PERFORMANCE QUARTERLY REPORT

OCTOBER – DECEMBER 2023

2023/24

Public Health Scotland

INTRODUCTION

PURPOSE

The purpose of this report is for scrutiny and assurance. It sets out:
- Public Health Scotland's performance against the outcomes it is seeking to influence
- Highlights and challenges the organisation has encountered
- The organisation's performance against a set of key indicators

DIFFERENCES IN THIS REPORT

Given the short period since both the last report and the proximity of this Board meeting to quarter end, some measures are not yet available (e.g. quarterly average time to recruit) and none of the external outcome measures has updated.

Unlike normal quarterly reports, this does not include a finance section. The board will receive a separate and standalone finance update at this meeting.

CHANGES TO QUARTERLY REPORTS

Since the last quarterly report and based on board feedback, we have changed how we present data on our media coverage, and we have included more information on red and amber milestones.

There are two changes from the last Board meeting we have not been able to implement in this report because of the short time between this and the last report. (1) The issue categories remain broad. We plan to segment these further for the next quarterly report. (2) We plan to strengthen how we assure the board that challenges identified in the report are being tracked and actioned.

HIGHLIGHTS

- The Scottish Vaccine and Immunisation Programme underwent a follow Gateway review in late 2023. The findings of this review were very positive. They paved the way for us to assume the lead role for the programme in Scotland from January 2024.
- We have equipped service leaders throughout the health and social care system by bringing online new dashboards allowing them to access our whole system modelling data. This will help them anticipate and prevent issues of flow in the health and care system, improving access to and the quality of the services the public receive.

- Our new partnership with One Parent Families Scotland will help us employ parents from low-income background who are more at risk of living in poverty. This is an example of us being the change we want to see in the public sector: using our role as an employer to reduce health inequalities
- We were visited by political representatives of the Scottish Government and COSLA in November 2023 for our Annual Review. Both the Minister for Public Health and Councillor Kelly spoke positively about the visit.
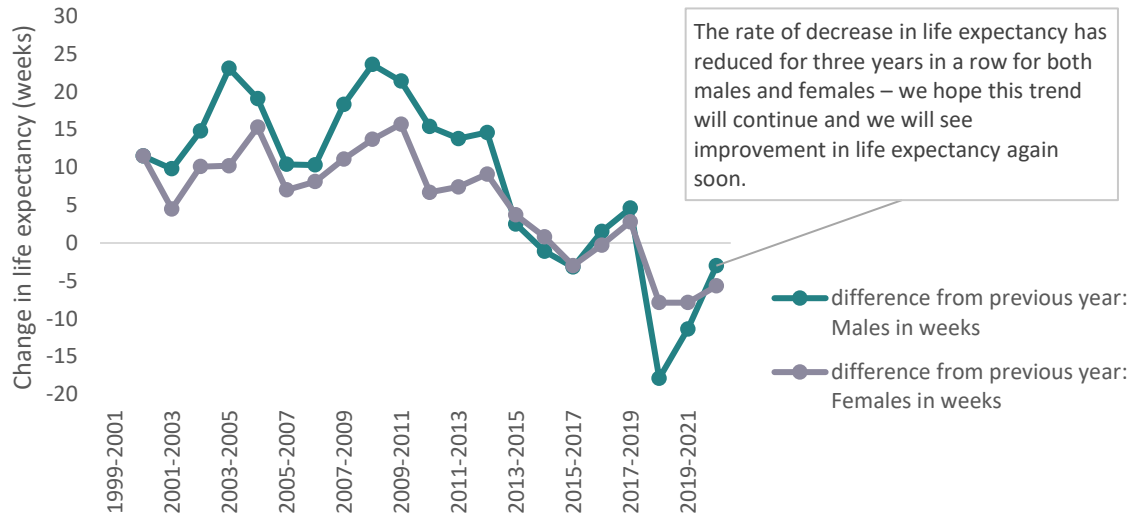- Our staff conference successfully brought more PHS staff together than ever before.

