

ANNUAL STATEMENT OF ASSURANCE FOR THE PUBLIC HEALTH & WELLBEING COMMITTEE 2024/25

1. Purpose

- 1.1 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 2025, membership of the Public Health & Wellbeing Committee comprised: -

John Kemp	Committee Chair (from July 2024) / Non-Executive Member
Pat Kilpatrick	Committee Chair (to July 2024) / Board Chair
Jo Bennett	Non-Executive Member (from September 2024)
Alistair Morris	Non-Executive Member
Arlene Wood	Non-Executive Member
Lynne Parsons	Employee Director
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 Communications & Engagement, Director of Health & Social Care, Director of Pharmacy & Medicines, Director of Property & Asset Management, Director of Reform & Transformation, 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.
- 2.3 The Committee has consciously encouraged attendance and contribution into agenda items from a number of staff, to widen staff insight into the work of the Committee and also to ensure that the Committee is seen to welcome input from a broad range of contributors.

3. Meetings

- 3.1 The Committee met on seven occasions during the financial year to 31 March 2025, on the undernoted dates:
- 13 May 2024
 - 1 July 2024
 - 9 September 2024
 - 18 October 2024 (Development Session)
 - 11 November 2024
 - 13 January 2025
 - 3 March 2025

3.2 The attendance schedule is attached at Appendix 1.

4. Business

4.1 The Public Health & Wellbeing Committee was established by the Board in October 2021 and the areas of focus of the group's remit and annual workplan has now matured, ensuring the Committee is making appropriate impact and exercising scrutiny across a range of measures and services aligned to the Board's public health responsibilities, inequalities work and preventative strategies, as detailed in this report.

4.2 The Committee has the lead responsibility for review of activity linked to the Board's Population Health & Wellbeing Strategy, approved in March 2023. The Committee has had earlier input to plans created to help capture public, staff and partner feedback on strategy content, particularly via active outreach to people within Fife who are most affected by deprivation and communities who find it harder to access services. The importance of ensuring the diversity of Fife's population is appropriately reflected and addressed in the delivery of the organisational strategy remains a focus, as members' roles have changed from development of strategic priorities to scrutinising the progress of implementation. In May 2024, the Committee considered the first annual report detailing the work taken forward in the first year of the implementation of the strategy. Building on the mid-year report reviewed by members in January 2024, the annual report included a summary of key metrics that have been monitored, benchmarking local performance against national indicators, and a progress update against the key actions outlined in the strategy. Updates have been structured around the 'what we will do' statements outlined in the strategy, as aligned to the four overall strategic priorities. Two case studies have been included, which show how services are being redesigned in practice. The first described the impact of the Rapid Cancer Diagnostic Service in enhancing patient pathways. The second outlined how admissions to hospital for the frailest patients have been reduced through collaborative working across the admissions team and the Hospital at Home Service. Members suggested a number of enhancements to the draft report, before it was endorsed for subsequent Board approval. An additional mid-year update was considered in November 2024, where examples of service improvement were celebrated by members. A moderate level of assurance was taken from the impact thus far of the strategy described in the report, noting the challenges in measuring outcomes in a way that is consistent with other performance reporting at the Committee and the Board.

4.3 Also in May 2024, members considered a draft Public Participation & Community Engagement Strategy 2024/28, outlining the Board's strategic approach to engagement in line with the ambitions within the Population Health & Wellbeing Strategy. Agreeing with the principles of the initial draft, members agreed that further work was required to enhance operational and delivery detail, particularly to make the document more specific to the Health Board's area and to recognise the priorities of a range of community-focused services and Fife Health & Social Care Partnership's ambitions. An amended document has subsequently secured Board approval.

4.4 Related to the Committee's specific role in supporting the Board's strategy implementation, the Committee has also received updates (in May and November 2024) on the Board's progress in developing its Anchor Institution ambitions (this supporting strategy has a lifespan in line with the organisational strategy). After approval of the Anchor Strategic Plan in early 2024, further guidance has been received from Scottish Government in relation to the metrics to be used to establish a baseline for all Health Boards to measure their progress in implementing the plans. Baseline metrics covering the areas of Workforce, Procurement and environmental sustainability were considered by the Committee in May 2024, with the report detailing narrative on all three areas and work therein by the Anchor Operational Group. The Anchor Operational Group has started making links to bring in corporate and civic dimensions, such as volunteering and enhancing links with veterans' charities and organisations. In November 2024, members heard of the positive feedback from Scottish Government on progress in Fife, after a benchmarking exercise had been carried out. Work to enhance activities around the area of employability, following the feedback, were in the

process of being progressed, building on the early experience of young people who had undertaken the EMERGE placements with NHS Fife. In March 2025, the Committee considered a report on performance against the key Anchor metrics, with detail on a number of successful initiatives undertaken by colleagues in recruitment / employability, procurement and estates, evidencing a number of new working relationships with local partners, communities and stakeholders. Opportunities for future work with the Private sector has been highlighted, and members took a moderate level of assurance from report, noting the positive improvement for the majority of the indicators.

