

ANNUAL STATEMENT OF ASSURANCE FOR NHS FIFE PUBLIC HEALTH & WELLBEING COMMITTEE 2023/24

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 2024, membership of the Public Health & Wellbeing Committee comprised: -

Pat Kilpatrick	Chair (from 1 February 2024)
Alistair Morris	Chair (to 31 January 2024) / Non-Executive Member
Mansoor Mahmood	Non-Executive Member (to 31 December 2023)
Arlene Wood	Non-Executive Member
Wilma Brown	Employee Director (until October 2023)
Lynne Parsons	Employee Director (from November 2023)
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, Director of Pharmacy & Medicines, Director of Property & Asset Management, 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 nine occasions during the financial year to 31 March 2024, on the undernoted dates:
- Wednesday 19 April 2023 (Development Session)
 - Monday 15 May 2023
 - Monday 3 July 2023
 - Monday 4 September 2023
 - Tuesday 24 October 2023 (Development Session)
 - Monday 6 November 2023
 - Monday 15 January 2024
 - Thursday 22 February 2024 (Development Session)
 - Monday 4 March 2024

3.2 The attendance schedule is attached at Appendix 1.

4. Business

- 4.1 The Public Health & Wellbeing Committee's first meeting of the 2023/24 reporting year took place in April 2023, in the form of a dedicated Development Session for members focused on the topic of service initiatives and performance within Child & Adolescent Mental Health Service & Psychological Therapies. This was the first of a series of dedicated Development Sessions held throughout the year, 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. A further Development Session was held in October 2023, taking the form of a detailed presentation into Integrated Screening, including information on local delivery of national programmes and dedicated work within the team to address health inequalities (members' understanding of the challenges in this area was further enhanced by the consideration at committee in November 2023 of the Public Health Screening Programmes Annual Report). In February 2024, the topic for discussion at the Committee's last Development Session of the year was an update on Immunisation Strategy and Delivery in Fife, building upon the regular performance reporting to the Committee in this area and the consideration in July 2023 of the Immunisation Annual Report 2023 and review of the Immunisation Strategic Framework 2021/24. Each of these sessions 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.
- 4.2 The Committee is the lead 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.
- 4.3 The draft Corporate Objectives 2023/24 were presented to the Committee in May 2023, after initial consideration in March 2023. 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. 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. Each Board Committee has had a role in reviewing the objective from their own specific perspective. For the Committee's own area, linkages between the objectives and improving health inequalities and overall population health within Fife were explicit in the related actions. Following review, the Committee were pleased to endorse the Corporate Objectives for onward submission to the Board for formal 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, September and November 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. Members have welcomed the launch of the locally tailored digital platform to support the national portal, which is aimed at increasing uptake from local suppliers. New guidance from Scottish Government regarding production of an Anchor Strategic Plan, supported by a revised self-assessment tool produced by Public Health Scotland, were considered by members at their September 2023 meeting, which has influenced the final work around drafting the Board's Anchor Strategy.

The draft Strategy was tabled to the Committee's November 2023 meeting, detailing a number of initiatives around the requested areas of workforce, procurement and environmental sustainability, listing the various priorities across these areas. Members were pleased to endorse the Anchor Strategic Plan to the Board for subsequent approval.