CHALLENGE

- The main challenge this quarter has been planning in a difficult financial environment. There have been two aspects this challenge. The first is the overall likely financial position. This will prompt us to make difficult decisions about priorities. The second is that the context against which we have to plan is changing, for example, we received planning guidance from NHS Scotland in December 2023 with a promise of more specific guidance early in 2024.
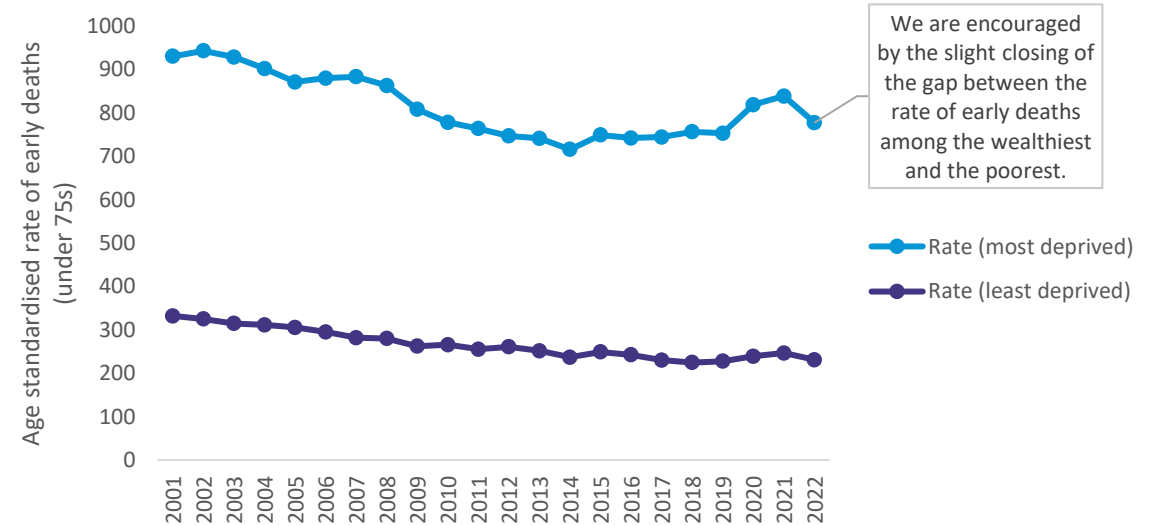
VISION: A SCOTLAND WHERE EVERYBODY THRIVES

**Life expectancy fell in 2020-2022 for the third consecutive period**

Change in life expectancy (weeks)

The rate of decrease in life expectancy has reduced for three years in a row for both males and females – we hope this trend will continue and we will see improvement in life expectancy again soon.

- difference from previous year: Males in weeks
- difference from previous year: Females in weeks

The difference between the death rates in the poorest and the wealthiest narrowed in 2022

Age standardised rate of early deaths (under 75s)

We are encouraged by the slight closing of the gap between the rate of early deaths among the wealthiest and the poorest.

