May 2022, the Public Health & Wellbeing Committee took over scrutiny of the Strategic Planning Board Assurance Framework (BAF) from the Finance, Performance & Resources Committee. Improvement to the risk level has been seen in-year, due to the detailed work undertaken to creating the required structures, engagement activities and governance to support the development of the Board's new Population Health & Wellbeing Strategy and full resourcing of the Corporate Programme Management Office. As part of the move to a refreshed Corporate Risk Register during 2022/23, a new risk has been drafted around the effectiveness of strategy and its delivery, which will be monitored closely by the Committee in the year ahead.
- 6.2 The replacement of the BAF by the Corporate Risk Register has allowed for revision of the key strategic risks reported to the Board, along with presentation improvements to aid clarity of members' understanding. The Committee considered the full set of draft Corporate Strategic Risks at its meeting in August 2022, noting the proposed 18 risks, their mapping against the Board's strategic priorities, and the proposed visual presentation of these in report form. Linkages to the Board's overall risk appetite have been discussed with members, noting that for those individual metrics currently facing a risk profile in excess of the Board's agreed appetite, a degree of tolerance has been agreed, given the scale of external challenges at this time.
- 6.3 In November 2022, members considered in detail the four individual risks aligned to the Public Health & Wellbeing Committee, presented in the new Corporate Risk Register format. It is noted that refinement of these will continue over the coming year, as the new risk presentation beds in. The four risks relate to the likelihood of the new organisational strategy meeting its ambitions; the work required by the Board to reduce health inequalities; implementation of policies aimed at reducing environmental impact and addressing climate change; and delivery of improvements in Primary Care to deliver sustainable, quality services. In addition to the summary presentation of the aligned risks at all meetings since November 2022, members have received deep-dive information on tackling climate change (November 2022) and Health Inequalities (March 2023), with in-depth review of the Primary Care Services corporate risk scheduled for May 2023 (the target score of this risk has been revised upward in March 2023, as detailed further at 4.12). Deep dives allow for greater scrutiny of the root causes of risks and discussion on the effectiveness of management actions in place to reduce risk levels. This area of the new risk management approach is expected to mature in the year ahead, to provide members with the necessary levels of assurance on the effectiveness of mitigating actions.

7. Self-Assessment

- 7.1 The Committee has undertaken a self-assessment of its own effectiveness, utilising a revised questionnaire considered and approved by the Committee Chair. Attendees were also invited to participate in this exercise, which was carried out via an easily accessible online portal. A report summarising the findings of the survey was considered and approved by the Committee at its March 2023 meeting, and action points are being taken forward at both Committee and Board level in the year ahead.

8. Conclusion

- 7.1 As Chair of the Public Health & Wellbeing Committee, I am satisfied that the integrated approach, the frequency of meetings, the breadth of the business undertaken and the range of attendees at meetings of the Committee has allowed us to fulfil our remit as detailed in the Code of Corporate Governance. As a result of the work undertaken during the meetings held through this year, I can confirm that adequate and effective governance arrangements were in place throughout NHS Fife during the year.
- 7.2 I can confirm that that there were no significant control weaknesses or issues at the year-end which the Committee considers should be disclosed in the Governance Statement, as they may have impacted financially or otherwise in the year or thereafter.
- 7.3 I would pay tribute to the dedication and commitment of fellow members of the Committee and to all attendees. I would thank all those members of staff who have prepared reports and attended meetings of the Committee as it has completed its first full year of operation.

Signed: 

