

Response from Community Justice Scotland

Submitted to **A consultation on a new National Public Health body: 'Public Health Scotland'**

Submitted on **2019-07-04 16:09:03**

Questions

1 Do you have any general comments on this overview of the new arrangements for public health?

Give your comments below:

Community Justice Scotland (CJS) welcomes the creation of Public Health Scotland (PHS) and has been pleased to have been involved in the early discussions on the arrangements to deliver the new body and the new model for public health.

CJS supports a public health approach to justice, with a focus on early intervention and prevention and looks forward to working closely with the new national body. The model for community justice in Scotland as outlined in the Community Justice (Scotland) Act 2016 ('CJ(S) Act') follows a similar approach to that proposed for PHS: a local area partnership approach with a range of partners working together to plan and deliver services which will achieve agreed outcomes, all within the context of the creation of a new national agency to provide national leadership and direction. You may wish to explicitly acknowledge that the local and national arrangements are mutually complementary approaches.

CJS would be pleased to support PHS in its new role as a statutory partner in community justice given our understanding that as a new Health Board as per the CJ (S)Act which identifies all health boards as statutory CJ partners with concomitant statutory duties. There are clear linkages between community justice and the factors which contribute to crime and the issues impacting on Scotland's public health, including but not limited to: Adverse Childhood Events (ACEs); financial exclusion; homelessness and inadequate housing; access to employment and education opportunities; substance misuse and addiction etc. The achievement of national outcomes requires everyone's contribution and CJS will be happy to share our continued learning from the implementation of the CJ model with PHS given the synergies that exist as well as to identify opportunities for joint working and future learning.

2a What are your views on the general governance and accountability arrangements?

Give your comments below:

In terms of governance and accountability, the proposed local and national model outlined aligns with that established for CJS including the creation of local plans, the national review of those, recommendations for improvement and where appropriate supporting improvement activity.

Sections 49-55 highlights the other local partnership arrangements which have a contribution to public health arrangements throughout Scotland. We would propose the inclusion of local community justice partnerships within this list.

We would also propose that PHS should be explicitly acknowledged as a statutory partner for community justice responsible to the delivery of the outcomes of the national strategy for community justice, given the primary legislation lists all health boards as statutory partners and that Integration Joint Boards and NHS Boards are already partners with statutory responsibilities under the CJ(S) Act. This will enable effective collaboration in the achievement of community justice and public health outcomes.

2b How can the vision for shared leadership and accountability between national and local government best be realised?

Give your comments below:

Shared leadership and accountability between national and local government will require a parity of esteem and a recognition of the contribution that both can give to the delivery of improved public health outcomes across Scotland. The effective administration of this will need appropriate resources not only for local government but also opportunities for engagement with and participation of third sector organisations, communities and other public bodies implicated by public health issues.

CJS would welcome the opportunity to discuss further with PHS the potential opportunities emerging for PHS involvement in community justice arising from our recently published Strategic Commissioning Framework (SCF) that is out for consultation on the CJS website:

questions<https://communityjustice.scot/news/the-framework-for-smart-justice-strategic-commissioning-framework-frequently-asked-questio>

The SCF asks that all Partnerships (and Partners) have clear governance arrangements outlined . Given our assumption that PHS will become a statutory CJ partner under the CJ(S) Act it will be important to clarify PHS potential role and contribution within CJP partnership arrangements locally (as the consultation focuses solely on the Community Planning Partnership arrangements). The leadership the PHS can offer for this agenda across Scotland including our strategic partnership working at a national level is also an area we would welcome further discussion.

PHS has a twofold leadership role potentially in national evidence/knowledge brokering but also strengthening influencing to public health (and more upstream action) across Scotland at both local and national levels. CJS would be happy to discuss further with PHS what shape this leadership role could take , and agree clearly articulated arrangements/routes to access/uptake and indeed how CJS could reciprocate.

3a What are your views on the arrangements for local strategic planning and delivery of services for the public's health?

Give your comments below:

The focus on creating a knowledge based and intelligence driven organisation with access to data and information from across the whole system will be important to deliver the change envisaged by the new model. Ensuring that there is ease of access to such data and information is critical to enable effective local planning and to identify needs, gaps as well as strengths in the system.