- 4.5 The Board's Re-form, Transform, Perform (RTP) portfolio of work introduced in 2024/25 aims to make the changes needed to maintain patient safety and quality of care, in line with the Board's values, whilst managing the current financial challenges. In May 2024, the Committee received an update on the 13 planned schemes and the measures in place to ensure that due cognisance has been taken of the need to address inequalities and ensure public health measures are protected. The framework is also in support of a direction from Scottish Government on reforming services and the way the NHS works, as detailed further in a briefing paper to the July 2024 Committee meeting.
- 4.6 The draft Corporate Objectives 2024/25 were presented to the Committee in July 2024. The objectives as a whole describe what NHS Fife aims to achieve in-year, and are linked also to the Chief Executive's own objectives and those of each Executive Director. Assurance was provided that there was appropriate linkage to the Board's Population Health & Wellbeing Strategy and to the Health & Social Care Partnership's strategic priorities, in addition to the current Re-form, Transform, Perform portfolio programme. Each Board Committee has had a role in reviewing the objective from their own specific perspective, though challenges in linking the 'Improve Health & Wellbeing' high-level corporate objectives to the Committee's areas of focus were highlighted. The objectives are framed under the four key strategic priorities of the Board, as aligned to national programmes, and reference the strategy delivery work undertaken in this reporting year. Following review, the Committee were pleased to endorse the Corporate Objectives for onward submission to the Board for formal approval.
- 4.7 Members have also discussed the Board's role in addressing the global Climate Emergency and ensuring that sustainability is at the forefront of NHS Fife's future activities, particularly those related to our estate and physical assets. In November 2024, an update report on sustainability and Greenspace activities was considered by members, noting that two new Sustainability Officer roles had recently been created to ensure pace of delivery. Work has moved to identifying areas of collaboration across teams, to identify wider challenges and opportunities in the sustainability agenda outwith the core Estates portfolio. Funding challenges around decarbonisation have impacted progress, which remains an area of importance going forward. The presentation to members of the Annual Climate Emergency & Sustainability Report 2023/24, discussed at the Committee's January 2025 meeting, highlighted key data around reduction in usage of polluting gases and energy. Members noted the work underway to reduce greenhouse gas emissions, waste and building energy use, with challenges ahead in meeting the more challenging targets coming into force in 2030.
- 4.8 The Committee has had input into the Board's Annual Delivery Plan for 2024/25, which has been aligned to the strategic priorities within the Board's Population Health & Wellbeing Strategy and Re-form, Transform, Perform portfolio, whilst also addressing the specific requirements of the Scottish Government guidance. In May 2024, the Committee considered a draft submission, noting the importance of linkages to local strategic priorities. Feedback from Scottish Government was considered at the Committee's July 2024 meeting, where it was also noted that there was a limited level of assurance about delivery of all actions due to the continuing challenging financial situation. National pressures overall on Child & Adolescent Mental Health services were also highlighted, including work with schools and third-sector partners to offer support to those on the lower levels of the waiting lists. Review of the last quarter's work in relation to the previous year's plan was considered also in July 2024, with focus on those prevention and early intervention actions that had fallen behind

schedule or were not expected to be delivered. Moderate assurance was taken from the fact that outstanding actions would be carried forward, with appropriate ongoing reflection in the Committee's performance and risk reports. In September 2024, the Committee took assurance from the fact that the Scottish Government's review process had concluded, feedback had been submitted and the Plan had been formally approved. A performance report on the delivery of the various Quarter 1 improvement actions was considered at the Committee's September meeting. Of the eight actions marked as red (unlikely to complete on time or to meet the intended target), one fell within the remit of the Public Health & Wellbeing Committee. This was related to increasing local capacity for providing in-hours routine and urgent dental care. The Quarter 2 update was considered at the November 2024 meeting, noting that seven actions had fallen behind their target delivery at the point of reporting, but the Committee took assurance from the fact that risks from non-delivery of these programmes of work would be captured in local risk registers and escalated to the Committee as appropriate. At the point of reporting, challenges were being experienced with releasing nursing capacity to encourage uptake of vaccinations. Capacity issues in general dental services, and difficulties in progressing the children's speech, language and communications development plan, were discussed by members. The challenges in prioritising the large number of deliverables within the ADP was also recognised, noting the linkages to triangulating this report with other performance reporting metrics. The Quarter 3 report received scrutiny at the Committee's March 2025 meeting, with a number of suggestions made to aid clarity around the measurement of deliverables as the next year's plan was in the process of being finalised.