Date: 27 March 2023

Tricia Marwick, Chair

On behalf of the Public Health & Wellbeing Committee

Appendix 1 – Attendance Schedule

Appendix 2 – Best Value

**NHS Fife Public Health & Wellbeing Committee Attendance Record
1 April 2022 to 31 March 2023**

	16.05.22	04.07.22	29.08.22	07.11.22	11.01.23	01.03.23
Members						
T Marwick , Non-Executive Member (Chair)	✓	✓	✓	✓	x	✓
M Black , Non-Executive Member	✓	x	✓	✓ Part		
C Cooper , Non-Executive Member	x	✓	✓	x		
R Laing , Non-Executive Member	✓					
M Mahmood , Non-Executive Member				✓ Observing	✓	✓
A Morris , Non-Executive Member		✓	✓	✓	✓	x
A Wood , Non-Executive Member				✓ Observing	✓	✓
W Brown , Employee Director	x	✓	x	x	x	✓
M McGurk , Director of Finance & Strategy	✓	✓	✓	✓	✓	✓
C McKenna , Medical Director	✓	x	✓	✓	✓	✓
J Keenan , Director of Nursing	✓	✓	✓	✓	✓	✓
C Potter , Chief Executive	✓	x	✓	✓	✓	x
J Tomlinson , Director of Public Health (Exec Lead)	✓	✓	✓	✓	✓	✓
In Attendance						
R Bennet , Health Promotion Service Manager	✓ Item 8.2					
N Connor , Director of H&SC	✓	✓	✓	✓	✓	✓
G Couser , Associate Director of Quality & Clinical Governance	✓ Item 5.2					
P Cumming , Risk Manager			✓ Item 7			
B Davis , Head of Primary & Preventative Care	✓ Item 6.7					
S Fraser , Associate Director of Planning & Performance	✓	✓	✓	x	✓	✓
B Hannan , Director of Pharmacy & Medicines				✓	✓	✓
G MacIntosh , Head of Corporate Governance & Board Secretary	✓	✓	✓	✓	✓	✓
N McCormick , Director of Property & Asset Management	✓					✓
E O'Keefe , Consultant in Dental Public Health					✓	

APPENDIX 1

	16.05.22	04.07.22	29.08.22	07.11.22	11.01.23	01.03.23
					Item 7.1 & 7.2	
F Richmond , Executive Officer to the Chief Executive & Board Chair	✓	✓	✓			

BEST VALUE FRAMEWORK

Vision and Leadership

A Best Value organisation will have in place a clear vision and strategic direction for what it will do to contribute to the delivery of improved outcomes for Scotland’s people, making Scotland a better place to live and a more prosperous and successful country. The strategy will display a clear sense of purpose and place and be effectively communicated to all staff and stakeholders. The strategy will show a clear direction of travel and will be led by Senior Staff in an open and inclusive leadership approach, underpinned by clear plans and strategies (aligned to resources) which reflect a commitment to continuous improvement.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
The Board agrees a strategic plan which incorporates the organisation’s vision and values and reflects stated priorities.	Approval of Population Health & Wellbeing Strategy and relating supporting annual processes	BOARD PUBLIC HEALTH & WELLBEING COMMITTEE	Annual	Population Health & Wellbeing Strategy Annual Delivery Plan Corporate Objectives
The strategic plan is translated into annual operational plans with meaningful, achievable actions and outcomes and clear responsibility for action.	Approval of Annual Delivery Plan by SG Strategic Planning & Resource Allocation (SPRA) process	BOARD ALL BOARD COMMITTEES	Annual	Annual Delivery Plan Corporate Objectives

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
The Board has identified the risks to the achievement of its strategic and operational plans are identified together with mitigating controls.	Each strategic risk has an Assurance Framework which maps the mitigating actions/risks to help achieve the strategic and operational plans. The Corporate Risk Register contains the overarching strategic risks related to the strategic plan.	ALL BOARD COMMITTEES BOARD	Bi-monthly Twice per year	Corporate Risk Register

Effective Partnerships

The “Effective Partnerships” theme focuses on how a Best Value organisation engages with partners in order to secure continuous improvement and improved outcomes for communities, not only through its own work but also that of its partners.

A Best Value organisation will show how it, and its partnerships, are displaying effective collaborative leadership in identifying and adapting their service delivery to the challenges that clients and communities face. The organisation will have a clear focus on the collaborative gain which can be achieved through collaborative working and community engagement in order to facilitate the achievement of its strategic objectives and outcomes.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
<p>The Board develop relationships and works in partnership wherever this leads to better service delivery. The organisation seeks to explore and promote opportunities for efficiency savings and service improvements through shared service initiatives with partners.</p>	<p>NHS Fife involvement in strategic planning and engagement with Fife H&SCP</p> <p>NHS Fife key partner in Fife Partnership Board</p>	<p>BOARD</p> <p>PUBLIC HEALTH & WELLBEING COMMITTEE</p>	<p>Ongoing</p>	<p>Population Health & Wellbeing Strategy</p> <p>Reporting of Minutes</p>

Governance and Accountability

The “Governance and Accountability” theme focuses on how a Best Value organisation achieves effective governance arrangements, which help support Executive and Non-Executive leadership decision-making, provide suitable assurances to stakeholders on how all available resources are being used in delivering outcomes and give accessible explanation of the activities of the organisation and the outcomes delivered.