- 4.5 The development and implementation of a Greenspace Strategy 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. In May 2023, members endorsed the new Greenspace Strategy for subsequent Board approval. It was recognised that implementing the Strategy could usefully align to some of the innovative ideas around community planning discussed with Fife Council partners as part of the series of 'Our Fife' leadership summits held over 2022/23, the conclusions of which were considered by the Committee at its May 2023 meeting. In November 2023, members were supportive of preparatory work beginning to develop a Green Health Partnership, the first phase of which will focus on the Levenmouth area. These partnerships aim to create 'Our Natural Health Service', with the overall aim of bridging the gap between public health and health and social care with Scotland's green infrastructure and natural environment. The partnership will seek to promote everyday contact with nature, support development of nature-based health promotion initiatives and create initiatives to meet defined health needs and outcomes. The Committee endorsed in principle participation in the workstreams, noting that Steering Group reports would be fed back to members as the programme got underway.
- 4.6 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. This has culminated in the presentation to members of the Annual Climate Emergency & Sustainability Report 2022/23, discussed at the Committee's January 2024 meeting, the priorities of which will be appropriately reflected in the Board's future strategic priorities. Members had input into the suggested content of the report, noting the work underway to reduce greenhouse gas emissions, waste and building energy use, with challenges ahead in meeting compulsory changes in adopting electric vehicles across the fleet.
- 4.7 The Committee has scrutinised the Board's Annual Delivery Plan (ADP) for 2023/24 and the Medium Term Plan 2023/26, which have both been aligned to the strategic priorities within the Board's overall Population Health & Wellbeing Strategy, whilst also addressing the specific requirements of the respective Scottish Government guidance. Members were pleased to endorse the plans to the Board at their meeting in July 2023. The feedback from Scottish Government following their approval of the plan was reviewed at the Committee's September 2023 meeting, where it was reported that the ADP trajectories have been added to the regular IPQR reporting to allow for bi-monthly scrutiny. Quarterly reviews with Scottish Government on the Board's financial position have continued in-year.
- 4.8 The Committee have supported the process for the refresh of the Mental Health Strategy, which was launched originally in 2020 but is requiring review to reflect the reality of the post-Covid pandemic landscape and the current pressures from the cost of living crisis. The review also provides an opportunity to fully align mental health priorities with both the Board's Population Health & Wellbeing Strategy and the Fife Health & Social Care Partnership's Strategic Plan. Members have supported the engagement work underway and the proposed indicators / targets to be built into performance reporting. The Committee looks forward to considering the final strategy early in this financial year.
- 4.9 In July 2023, the Committee took assurance from a briefing outlining the local implementation 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 H&SCP was

detailed, giving members a robust level of assurance around Fife's compliance with the nationally-led work. A further update was tabled to the Committee in March 2024, outlining the large amount of cross-boundary work completed thus far. The next year's focus will be on developing an evaluation and monitoring framework, to clearly document progress and demonstrate the positive impact on care-experienced children, young people and families.

- 4.10 In September 2023, members considered the annual Alcohol & Drugs Partnership (ADP) Annual Report, reflecting on delivery of the local ADP Strategy, with discussion on implementing new Medication Assisted Training (MAT) Standards. These have covered areas such as same-day prescribing, medication choice, harm reduction and psychological interventions, and a trauma-informed approach, with improvements seen across these targets. As such, the Committee is able to take assurance on the delivery impact of the strategy, noting that a refresh of this is being carried out. A briefing given to members in November 2023 outlined the engagement work taking place to inform the development of the new strategic priorities and the efforts underway to ensure alignment with both the Board and IJB's organisational strategies. 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 Population Health & Wellbeing Strategy.
- 4.11 In September 2023, the report on Tackling Poverty and Preventing Crisis, 2023, was tabled. This report incorporates the legal requirement to report on Child Poverty on an annual basis. It was produced by Fife Partnership and presented all the activities taking place across the H&SCP in relation to reducing poverty in Fife, which remains challenging due to external factors such as the cost of living crisis. In January 2024, members considered a briefing paper on the national public health priority of eating well, having a healthy weight and staying physically active. The importance of active participation and engagement activities being undertaken to identify areas that could make the most impact on population health improvement has been recognised, and members were pleased to note (in January 2024) the annual report of activity and plans to strengthen our guidance around community engagement, to support new guidance from Healthcare Improvement Scotland. In March 2024, the Committee received a presentation on the development of the Prevention & Early Intervention Strategy, which is expected to be published later in 2024. A comprehensive outline of the activities underway across all life stages, from pre-conception / pregnancy to older adults, was discussed with members, in addition to ongoing engagement with communities and stakeholders. Members look forward to seeing the result of this work being included in the new strategy later in 2024.
- 4.12 Some programme workstreams that are encompassed within the Board's Population Health & Wellbeing Strategy are already underway, and the Committee received an update on the End of Year One activities of the High Risk Pain Medicines Patient Safety Programme in September 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. NHS Fife has higher rates of prescribing of these medicines compared to other health boards, as measured by National Therapeutic Indicators (NTI), as well as a higher-than-average involvement of prescribed medicines in drug related deaths. A successful conclusion to the first year of programme activities was reported, noting the initial preparatory work, aimed at fully understanding the problem, has been completed. Year Two priorities were outlined, which the Committee were supportive of. Members considered a second briefing paper at their meeting in March 2024, on delivery of the Year Two activities, noting the roll-out of bespoke training for clinicians and pharmacists and the patient feedback exercise undertaken for review of patient leaflets and paperwork. Revised prescribing guidance has been approved and is in the process of being rolled out. The overall programme aim is to see an improvement in the National Therapeutic Indicators data when comparing Fife with the Scottish average. Early analysis (with latest available data released in December 2023, for end of June 2023 period) shows that whilst Fife remains above the Scottish average in most areas, there has been an improvement for NHS Fife in 7 of the 8 NTI measures compared to Scotland, which has only shown an improvement in 3 of 8 areas. Members