- 4.9 In July 2024, members considered briefing updates in relation to community planning, setting out progress in delivery of the ten-year Plan for Fife (the life cycle of which covers 2017 to 2027). Building on the last review undertaken in 2021, the latest review has focused on the three priorities of economic recovery, tackling poverty and addressing the climate emergency. There has also been consideration given to exploring further how to embed an approach to health equity through adoption of the Marmot Place principles, which has been supported across partners. At the same meeting, members also reviewed the Food4Fife Strategy and Action Plan 2024/29, which is a complementary strategy to the Plan For Fife and also highlights the benefit of collaborative working. In response to the Good Food Nation (Scotland) Act 2022, there has been a requirement for public bodies to create plans to address food poverty. The Food4Fife Strategy addresses this requirement and members were pleased to take significant assurance from the work done to create the strategy, noting that delivery will be followed up via a separate implementation plan.
- 4.10 In July 2024, the Committee took a significant level of assurance from the Fife Suicide Prevention Action Plan, in support of the national strategy 'Creating Hope Together'. Oversight of the plan's implementation will be undertaken as part of the Mental Health Strategy delivery assessment process, on a whole-system basis. Noting the efforts of the Health Promotion Team, who have led on this work locally, members recognised the importance of the plan and the need to ensure successful completion of the actions within. Members also noted the intention to ensure the suicide prevention workstream will continue to be strategically located within the new Mental Health strategy, as part of Prevention and Early Intervention workstreams and the requirement to deliver a local 30-point action plan to meet the national suicide prevention strategic requirements.
- 4.11 In November 2024, the Committee took assurance from a briefing outlining the delivery activities of 'The Promise' national strategy. The Promise represents the outcomes of the Independent Care Review into looked after young people's experiences in Scotland, advising what organisations such as Health Boards need to do to ensure they fulfil their roles as corporate parents and provide the best experiences possible for those children and young people who are now - or have been - looked after at some point in their lives. A comprehensive overview of the work being delivered across NHS Fife and the Health & Social Care Partnership was detailed, giving members a moderate level of assurance around Fife's compliance with the nationally-led work. The Committee were advised it is anticipated an updated progress framework will be published by Scottish Government in future. Further

enhancements are needed with regards to strengthening the governance and assurance processes across the wider NHS Fife / Fife Integration Joint Board reporting structures for this area, to improve regular reporting and escalations, hence the moderate assurance level agreed by members.

- 4.12 In May 2024, members considered the Fife Alcohol & Drug Partnership Strategy 2024/27, which has been developed by colleagues in Fife Health & Social Care Partnership. The Committee noted that the redevelopment of the Alcohol & Drug Partnership Strategy is aligned to other local strategies, including the Health & Social Care Strategic Plan, NHS Fife's Population Health & Wellbeing Strategy and The Plan for Fife. An overview of priorities was considered by the Committee. Future reporting to the Committee will focus on delivery progress against targets. Also in May 2024, a complementary report was considered on progress made in implementing the Medication Assisted Training (MAT) Standards. These cover areas such as same-day prescribing, medication choice, harm reduction and psychological interventions, and a trauma-informed approach, with improvements seen across all these targets. As such, the Committee was able to take assurance on the delivery impact of these as part of the Alcohol & Drug Partnership's strategic aims. In September 2024, a further update was given to members, covering the annual report of the service and a survey detailing activity progressed against national priorities. In January 2025, a further update on the delivery progress with the Alcohol & Drug Partnership Strategy 2024/25 and compliance with the MAT Standards, was considered, with discussion focusing on the broader linkages to work to address health inequalities and what further actions can be taken to tackle deprivation and poverty through Anchor Institution activities. These updates, in addition to a Board members' visit to meet staff and clients of Addiction Services in February 2025, have helped inform members about the important work being undertaken in this area and the significance to improving population health.
- 4.13 In September 2024, the annual report and action plan of the Tackling Poverty and Preventing Crisis Board was tabled. This report incorporates the legal requirement to report on Child Poverty on an annual basis. The Tackling Poverty and Preventing Crisis Board leads and manages the delivery of the actions within Plan For Fife that address tackling poverty and it is part of Fife Partnership. The report presented all the activities taking place across Fife in relation to reducing poverty, which remains challenging due to external factors such as the ongoing cost of living crisis. Members took a moderate level of assurance from the activities described therein, recognising that 23.6% of children in Fife are presently living in relative poverty, slightly above the national level of 21.3%, and that ongoing work and effort is required to continue to mitigate the impact on the health and wellbeing of young people in the Kingdom. In September 2024, the Committee received an update on the development of the Prevention & Early Intervention Strategy, which has been approved by the Fife Integration Joint Board in the reporting year. A comprehensive outline of the activities undertaken in development of the strategy, across all life stages, from pre-conception / pregnancy to older adults, was discussed with members, in addition to the conclusions of 'discovery and design' engagement with communities and stakeholders. As one of the nine key enabling strategies of the Health & Social Care Partnership, the criticality of the strategic ambitions within to the Board's own Population Health & Wellbeing Strategy has been recognised by the Committee. Members welcomed the reach of the document, noting the high-level delivery plan and the future annual reporting to the Committee on progress in implementing the various actions.
- 4.14 As one of the workstreams within the Population Health & Wellbeing Strategy, the Committee received an update on the End of Year Two activities of the High Risk Pain Medicines Patient Safety Programme in September 2024, taking a high level of assurance from the work undertaken since 2022 to prevent patient harm, address addiction and tackle linkages to involvement of prescribed medicines in drug deaths. When the programme commenced, NHS Fife had higher rates of prescribing of these medicines compared to other health boards, as measured by National Therapeutic Indicators, as well as a higher-than-average involvement of prescribed medicines in drug-related deaths. A successful conclusion to the programme was reported, noting that the initiative has completed a year ahead of schedule, with the bulk of activity now transitioning to business-as-usual operations with regular