A Best Value organisation will be able to demonstrate structures, policies and leadership behaviours which support the application of good standards of governance and accountability in how the organisation is improving efficiency, focusing on priorities and achieving value for money in delivering its outcomes. These good standards will be reflected in clear roles, responsibilities and relationships within the organisation. Good governance arrangements will provide the supporting framework for the overall delivery of Best Value and will ensure open-ness and transparency. Public reporting should show the impact of the organisation’s activities, with clear links between the activities and what outcomes are being delivered to customers and stakeholders. Good governance provides an assurance that the organisation has a suitable focus on continuous improvement and quality. Outwith the organisation, good governance will show itself through an organisational commitment to public performance reporting about the quality of activities being delivered and commitments for future delivery.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
Board and Committee decision-making processes are open and transparent.	Board meetings are held in open session and minutes are publicly available. Committee papers and minutes are publicly available	BOARD ALL BOARD COMMITTEES	Ongoing	Standing Orders / Code of Corporate Governance NHS Fife website
Board and Committee decision-making processes are based on evidence that can show clear links between activities and outcomes	Reports for decision to be considered by Board and Committees should clearly describe the evidence underpinning the proposed decision.	BOARD ALL BOARD COMMITTEES	Ongoing	SBAR reports EQIA section on all reports

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
NHS Fife conducts rigorous review and option appraisal processes of any developments.	Strategic plans and appropriate business cases are developed and scrutinised appropriately.	BOARD PUBLIC HEALTH & WELLBEING COMMITTEE	Ongoing	Business Cases for capital projects Strategy Development

Performance Management

The “Performance Management” theme focuses on how a Best Value organisation embeds a culture and supporting processes which ensures that it has a clear and accurate understanding of how all parts of the organisation are performing and that, based on this knowledge, it takes action that leads to demonstrable continuous improvement in performance and outcomes.

A Best Value organisation will ensure that robust arrangements are in place to monitor the achievement of outcomes (possibly delivered across multiple partnerships) as well as reporting on specific activities and projects. It will use intelligence to make open and transparent decisions within a culture which is action and improvement oriented and manages risk. The organisation will provide a clear line of sight from individual actions through to the National Outcomes and the National Performance Framework. The measures used to manage and report on performance will also enable the organisation to provide assurances on quality and link this to continuous improvement and the delivery of efficient and effective outcomes.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
<p>Performance is systematically measured across all key areas of activity and associated reporting provides an understanding of whether the organisation is on track to achieve its short and long-term strategic, operational and quality objectives</p>	<p>Integrated Performance & Quality Report encompassing all aspects of operational performance, Annual Delivery Plan targets / measures, and committee-specific metrics.</p> <p>The Board delegates to Committees the detailed scrutiny of performance.</p> <p>The Board receives full Integrated Performance & Quality Report and notification of any issues for escalation from the Committees.</p>	<p>ALL BOARD COMMITTEES</p> <p>BOARD</p>	<p>Every meeting</p>	<p>Integrated Performance & Quality Report</p> <p>Code of Corporate Governance</p> <p>Minutes of Committees</p>

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
The Board and its Committees approve the format and content of the performance reports they receive	The Board / Committees review the Integrated Performance & Quality Report and agree the measures.	ALL BOARD COMMITTEES BOARD PUBLIC HEALTH & WELLBEING COMMITTEE	Every meeting Monthly Annual	Integrated Performance & Quality Report Outcome of IPQR review process
Reports are honest and balanced and subject to proportionate and appropriate scrutiny and challenge from the Board and its Committees.	Committee Minutes show scrutiny and challenge when performance is poor as well as good, with escalation of issues to the Board as required.	ALL BOARD COMMITTEES BOARD	Every meeting	Integrated Performance & Quality Report Minutes of Committees
The Board has received assurance on the accuracy of data used for performance monitoring.	Performance reporting information uses validated data.	ALL BOARD COMMITTEES BOARD	Every meeting Annual	Integrated Performance & Quality Report Annual Accounts process, including External Audit report
NHS Fife's performance management system is effective in addressing areas of underperformance, identifying the scope for improvement, agreeing remedial action, sharing good practice and monitoring implementation.	Encompassed within the Integrated Performance & Quality Report	COMMITTEES ALL BOARD COMMITTEES	Every meeting	Integrated Performance & Quality Report Minutes of Committees

Cross-Cutting Theme – Sustainability

The “Sustainability” theme is one of the two cross-cutting themes and focuses on how a Best Value organisation has embedded a sustainable development focus in its work.