recognised the positive impact of the programme thus far, noting that evaluation of the ongoing activities would be encompassed in future reporting to the Committee.

- 4.13 The Committee has received a number of detailed updates on Child and Adolescent Mental Health Services (CAMHS) performance (particularly focused on addressing a backlog of demand and longest waits, impacted also 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 with the relevant clinicians at a dedicated Development Session. 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 2024. Support has been received from Scottish Government and a number of new posts are being recruited to, with long-term vacancies still a challenge. 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 November 2023, the Committee received a standalone update on the performance of both CAMHS and PT, to complement the routine IPQR data, with clinicians from the relevant services attending the meeting. 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, despite demand increasing.
- 4.14 Members have previously endorsed 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. The Oversight Group is now well established (as described in a briefing to members in March 2024) and 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, 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. Building on the early focus of the group's work in enhancing sustainability and transformation of services via recent initiatives such as ScotGEM to support primary care resilience in the future, members were pleased to receive for comment the proposed Primary Care Strategy 2023/26 at their July 2023 meeting. Alignment with the Board and Partnership's organisational strategies was clear, in addition to the overall direction of travel for premises. Members gave useful comment around supporting individuals who have been excluded from certain services, due to capacity issues, and how better accessibility could be communicated and achieved. The Committee was pleased to recommend the strategy to the Board and Integration Joint Board for formal approval.
- 4.15 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 May 2023, the Committee were pleased to endorse to the Board the successful outcome of the bidding process and the preferred bidder, noting also the input thereto of the Finance, Performance & Resources Committee and the Staff Governance Committee. In March 2023, the Committee agreed to the timescales for the Corporate Risk Register for the Primary Care Services risk being revised to a delivery date in spring 2024, to more realistically reflect the risk and the extent to which it can be mitigated locally in the challenging climate being experienced currently.
- 4.16 A comprehensive briefing on Dental Services and Oral Health Improvement work was given to members at the January 2024 meeting. The creation of the 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 report covered the introduction of the new Dental contract in November 2023 and the challenges resulting from reduced activity levels within independent dental practices, impacting on the workload of the public dental service. A number of issues were highlighted, particularly in primary care dental services, but the briefing provided 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 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 improve 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. 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. 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 a new annual report on Smoking Cessation and Prevention, considered at the July 2023 meeting.
- 4.18 In addition to the regularity of IPQR performance reporting, the Committee has considered detailed updates on Measles (at their May 2023 meeting and a separate briefing on actions taken to respond to a single measles cases identified in St Andrews in March 2024). A stand-alone report outlining overall preparedness for an uptick in Measles cases was considered in March 2024, following a series of outbreaks of the disease in England and Europe. This provided the Committee with assurance that appropriate processes are in place to address and manage any local outbreak of measles within Fife.
- 4.19 In May 2023, members reviewed the learning from a national investigation into the incorrect exclusion of some women from routine cervical screening in Scotland, with assurance taken from Fife's local response to the issues raised by this incident and the audit work undertaken thus far, noting the fact that no harm to patients had thus been identified. Assurance was also taken from the next steps to be taken for the wider audit work to be undertaken for the second wave of patients. Also, a briefing to the Committee in July 2023, focusing on lessons learned, was delivered in relation to a recent national adverse event affecting image quality within the breast screening programme, with members gaining assurance that processes have reviewed all images, including those of patients who had been asked to re-attend for repeat images. No instances of missed cancer were identified. A proposal to improve access to breast screening through the possibility of a static satellite screening site within Fife was supported in principle by the Committee, noting the importance of this service in the early identification of cancer. This proposal will require more detailed scoping and Committee agreed to receive an update once necessary discussions have taken place.
- 4.20 As Covid activity has generally 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 2023 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. General '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. In September 2023, members considered a briefing on the support