monitoring via a new Patient Safety Group, to manage the ongoing operational risk in this area. Years 1 and 2 of the programme were delivered on time and within budget, with early programme benefits recognised. Members commended the achievements of the dedicated programme, noting that work will continue to ensure prescribing of these medicines in Fife meets the national average baseline.

- 4.15 The Committee received a number of detailed updates on Child & Adolescent Mental Health Services (CAMHS) performance (particularly focused on addressing a backlog of demand and longest waits, impacted by various recruitment challenges) and Psychological Therapies (PT) performance against Local Delivery Plan Standards, these reports being each considered both in the format of regular IPQR reviews and in discussion relating to specific papers. . In May 2024, update papers were considered for both services, noting the work underway to meet 18-week referral to treatment targets, actions to address those waiting the longest and mitigating factors, in addition to the PT indicators set out in the Annual Delivery Plan. Both services have seen improvements in performance throughout the year, and the Committee were appreciative of staff efforts to tackle the backlog of referrals. In November 2024, the Committee received a standalone update on the performance of both CAMHS and PT, to complement the routine IPQR data. For Psychological Therapies, as detailed in a paper to the Committee in January 2025, an Improvement Plan has been created, leveraging enhanced support from the Scottish Government's Mental Health Directorate (in place from August 2024). Regular monthly meetings, service re-modelling and the use of various national tools have been beneficial in improving performance indicators. Both the Waiting Times RTT and reduction in waits over 52 weeks have seen improvement, despite increasing demand for PT. The Committee noted the Psychology Service faces challenges in achieving sustained improvement and they discussed the impacts on capacity due to challenges in recruitment of staff. Members noted that the service continues to try to mitigate the challenges in relation to performance on the RTT target in numerous ways and that plans for redesign are under consideration. The Committee took a limited level of assurance from the plan due to the stated recruitment challenges.
- 4.16 A comprehensive briefing on Dental Services and Oral Health Improvement work was given to members at the January 2025 meeting. 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, especially workforce capacity and access issues impacting dental services in Fife. The report covered the challenges resulting from reduced activity levels within independent dental practices, impacting on the workload of the public dental service, with the reduction in access also contributing to the high level of untreated decay in children within Fife. A number of such issues were highlighted, particularly in Primary Care general dental services, but the briefing provided a moderate level of assurance that NHS Fife is following due process within the limited powers available, as determined by the NHS (General Dental Services) Scotland Regulations 2010.
- 4.17 The Committee held a dedicated Development Session in October 2024, allowing members to gain a greater understanding of key topics within the Committee's remit and to receive detailed briefings from clinicians and service leads from a variety of teams. The subject of the October session was oral health improvement, providing both the national and local context and areas of success and challenge within dental services in Fife. Discussion focused on improving child health dental outcomes, outreach to marginalised groups, and challenges in managing demand for both the emergency and public dental services. This session picked up on common themes covered more broadly within the Committee's overall remit and workplan and allowed for greater scrutiny and discussion by members than normal agenda-driven committee meetings can permit in the time allowed.
- 4.18 A set of performance-related metrics specific to the Committee are published in the monthly Integrated Performance & Quality Report (IPQR), to allow for appropriate, regular scrutiny of these at each meeting. Enhancements have also been made to provide information on corporate risks within the IPQR, aligned to the various improvement outcomes, to enhance

linkages between risk and performance. Consideration of CAMHS and PT performance (specifically those metrics linked to the waiting list improvement trajectory for both services) sit within the Committee's remit. Since the Committee's establishment, work has been ongoing in identifying a number of other metrics relevant to the Committee's remit, for inclusion in the dedicated Public Health & Wellbeing section of the IPQR. These include areas such as immunisation (including child vaccination and seasonal vaccination performance), screening programmes and the self-management of long-term conditions, dependent on the regularity of data reporting. There have been some challenges in the reporting of some metrics (such as smoking cessation), which have been impacted by a lag in the publication of national data. A lack of up-to-date information has been countered by standalone reporting, such as via annual reports on subjects such as smoking cessation and a deep-dive on performance in this area at the November 2024 meeting (the latter highlighting challenges in the prevalence of vaping in a non-cessation context, particularly amongst young people). In September 2024, members considered a stand-alone report on the further development of public health-related indicators for the IPQR, noting the challenges in the availability of up-to-date and timely data for some national screening metrics. Additional performance data on breast, bowel and AAA screening has been added during the reporting year (augmented by an annual public screening report in November 2024), with consideration as to the inclusion of cervical screening. A number of new mental health quality indicators, covering instances of ligature, self-harm and restraint, have been included in the IPQR, with regular scrutiny via the Clinical Governance Committee as part of the quality and safety aspects of their remit. The routes of reporting remain under review at the time of writing, as a wholesale evaluation of performance reporting to the Board is undertaken.