- Rate (most deprived)
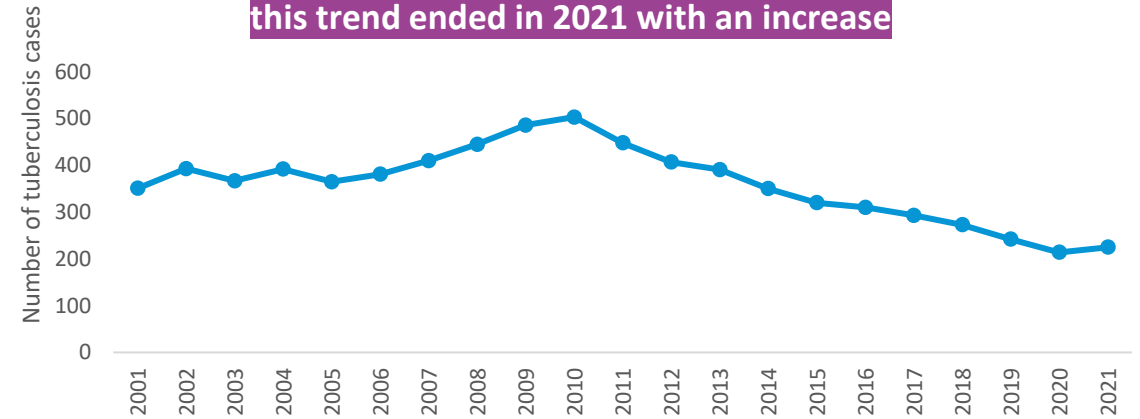- Rate (least deprived)
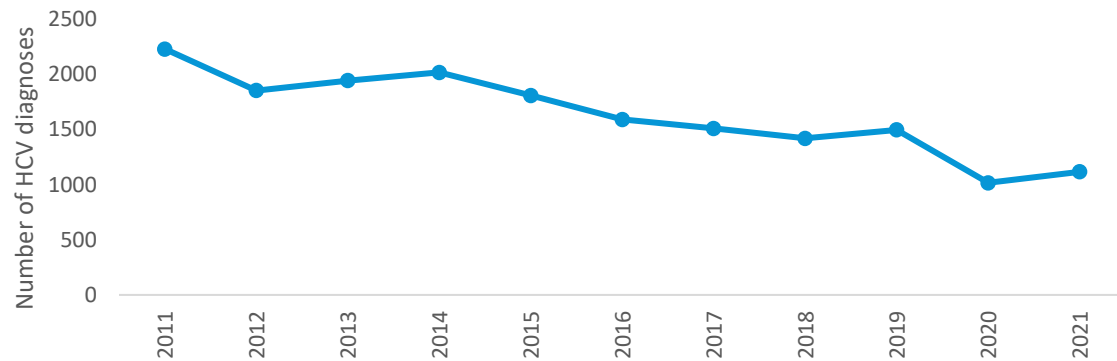
PREVENT DISEASE: OUTCOMES

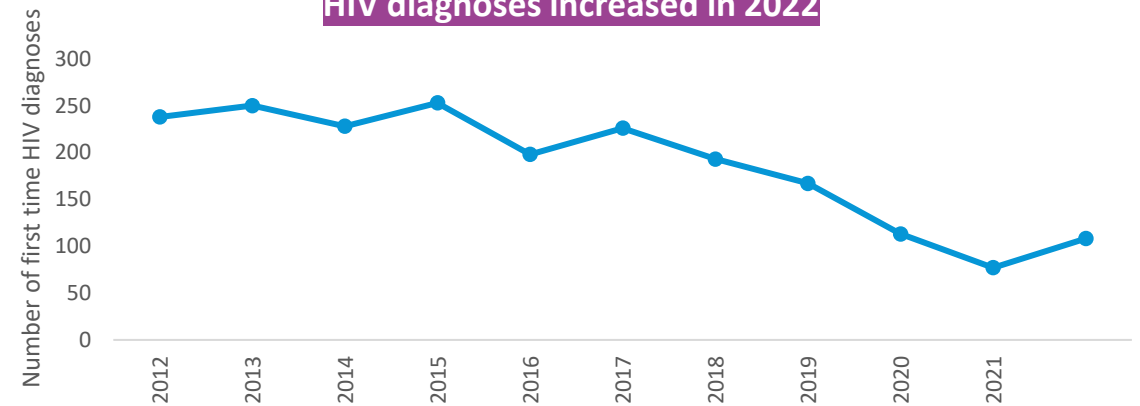**Although overall levels remain high, rates of uptake dipped for key vaccines**
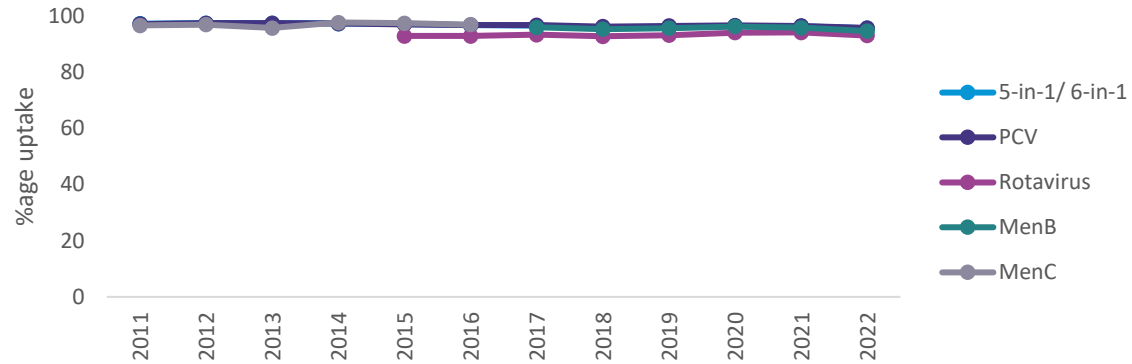
While the number of TB cases has been falling since 2010, this trend ended in 2021 with an increase