being offered within the Board area to individuals suffering from Long Covid symptoms, particularly around recovery and rehabilitation. Limited funding has been made available to increase the capacity of existing services supporting people living with Long Covid, to develop these into more clearly defined local pathways and to provide a more co-ordinated experience for those accessing support. Assurance was taken from Fife's approach in this area, and members were supportive of the ambition to build this service into existing support workstreams, to allow for continuance when the initial tranche of funding comes to an end.

- 4.21 In January 2024, 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 impact of suspending the service during the Covid pandemic has meant that waiting lists for the service have grown whilst the service remobilises 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, the Committee will receive an update later this reporting year, to provide assurance that the challenges in addressing the waiting list have been mitigated against.
- 4.22 In March 2024, the Committee received robust assurance that the IJB Direction issued to the Health Board in May 2023, to implement changes for the permanent re-provision of palliative care services in Fife, has been successfully delivered, within the existing service budget. The enhanced service model ensures that patients are cared for in their preferred setting, to better meet the evolving needs of patients and those of their families and carers. Members were pleased to note that there have been no complaints relating to specialist palliative care service over this time period the new model has been running. Patients, families and carers continue to share their very positive feedback on their individual care experience via Care Opinion and other such services, which provides robust and independent assurance to the Committee that the changes have been patient-centred and effective.
- 4.23 The Committee has received updates on both the ongoing Scottish and UK Covid Inquiries and the Crown investigation, which 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. Assurance has been given that processes are in place internally to manage a potential uptake in individual patient requests, ensuring that pressures on key staff are managed appropriately. The opportunity for learning from each of the Inquiries' conclusions has been welcomed by the Committee, particularly in enhancing future pandemic planning.
- 4.24 After initial consideration by the Board's Audit & Risk Committee, in July 2023 the Committee considered the findings of the annual Internal Audit report, with particular reference to the sections considering strategy development and implementation. 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. The Committee also had sight of the Internal Controls Evaluation report from Internal Audit, providing information on the mid-year position, at their January 2024 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. The importance of further scrutiny activity around the Annual Delivery Plan and Financial Plan deliverables were emphasised, in order to enable a shared understanding of the challenges ahead.
- 4.25 During the year, the Committee has also received subject-specific reports on i) the Commonwealth Partnership for Antimicrobial Stewardship; ii) Adult Support & Protection Biennial Report; iii) the Director of Public Health's Annual Report 2023 (which was focused on the single topic of child health); iv) Fife Child Protection Annual Report 2022/23; v) the Health Promotion Service Annual Report 2022/23; vi) Immunisation Annual Report 2023 and

review of Immunisation Strategic Framework 2021/14; vii) Alcohol & Drugs Partnership Annual Report 2022/23; viii) Tackling Poverty & Preventing Crisis Annual Report 2022/23; ix) Health Promoting Health Service Annual Report 2022/23; x) Pharmaceutical Care Services Report 2022/23 (which summarises provision and gaps across Fife); xi) Fife Violence Against Women Partnership and Gender Based Violence Nurse Advisory Service Annual Reports 2022/23; and xii) Sexual Health and Blood Borne Virus Update 2023. Members have welcomed the comprehensive detail provided in each and the various assurances provided therein.

