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NHS HEALTH SCOTLAND ANNUAL REVIEW 2016

I am writing to you following the NHS Health Scotland Annual Review on 18 October 2016 and our meeting on 30 November.

This year was one of the biennial non-Ministerial reviews. I am pleased to note that again you invited a stakeholder panel to lead the review which was conducted in public.

I would like to pass on my acknowledgements to the panel under the chairmanship of Sir Andrew Cubie for a successful review.

General Points

Scottish Government officials attended the review and, based on their conclusions from the discussions, I will offer the following feedback and recommendations.

Value for money – I am pleased to note that NHS Health Scotland achieved all three financial targets for 2015-16 which were to operate within its Revenue Resource Limit (RRL), Capital Resource Limit (CRL), and to meet its Cash Requirement. You have also continued to meet the requirements for efficiency savings for which the Board and its staff should be particularly commended in these challenging times.

In presenting your strategic perspective you should continue to be able to demonstrate that the Board is delivering value for money, with a focus on outcomes, rather than outputs.







Leadership – NHS Health Scotland has an important leadership role in public health and, in particular, in addressing persistent health inequalities. It is crucial that the Board has a clear understanding of when and how it should provide appropriate leadership both nationally and locally. Equally, it is important that Board recognises when it has a contributory role to play in initiatives and can provide 'followship' when necessary.

You will need to continue to develop a clear understanding of your routes to influence and activity at different levels – local, regional or national.

Distinct Contribution – Following on from your leadership role is having a clear understanding of the disctinct contribution that NHS Health Scotland can make to our health strategies. This requires you to assess your range of activities against those of other organisations that may be undertaking similar roles and ensuring that there is no duplication of effort or activity. The Board should have an understanding of what its distinct strengths are and should be able to describe these to partner organisations so that they can understand why they should be collaborating with your Board. As part of that, the ways in which you influence and support others to make a practical difference is critical. - Your Board has many examples of activity that improve directly or indirectly health outcomes. It is essential that NHS Health Scotland's programmes are followed through sufficiently to ensure that desired activity takes place. For example, publication of a guidance document should not represent the end of a programme and there should be planned activity to ensure that the target audience understands and uses the document and take action as a result. A good example of this is the follow-up activity to the recent homelessness guidance published by NHS Health Scotland where you have engaged with your target audiences to assist understanding the nature and purpose of the guidance and how it should be used.

Strategic perspective – You alluded to an ambition for developing a stronger strategic, cross-cutting perspective for NHS Health Scotland, including an ambition to embed the Right to Health as a clear and underlying principle of how you describe and design your work. I would strongly encourage you to pursue this as, from the Board's own work, the complex interlinkage of issues is well established. It also helps provide the basis for strengthened leadership of advancement of human rights-based approaches in public services, as government have called for. Aligned to this is a need to improve on your strategic reporting and the impact that it is having.

Public Sector Reform – The recommendations of the Christie Commission remain a key driver for public service transformation. NHS Health Scotland can make a significant contribution to this process. You should engage with territorial and special NHS Boards, community planning partnerships and health & social care partnerships to support them in developing responses to tackling determinants of health and wider inequalities. Again, how you work in partnership with others to achieve practical improvement is crucial – I am supportive of the activity NHS Health Scotland is taking to support primarily territorial Boards in ensuring BSL users are properly assisted.

Place-based approaches – The Place Standard developed by NHS Health Scotland is an excellent example of collaborative working to address wider determinants of health. You should explore how you can develop a closer strategic working relationship with local government (and other stakeholders), that allows you to better understand the issues, priorities and language of local authorities. You should identify how the Board can better support place-based approaches to tackling health and social inequalities through local







partnerships and collaboration. You may wish to consider if the Board's Fairer Scotland pledge on ending child poverty could act as a focus for this.

Measuring performance – This falls into two areas. Firstly, NHS Health Scotland's own performance. You have already made good progress in measuring your performance. I would encourage you to continue this, ensuring the focus on outcomes rather than outputs.

Secondly, at the review the Board's contribution to the review of the National Perfomance Framework was raised. I would welcome your contribution to this as an example of the unique contribution that NHS Health Scotland can make. You may also wish to contribute to Sir Harry Burns review of health and social care targets and measures.

Conclusion

I would like to thank you and your Board, and the staff of NHS Health Scotland, for their continued commitment and hard work over the last year.

This year's non-Ministerial Annual Review has sufficiently challenged the Board in allowing you to demonstrate the range of good work you have delivered over the last year while also highlighting areas which require you to develop further. I am pleased to note that in most cases you have already recognised the challenges ahead. I hope the foregoing is helpful in allowing you to prioritise and shape your action plan as you seek to influence policy, provide challenge and support the Scottish Government in its wider objectives.

I have set out above the key areas that I would like to see you give some priority to over the next year and I look forward to hearing about your progress in due course. My thnaks also for the open spirit in which you continue to bring you and the staff's expertise and advice to bear as we continue to develop public health in Scotland.

Yours sincerely

AILEEN CAMPBELL
Minister for Public Health