The number of new Hep C diagnoses rose in 2021 compared to 2020

After falling for five years in a row, the number of first time HIV diagnoses increased in 2022

PREVENT DISEASE: HIGHLIGHTS AND CHALLENGES

HIGHLIGHT | **SURVEILLANCE SYSTEMS**

Work is progressing on modernising our infectious disease and environmental surveillance/ monitoring systems. Following delays, NSS DAS have provided a business analyst who will work with PHS to define the business needs and requirements ahead of any planned major refresh of the key system ECOSS; an initial scoping workshop has taken place to plan the work over the next six to nine months.

Progress has been made against understanding the legacy surveillance databases (over 35) and DDI colleagues are leading on the review of these which will be prioritised for modernisation.

CHALLENGE | **PLANNING AND REMOBILISING**

A key challenge is continuing to remobilise our health protection services in what is emerging to be a challenging financial context and, in some cases, a changed pattern of incidents and outbreaks since before the pandemic.

We are addressing this through restructuring some of our baseline funded health protection teams and by prioritising urgent incidents and outbreaks in order to provide national health protection leadership to incidents and outbreaks.

The impact on this is that planned work has been paused and will only restart once resource is available.

HIGHLIGHT | **VACCINATION AND IMMUNISATION**

The successful Gateway rating and agreement for us taking responsibility from 8 January 2024 for the Scottish Vaccination and Immunisation Programme (SVIP). New Governance structure for SVIP established, including appointment of a Senior Responsible Owner (SRO).

We now have lead responsibility for Vaccination and Immunisation, including all vaccination and immunisation programmes and appointment of a new PHS Head of Division as SRO for Scotland. We can now progress with development of Vaccination and Immunisation Strategy for Scotland.