3b How can Public Health Scotland supplement or enhance these arrangements?

Give your comments below:

CJS would be keen to explore further with PHS their potential role in delivering on the national CJ outcomes and the synergies for our joint working on primary/secondary prevention activity. Equally CJS would be happy to become involved in any national planning forum which PHS may wish to establish around common outcomes.

4 What are your views on the role Public Health Scotland could have to better support communities to participate in decisions that affect their health and wellbeing?

Give your comments below:

The duties proposed for local arrangements to agree the planning and delivery of services should also take account of work being done in relation to the planning and delivery of community justice services. This will help to identify potential synergies and to broaden the pool of participants to enable the best possible resource decisions to support people with multiple and complex need . The views of lived experience and the third sector will be critical to ensure that such arrangements reflect local needs and priorities.

5a Do you agree that Public Health Scotland should become a community planning partner under Part 2 of the Community Empowerment

(Scotland) Act 2015?

Yes

5b Do you agree that Public Health Scotland should become a public service authority under Part 3 of the Community Empowerment (Scotland) Act 2015, who can receive participation requests from community participation bodies?

Don't know

5c Do you have any further comments?

Give your comments below:

PHS should also become a statutory partner under the Community Justice (Scotland) Act 2016.

6a What are your views on the information governance arrangements?

Give your comments below:

n/a

6b How might the data and intelligence function be strengthened?

Give your comments below:

n/a

7a What suggestions do you have in relation to performance monitoring of the new model for public health in Scotland?

Give your comments below:

n/a

7b What additional outcomes and performance indicators might be needed?

Give your comments below:

n/a

8 What are your views on the functions to be delivered by Public Health Scotland?

Give your comments below:

n/a

9a What are your views on the health protection functions to be delivered by Public Health Scotland?

Give your comments below:

n/a

9a What are your views on the health protection functions to be delivered by Public Health Scotland?

Give your comments below:

n/a

9b What more could be done to strengthen the health protection functions?

Give your comments below:

n/a

10 Would new senior executive leadership roles be appropriate for the structure of Public Health Scotland?

Don't know

If so, what should they be?

11 What other suggestions do you have for the organisational structure for Public Health Scotland to allow it to fulfil its functions as noted in chapter 5?

Give your comments below:

n/a

12 What are your views on the proposed location for the staff and for the headquarters of Public Health Scotland?

Give your comments below:

n/a

13 Are the professional areas noted in Chapter 8 appropriate to allow the Board of Public Health Scotland to fulfil its functions?

Don't know

Give your comments below:

14a What are your views on the size and make-up of the Board?

Give your comments below:

n/a

14b How should this reflect the commitment to shared leadership and accountability to Scottish Ministers and COSLA?

Give your comments below:

see comments at 2 (b) above

15 What are your views on the arrangements for data science and innovation?

Give your comments below:

n/a

16 What are your views on the arrangements in support of the transition process?

Give your comments below:

The transition to a new model requires clarity and appropriate time to embed both the functions and structure of PHS, guidance on the expectations and duties on

local and other partners as well as on PHS itself. The proposed communications approach is important in ensuring a smooth transition. New bodies need time to

establish themselves prior to developing new plans etc.

17a What impact on equalities do you think the proposals outlined in this paper may have on different sectors of the population and the staff of Public Health Scotland?

Give your comments below:

This question implies that no equalities impact assessment has been done on this significant proposal. If this is the case then one should be undertaken to appropriately assess the impact on staff and the wider population.

It may also be appropriate to undertake a health inequalities impact assessment to cover human rights issues and other disadvantaged groups not named via equalities legislation. In particular, the impact on people in and on edges of justice could be considered as particular group . CJS would be happy to be involved in this work and /or to signpost organisations who may wish to be engaged.

17b If applicable, what mitigating action should be taken?

Give your comments below:

This would be dependent on the findings of any equalities impact assessment undertaken.

18 What are your views regarding the impact that the proposals in this paper may have on the important contribution to be made by businesses and the third sector?

Give your comments below:

n/a