- 4.19 In November 2024, members reviewed the learning from the second-stage of a national investigation into the incorrect exclusion of some women from routine cervical screening in Scotland (background details of which are available in last year's report), with significant assurance taken from Fife's local response to the issues raised by this incident and the audit work completed, noting the fact that no harm to patients had been identified. Feedback has been provided to the national team from local boards on the investigation process and the Committee looks forward to sight of the national audit report in due course, following its anticipated publication later in 2025.
- 4.20 As Covid activity has transitioned into business-as-usual activities for the Board, performance tracking for immunisation continues to be reviewed via the monthly performance reporting within the IPQR, rather than via stand-alone updates to the Committee. Members, however, did receive an update paper in May 2024 on the Spring Booster campaign, noting the information provided on plans to actively focus on health inequalities to address any barriers for individuals that might negatively affect uptake. In July 2024, members considered the Immunisation Annual Report 2024 and review of a refreshed Immunisation Strategic Framework for 2024/27, taking account of workforce and funding pressures and activities to ensure strong levels of uptake amongst targeted groups. General 'Winter' performance has also been encapsulated into the regular review of the Board's progress against its Annual Delivery Plan and IPQR targets, with the Committee taking assurance from that separate stream of performance reporting. In March 2025, members considered a briefing on the delivery of the Winter Covid / Flu vaccination programme, and members were pleased to take a significant level of assurance, reflecting the fact that vaccine uptake had exceeded the patient targets set by the Chief Medical Officer. However, staff uptake had declined, in common with the trend across Scotland and members supported the plan to undertake a lesson learned exercise to reflect on this aspect of the programme.
- 4.21 In January 2025, a briefing was received on Post Diagnostic Support for individuals diagnosed with dementia, outlining the 12-months of ongoing specialist provision made available to patients and their families. The enduring impact of suspending the service during the Covid pandemic has meant that waiting lists for the service have grown whilst the service remobilised to full capacity. There has also been learning that delivery of support via telephone or virtual means (such as Teams) is not suitable for all individuals. Noting the importance of support being offered to those affected by a dementia diagnosis, members

recognised the challenges in recruitment and resource within the mental health team to provide the two models of care. The Committee was able to take a moderate level of assurance from the utilisation of the available funding from the Scottish Government and the work continuing to reduce the waiting time for support.

- 4.22 In March 2025, the Committee received a report detailing progress in delivery of the Equality Outcomes Plan 2021/2025. Boards have a legal duty under the Equality Act to develop and publish equality outcomes at least every four years, with a progress report after two years, with reports being central to showing how NHS Fife is meeting its statutory duties. The Interim Equality Outcomes Plan 2025/29 set out the next phase of priorities for promoting equality and embedding inclusive practices across the organisation, building on previous learning, with a sharper focus on measurable actions and accountability. Members noted that these new equality outcomes have been aligned with key national priorities such as the Anti Racism Directive. An overview was provided on the outcomes. The Plan was deliberately interim to allow a review and refresh up to the Autumn to reflect any further learning considerations and members noted the final version would be submitted through the Public Health & Wellbeing and Staff Governance Committees and the Board in Autumn 2025.
- 4.23 The Committee has received updates in private session on both the ongoing Scottish and UK Covid Inquiries and the Crown investigation that is reviewing Covid-related deaths in care homes. The ask of Health Boards has been explained and assurance has been taken from the NHS Scotland approach and the support available to Boards from the Central Legal Office, whilst the preliminary inquiries have been underway. As detailed to the Committee's private session in September 2024, the Module One report of the UK Inquiry has been published, focussed on resilience and preparedness, and ten recommendations have been made. Health inequalities has been a key focus of the UK Covid Inquiry thus far, and it is anticipated this will continue to be a point of emphasis in the ongoing hearings. The opportunity for learning from each of the Inquiries' conclusions has been welcomed by the Committee, particularly in enhancing future pandemic planning and the new corporate-level risk in this area. A further update was considered by members in March 2025, noting the completion of hearings for Modules Three and Four of the UK Inquiry and preparations for the next round of hearings are underway. There still remains some uncertainty about the scope of information requests that might be made of the Board, and thus a moderate level of assurance was taken from the work to support the various inquiries thus far.
- 4.24 After initial consideration by the Board's Audit & Risk Committee, in July 2024 the Committee considered the findings of the annual Internal Audit report, with particular reference to the sections considering strategy development and implementation and the focus on public health measures. Progress and improvements in this area were warmly welcomed by members, noting the largely positive opinion of the Chief Internal Auditor on the Board's internal control framework, including those controls around corporate governance and management of risk. Members were supportive of future reports containing a specific Public Health & Wellbeing Committee section, to bring this in line with the Board's other standing committees. The Committee also had sight of the Internal Control Evaluation report from Internal Audit, providing information on the mid-year position, at their January 2025 meeting. The report contained a full review of all areas of governance, including planning and risk, and sought to provide early warning of any issues that might impact the Board's governance statement and would need to be addressed by year-end. Members welcomed the plan to undertake an audit in the forthcoming year of governance arrangements for population health and wellbeing and implementation of the organisational strategy.
- 4.25 During the year, the Committee has also received subject-specific reports on i) preparations for statutory compliance with the UN Convention on the Rights of the Child (Implementation) (Scotland) Act 2024; ii) the Director of Public Health's Annual Report 2024 (which was focused on the topics of healthy diet and physical activity); iii) Fife Child Protection Annual Report 2023/24; iv) Joint Health Protection Plan (with Fife Council); v) Immunisation Annual Report 2024 and review of a refreshed Immunisation Strategic Framework for 2024/27; vi) the Alcohol & Drugs Partnership Annual Report 2023/24; vii) Tackling Poverty & Preventing