We have put clear governance and accountability now in place with clarity of roles and responsibilities of Scottish Government, PHS and NHS Boards.
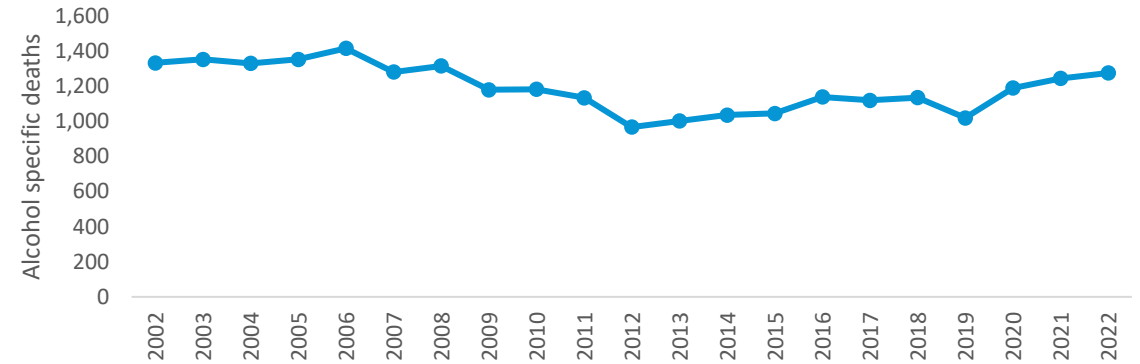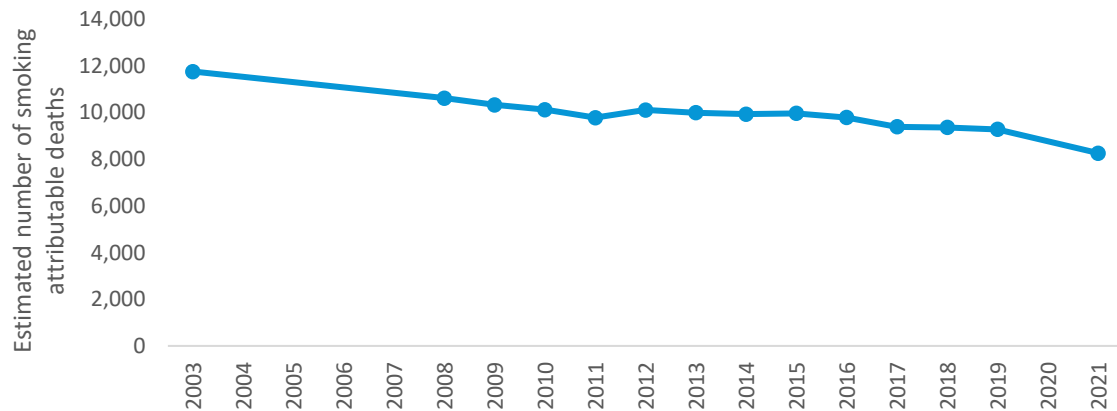
PROLONG HEALTHY LIFE: OUTCOMES

The number of drugs deaths fell in 2022 compared to 2021 but still remain high compared to other countries
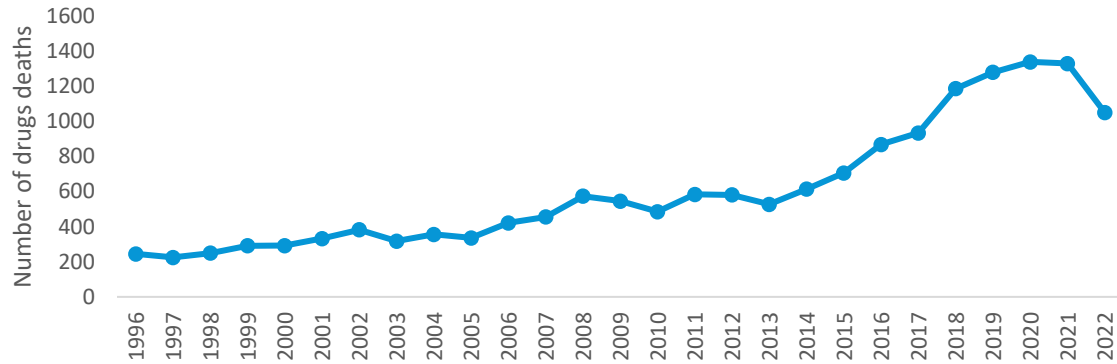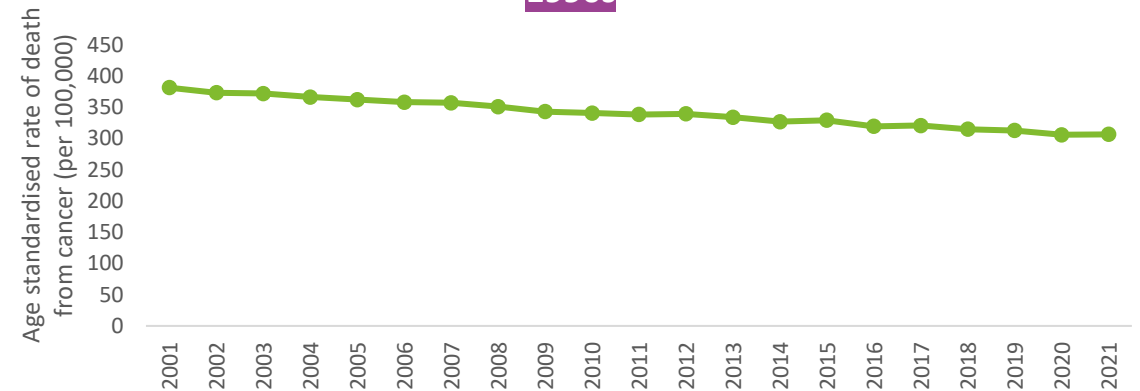
Alcohol deaths increased for the fourth year in a row, despite the positive impact of Minimum Unit Pricing