4.26 At the Committee's meeting in May 2024, 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 2023-24 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. 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, and innovative work around improving interpreting and translation services, was detailed within the report, which also detailed highlights from the year. Members welcomed the introduction of the yearly assurance reports from the Committee's sub-groups, noting that these will be strengthened further with reflection on levels of assurance in the year ahead.

4.27 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. 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 2024/25 was approved at the Committee's March 2024 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 2022/23.

6. Risk Management

6.1 At each Committee meeting, members consider in detail the four 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 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 create sustainable, quality services. In addition to the summary presentation of the aligned risks at all meetings since May 2023, members have received deep-dive information on Primary Care sustainability (May 2023), implementation of the Board's Population Health & Wellbeing Strategy (July 2023), policy obligations in relation to environmental management and climate change (September 2023) and health inequalities (January 2024). 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 has been reviewed by the Audit & Risk Committee in the reporting year, noting the importance of members exercising robust scrutiny around the proposed levels of assurance on the effectiveness of mitigating actions.

- 6.2 In relation to Primary Care, 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 health inequalities depending on locality placement. The Committee has been able to take assurance from the Primary Care Strategy, approved during the reporting year (update paper considered in May 2023 and final document in July 2023), and the related Delivery Plan, which receive operational scrutiny from the Primary Care Governance & Oversight Board. Progress against delivery of performance against risk targets also receive regular monitoring via that governance route. It was recognised that transformation of services is required to fully address current challenges, and that these activities are captured in the Primary Care Improvement Plan. Stand-alone updates on a national chain's disinvestment from local pharmacy provision (May 2023 meeting) have also been given, to provide assurance on mitigation of any emerging risks.
- 6.3 During the year, the Committee has undertaken a deep-dive review into the risks aligned to delivery of the Board's Population Health & Wellbeing Strategy, noting in July 2023 that, following Board approval in March 2023, further work was required to develop the enabling strategies that will underpin delivery of the broad strategic aims, including gap analysis to ensure that relating workplans aligned to the broad ambitions of the document. A further update was given to members in September 2023, where it was reported that the risk level for the strategy was not expected to change over the short or medium term, due to the timescales for delivery over the lifespan of the strategy. In relation to reporting, a mid-year and annual reporting structure have been established, to provide the Board with regular assessment on delivery against key priorities, linking also to other planning processes such as the annual operational plan, financial planning and corporate objectives. The initial draft of the mid-year review was considered at the Committee's November 2023 meeting, with members' feedback highlighting the accessibility of the report to a non-specialist audience. It was, however, noted that realistic and achievable objectives were required to be created, to give assurance that the early actions around the delivery of the strategy are having impact, recognising, however, that further progress information is given in the Annual Delivery Plan reporting (the Quarter 2 Performance report also being considered at the November 2023 meeting). As such, members could take at the current time a reasonable level of assurance around mitigating actions. The final draft of the mid-year report was considered at the Committee's January 2024 meeting, and it has been agreed that supporting impact indicators will be added to the forthcoming Annual Report, to evidence the effectiveness of delivery actions thus far.
- 6.4 The Committee has oversight of risks impacting upon the Board's obligations in relation to environmental management and tackling the climate emergency challenge. Members reviewed a deep dive briefing in September 2023, taking assurance from the fact that the Board was already meeting some of its 2025 targets in relation to carbon emissions. It was recognised that the next tranche of 2030 targets would likely prove challenging to meet, which are the interim measure in reaching net zero, noting that significant investment would be required to achieve the necessary trajectories, which appears difficult given the limited capital funding available. Substantial capital investment is required, for instance, on the decarbonisation of heat projects to replace fossil fuel sources (gas and oil) with non-fossil fuel systems (electric heat pumps etc). As such, only limited assurance can be given at this stage, and the Committee will require to keep this risk under close review, given the current financial position.