The goal of Sustainable Development is to enable all people throughout the world to satisfy their basic needs and enjoy a better quality of life without compromising the quality of life of future generations. Sustainability is integral to an overall Best Value approach and an obligation to act in a way which it considers is most sustainable is one of the three public bodies’ duties set out in section 44 of the Climate Change (Scotland) Act 2009. The duty to act sustainably placed upon Public Bodies by the Climate Change Act will require Public Bodies to routinely balance their decisions and consider the wide range of impacts of their actions, beyond reduction of greenhouse gas emissions and over both the short and the long term.

The concept of sustainability is one which is still evolving. However, five broad principles of sustainability have been identified as:

- promoting good governance;
- living within environmental limits;
- achieving a sustainable economy;
- ensuring a stronger healthier society; and
- using sound science responsibly.

Individual Public Bodies may wish to consider comparisons within the wider public sector, rather than within their usual public sector “family”. This will assist them in getting an accurate gauge of their true scale and level of influence, as well as a more accurate assessment of the potential impact of any decisions they choose to make.

A Best Value organisation will demonstrate an effective use of resources in the short-term and an informed prioritisation of the use of resources in the longer-term in order to bring about sustainable development. Public bodies should also prepare for future changes as a result of emissions that have already taken place. Public Bodies will need to ensure that they are resilient enough to continue to deliver the public services on which we all rely.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
NHS Fife can demonstrate that it respects the limits of the planet’s environment, resources and biodiversity in order to improve the environment and ensure that the natural resources	Climate Sustainability reporting incorporated in Committee’s workplan and one of the Committee’s relevant risks assigned to it for review.	PUBLIC HEALTH & WELLBEING COMMITTEE	Annual Bi-monthly	Annual Climate Emergency & Sustainability Report Specific risk indicator in Corporate Risk Register

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
needed for life are unimpaired and remain so for future generations.				

Cross-Cutting Theme – Equality

The “Equality” theme is one of the two cross-cutting themes and focuses on how a Best Value organisation has embedded an equalities focus which will secure continuous improvement in delivering equality.

Equality is integral to all our work as demonstrated by its positioning as a cross-cutting theme. Public Bodies have a range of legal duties and responsibilities with regard to equality. A Best Value organisation will demonstrate that consideration of equality issues is embedded in its vision and strategic direction and throughout all of its work.

The equality impact of policies and practices delivered through partnerships should always be considered. A focus on setting equality outcomes at the individual Public Body level will also encourage equality to be considered at the partnership level.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE:
NHS Fife meets the requirements of equality legislation.	Evidenced via formal reporting to the Board on compliance.	BOARD ALL BOARD COMMITTEES	Ongoing	EQIA section on all reports Annual Report on Equality Outcomes & Mainstreaming Plan
The Board and senior managers understand the diversity of their customers and stakeholders.	Equality Impact Assessments are reported to the Board and Committees as required and identify the diverse range of stakeholders.	BOARD ALL BOARD COMMITTEES	Ongoing	EQIA section on all reports Specific clinical programmes are supported by dedicated EQIAs (i.e. immunisation, High Risk Pain Medicines)

APPENDIX 2

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE:
<p>NHS Fife’s policies, functions and service planning overtly consider the different current and future needs and access requirements of groups within the community.</p>	<p>In accordance with the Equality and Impact Assessment Policy, Impact Assessments consider the current and future needs and access requirements of the groups within the community.</p>	<p>BOARD ALL BOARD COMMITTEES</p>	<p>Ongoing</p>	<p>Population Health & Wellbeing Strategy and related EQIA</p> <p>Focus of Committee on health inequalities more generally</p>
<p>Wherever relevant, NHS Fife collects information and data on the impact of policies, services and functions on different equality groups to help inform future decisions.</p>	<p>In accordance with the Equality and Impact Assessment Policy, Impact Assessments collect this information to inform future decisions.</p>	<p>BOARD ALL BOARD COMMITTEES</p>	<p>Ongoing</p>	<p>Annual progress reporting on equality issues</p> <p>Evaluation of programme outcomes against EQIA priorities</p>