Crisis Annual Report 2023/24; viii) Health Promoting Health Service Annual Report 2023/24; ix) Pharmaceutical Care Services Report 2023/24 (which summarises provision and gaps across Fife); x) Public Health Screening Programmes; xi) an update on the resilience activities undertaken during Storm Eowyn; xii) Fife Violence Against Women Partnership Annual Report 2023/24; and xiii) Sexual Health and Blood Borne Virus Update 2024. Members have welcomed the comprehensive detail provided in each and the various assurances provided therein.

- 4.26 At the Committee's meeting in May 2025, annual assurance statements from the Committee's sub-groups, the Public Health Assurance Committee and the Equality & Human Rights Steering Group, were considered by members, detailing the work undertaken by both bodies over the 2024/25 reporting period. Summaries of the risk-focused business of the Public Health Assurance Committee, related to resilience arrangements, pandemic planning, immunisation delivery, screening programmes and lessons learned from any incidents during the year, were outlined within the report, which gave assurance that the Committee had delivered on its remit during the year. The Assurance Committee has reviewed in depth sixteen risks, including three corporate risks, and has had detailed discussion on potential new risks, as part of their horizon-scanning work. In the reporting year, the group have had input to monitoring the public health elements of the Annual Delivery Plan and have received assurance reports from their own sub-groups (mainly related to screening activities), which has enabled deeper understanding of progress within these respective areas of responsibility. In relation to the Equality & Human Rights Steering Group, its statement likewise gave assurance that NHS Fife has complied with its legal and ethical obligations in regard to the promotion of equality and human rights throughout all aspects of healthcare service delivery. The Group's work in mainstreaming equality-related work, promoting workplace diversity and tackling discrimination, policy updates, supporting the establishment and development of staff networks, was detailed within the report, which also detailed highlights from the year. The Group will review in detail any learning from an ongoing employment tribunal that is underway at the time of writing, when it makes its recommendations later in the year. Members welcomed the information given in both reports, noting the assurance provided via the work being undertaken by each group.
- 4.27 In addition to the report above, in May 2024 members considered a paper outlining the equality and health inequalities impact of financial decisions, in support of the RTP programme of work. Recognising the importance that the Board considers the impact any proposed changes may have on Protected Characteristic groups and other vulnerable groups that may experience more negative impacts in terms of equality and health inequalities, the paper provided a detailed checklist for decision makers to ensure that equality matters are appropriately considered in any decision-making process, to complement the more formal Equality Impact Assessment (EQIA) that remains a legislative requirement for matters of policy and strategy.
- 4.28 In November 2024, an update paper on the East Region Health Protection Service was considered, noting the plans to move to a single-employer approach, with consideration being given for NHS Fife acting as the host board. The paper has also been considered at the Staff Governance Committee for consideration of the aspects relevant to their remit. Members discussed the impact upon service delivery, noting the importance of being able to respond to new variants and mutations of communicable diseases such as Covid. Further updates will follow, as the plans require a coordinated approach across the four participating Board areas. The proposal will be further developed before progressing towards formal NHS Board sign-off.
- 4.29 Minutes of Committee meetings have been approved by the Committee and presented to Fife NHS Board. The Board also receives an Assurance Report 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. 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 2025/26 was approved at the Committee's March 2025 meeting.

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 2024/25.