6.5 In January 2024, members discussed a deep-dive review into health and inequalities. Members were able to take a robust level of assurance of 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. Members have, however, agreed to endorse a change to the target risk rating for health & inequalities, due to the cost-of-living crisis on the wider population and the impact on health inequalities, which recommendation will initially be reviewed by the Public Health Assurance Committee. Further work is also required around the creation of a detailed evaluation framework for the Population Health & Wellbeing Strategy, including plans to use metrics to monitor progress and outcomes focussing on how the strategy is addressing health inequalities. It was recognised that the development of indicators are still to be completed, due to awaiting the final version of health & social care and wellbeing analytics from Scottish Government, as well as relevant underpinning framework documents and other strategies which are not yet all in place.

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 2024 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.

Signed:  Date: 13 May 2024

Alistair Morris, Acting 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 2023 to 31 March 2024**

	15.05.23	03.07.23	04.09.23	06.11.23	15.01.24	04.03.24
Members						
P Kilpatrick , Chair (from Mar '24)						✓
A Morris , Non-Executive Member (Chair to Feb '24)	✓	✓	✓	✓	✓	✓
M Mahmood , Non-Executive Member	x	✓	✓	✓		
A Wood , Non-Executive Member	✓	✓	✓	✓	✓	✓
W Brown , Employee Director	✓	x	x			
M McGurk , Director of Finance & Strategy	✓	x	✓	✓	✓	x
C McKenna , Medical Director	✓	✓	x	x	✓	✓
J Keenan , Director of Nursing	✓	✓	x	✓	✓	✓
L Parsons , Employee Director				✓	✓	✓
C Potter , Chief Executive	✓	✓	✓	✓	✓	✓
J Tomlinson , Director of Public Health (Exec Lead)	✓	✓	x	✓	✓	✓
In Attendance						
H Close , Head of Pharmacy			✓ Observing			
N Connor , Director of H&SC	✓	✓	✓	✓	✓	✓
S Crabb , Public Health Services Manager				✓ Item 6.3		
C Conroy , Programme Director		✓ Item 8.4				
L Cooper , Head of Primary & Preventative Care Services		✓ Items 6.3 & 6.4				
L Cowie , Interim Senior Manager for Mental Health				✓ Item 7.2		
E Curnock , Consultant in Public Health Medicine		✓ Item 8.4				
L Denvir , Consultant in Public Health				✓ Observing		
S Fraser , Associate Director of Planning & Performance	x	x	✓	✓	✓	✓
B Hannan , Director of Pharmacy & Medicines	✓	✓	✓	✓	x	✓
G MacIntosh , Head of Corporate Governance & Board Secretary	✓	✓	✓	✓	✓	✓

APPENDIX 1

	15.05.23	03.07.23	04.09.23	06.11.23	15.01.24	04.03.24
T McCarthy , Portfolio Manager		✓ Observing Item 5.2				
N McCormick , Director of Property & Asset Management	✓		✓	✓	✓	✓
M Michie , Deputy Director of Finance		✓ Deputising				
F Richmond , Executive Officer to the Chief Executive & Board Chair	✓	✓	✓	✓	✓	✓
A Summers , Interim Head of Psychology				✓ Item 7.3		
L Watson , Consultant in Public Health Medicine		✓ Item 8.1	✓ Deputising	✓ Deputising		

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

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
<p>The Board has identified the risks to the achievement of its strategic and operational plans are identified together with mitigating controls.</p>	<p>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.</p>	<p>ALL BOARD COMMITTEES BOARD</p>	<p>Bi-monthly Twice per year</p>	<p>Corporate Risk Register</p>

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

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

APPENDIX 2

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