6. Risk Management

- 6.1 At each Committee meeting, members consider in detail the individual risks aligned to the Public Health & Wellbeing Committee, as presented in the Corporate Risk Register format. The four risks regularly scrutinised by the Committee relate to: the likelihood of the Board's 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 create sustainable, quality services. Two risks have remained rated as high throughout the year (those related to health inequalities and primary care services) and two rated as moderate (strategy implementation and climate sustainability). Two new risks have been formalised during the year, the first related to pandemic preparedness (scrutinised from November 2024 onwards) and the second to substance-related morbidity and mortality (to be introduced in 2025/26); the Committee has had input to the design and content of both. A third new risk, related to access to general dentistry services, has been suggested and, at the time of writing, work is currently underway on formulating its content.
- 6.2 Regular review of 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. As the Corporate Risk Register has become embedded, improvements have continued to be made to reflect members' feedback. Deep dives have allowed for greater scrutiny of the root causes of risks and discussion on the effectiveness of management actions in place to reduce risk levels, and deep dives have been undertaken for all the risks aligned to the Committee. 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 facing the Board. The Board has reassessed its risk appetite as a whole during sessions in April and November 2024, and this is reflected in ongoing updates to the individual risk metrics.
- 6.3 In relation to the Primary Care risk, in July 2024, members have discussed the broad issues that impact across all of Primary Care services including General Practice, Community Pharmacy, Dentistry and Optometry, relating to increased levels of demand and unmet need from the pandemic period, workforce and finance availability, and contractual issues specific to each speciality. Root causes that have increased the core risk are also related to broader issues such as overall health of the population and socioeconomic inequalities which are more marked in some localities. Combined, this has increased the risk rating from moderate to high. The Committee has nevertheless been able to take assurance from the current Primary Care Strategy and the related delivery plan, which receives operational scrutiny from the Primary Care Governance & Oversight Board. The Strategy provides a focus on recovery actions, aiming to improve the quality of primary care services and seeking to make primary care systems sustainable. Actions from Year One delivery of the Strategy are on track, as detailed further in the report considered by the Committee in September 2024. 60% of actions have been completed in Year One, with the remainder carried over to Year Two activities. Members have supported the creation of a Performance Framework, including quality indicators, to monitor the effective implementation of the strategy. Noting that pressures on

the availability of dentistry continue to impact in Fife, there has been consideration as to whether the Primary Care risk should be strengthened to reflect this or whether a new stand-alone risk is required. This is currently under consideration at the time of writing.

- 6.4 During the year, the Committee has undertaken review into the risks aligned to delivery of the Board's Population Health & Wellbeing Strategy, noting in July 2024 that, in light of the RTP programme of work, linkages to the delivery of the Strategy and its transformation work require to be reflected in the risk and the mitigating actions thereof. Members also noted the increased likelihood that workforce and financial challenges may have an impact on the scope and pace of the delivery of the ambitions within the Strategy.
- 6.5 In relation to the risk on health and inequalities, members have been able to take a robust level of assurance on the management of this risk, noting the establishment of the Committee as part of this work and publication of the Board's Population Health & Wellbeing Strategy, Anchor Strategic Plan and related progress updates. In-year, the Committee has welcomed the approval by the Integration Joint Board of a new Prevention & Early Intervention Strategy, as detailed in a report to the Committee in September 2024. Work has also been underway to develop an Inclusion Health Network that will seek to provide a focal point for a range of partners, including the Third Sector, and the network will advocate for the resolution of issues faced by inclusion health groups such as those who are homeless. Funding has been confirmed from the Child Poverty Practice Accelerator Fund to sustain the income maximisation worker to support maternity services for 2024/25. The approach will focus on support for families with children who have a potential disability or long-term condition, and, if successful, funding may continue into future years. Although Fife Partnership was unsuccessful in its application to be selected as one of three initial Marmot sites in Scotland (as reported to the Committee's November 2024 meeting), the commitment to address health inequalities remains strong and is a regular focus of the Committee's discussions. In January 2025, members considered an update on policies and actions underway to reduce the risk, noting the external factors outwith the Board's control that impact thereupon, and the need for articulation of risk appetite in this area to focus discussion on future opportunities.
- 6.6 A new risk on the subject of pandemic preparedness has been discussed at the Committee, with a deep dive undertaken on the key drivers at the September 2024 meeting. With oversight from the Executive Directors' Group and input from the Clinical Governance Committee, the risk has been developed in line with the approach recommended by the World Health Organisation, to ensure that all areas of threat are covered. As the Scottish and UK Covid Inquiries progress and their recommendations are published, the risk will be reviewed and updated accordingly, to reflect learning from the recent pandemic handling. The Committee first began scrutinising the risk from their November 2024 meeting, noting that further detail on mitigating actions will develop as this specific risk is established.
- 6.7 The development of a second new risk, to cover substance-related morbidity and mortality, has begun during the year, as described to the Committee's January 2025 meeting and subsequently supported by the Audit & Risk Committee and the Board. The risk reflects the fact that deaths by drug use in Fife have doubled from 36 deaths in 2009 to 73 in 2023. Following an earlier request from the Public Health & Wellbeing Committee, a 'deep dive' was assigned to a small team to ascertain the need for a specific NHS Fife risk with regards to deaths from problem substance use. The aim is to identify aspects of strategy, policy and delivery within the Board to aid the prevention of drug-related deaths and recommend actions that reduce the likelihood and consequence. The initial stage of framing the risk has begun, and further work will continue to complete the assessment of broader management actions in this area, prior to seeking Board approval in May 2025.

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 2025 meeting, and action points are being taken forward at both Committee and Board level in the year ahead.

8. Conclusion

- 8.1 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. The Committee has considered its remit twice during the year, and has made enhancements to clarify areas of responsibility, particularly as regards delegated services. 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.
- 8.2 I can confirm 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.
- 8.3 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.

Signed:  Date: 22 April 2025

John Kemp, Chair

On behalf of the Public Health & Wellbeing Committee

Appendix 1 – Attendance Schedule

Appendix 2 – Best Value

Public Health & Wellbeing Committee Attendance Record
1 April 2024 to 31 March 2025

	13.05.24	01.07.24	09.09.24	11.11.24	13.01.25	03.03.25
Members						
J Kemp , Non-Executive Member (Chair)		✓ Observing	✓	✓	✓	✓
J Bennett , Non-Executive Member			✓	✓	✓	✓
A Morris , Non-Executive Member	✓	X	X	✓	X	✓
A Wood , Non-Executive Member	✓	✓	✓	✓	✓	✓
M McGurk , Director of Finance & Strategy	X	✓	✓	✓	✓	X
C McKenna , Medical Director	✓	X	X	X	✓	✓
J Keenan , Director of Nursing	✓	X	✓	✓	✓	✓
L Parsons , Employee Director	✓	✓	✓	✓	✓	✓
C Potter , Chief Executive	✓	✓	✓	✓	✓	X
J Tomlinson , Director of Public Health (Exec Lead)	✓	✓	X	✓	✓	✓
In Attendance						
E Butters , Fife ADP Service Manager			✓ Item 10.1		✓ Items 6.1 & 6.2.1	
N Connor , Director of Health & Social Care	✓	X				
C Cooke , Public Health Scientist				✓ Observing		
S Cooke , Public Health Registrar, NHS Borders				✓ Observing		
C Conroy , Clinical Services Manager		✓ Item 8.2				
L Cooper , Head of Primary & Preventative Care Services		✓ Deputising	✓ Deputising			✓ Deputising
S Crabb , Public Health Service Manager				✓ Item 7.3		
E Curnock , Consultant in Public Health Medicine		✓ Item 8.2	✓ Deputising			
L Denvir , Consultant in Public Health		✓ Observing & Item 6.5				
G Docherty , Consultant in Public Health					✓	
T Donaldson , Public Health Registrar			✓ Observing			
F Forrest , Acting Director of Pharmacy & Medicines	✓	✓	✓	✓	✓	✓
S Fraser , Associate Director of Planning & Performance	✓	✓	✓	X	✓	✓

APPENDIX 1

	13.05.24	01.07.24	09.09.24	11.11.24	13.01.25	03.03.25
L Garvey , Director of Health & Social Care				✓	X	X
B Hannan , Director of Planning & Transformation			✓	X	X	✓
J Lyall , Chief Internal Auditor		✓ Items 1 – 5.1			✓	
P Kilpatrick , Board Chair	X	✓ Items 5.2.1 onwards	✓	✓	X	X
K MacGregor , Director of Communications & Engagement	✓	X	✓	✓	✓	✓
G MacIntosh , Head of Corporate Governance & Board Secretary	✓	✓	✓	✓	✓	X
N McCormick , Director of Property & Asset Management	X	✓	✓	✓	✓	✓
F McKay , Interim Director of Health & Social Care		✓ Deputising	X			
M McClung , NHS Forth Valley					✓ Observing	
J Ramsay , Head of Sustainability				✓ From item 7.4		
F Richmond , Executive Officer to the Chair & Chief Executive	✓	✓				
N Robertson , Director of Nursing, Corporate		✓ Deputising				
S A Savage , Associate Director for Risk & Professional Standards			✓ Item 6			
L Thomson , Employability Officer				✓ Item 7.3		
J Torrens , Head of Complex & Critical Care					✓ Deputising	
J Valentine , Public Health Manager					✓ Item 7.2	
L Watson , Consultant in Public Health Medicine	✓ Item 8.1					
D Fortescue-Webb , Consultant for Public Health			✓ Item 6.1.1	✓ Item 8.2		
T McCarthy-Wilson , Portfolio Manager				✓ Item 7.1		

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	BOARD ALL BOARD COMMITTEES	Annual	Annual Delivery Plan Corporate Objectives

APPENDIX 2

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
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.	NHS Fife involvement in strategic planning and engagement with Fife H&SCP NHS Fife key partner in Fife Partnership Board	BOARD PUBLIC HEALTH & WELLBEING COMMITTEE	Ongoing	Population Health & Wellbeing Strategy Reporting of Minutes

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

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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 Implementation reporting

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
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>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>	Every meeting	<p>Integrated Performance & Quality Report</p> <p>Code of Corporate Governance</p> <p>Minutes of Committees</p>

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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 / new PH&WC measures
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

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
needed for life are unimpaired and remain so for future generations.	Greenspace Strategy development over current year			

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 Bi-annual Report on Equality Outcomes & Mainstreaming Plan Annual Statement of Assurance from Equality & Human Rights Steering Group

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