Smoking-attributed deaths have been falling steadily
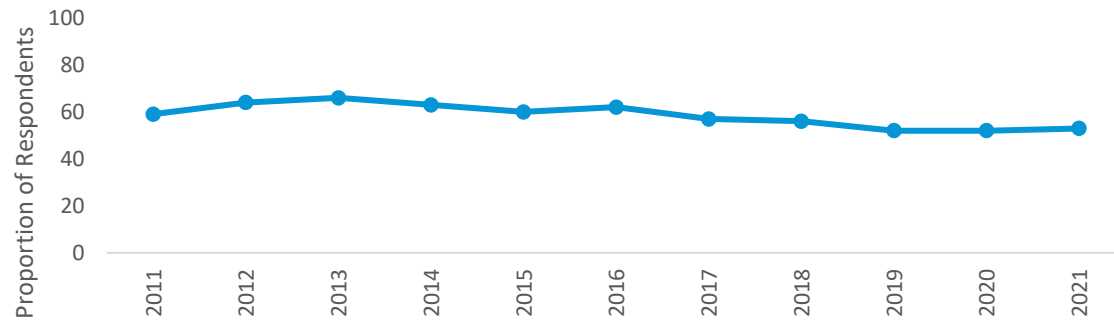
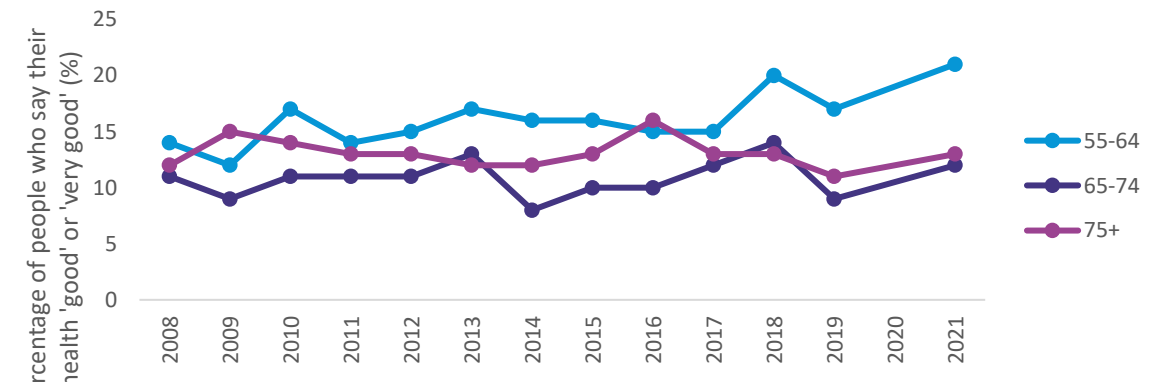**The rate of cancer deaths has been falling steadily since the 1990s**

PROLONG HEALTHY LIFE: OUTCOMES

The proportion of people who say they are very or fairly satisfied with the quality of public services has been gently declining

The perceived health of 55-64s seems to be improving but there is no strong trend among over 65s

PROLONG HEALTHY LIFE: HIGHLIGHTS AND CHALLENGES

HIGHLIGHT | **Health & Social Care Whole System & Winter Dashboard**

As the health and care system faces winter pressures, we have supported strategic decision-making by presenting public service leaders with a clear summary of current pressures across the system.

In November we rolled out the Whole System & Winter Dashboard to Executive Level users. The initial feedback has been excellent feedback.

The dashboard provides weekly 'near real time' overviews for key indicators and complements existing tools that provide more detailed data and analysis. This strengthens leaders' decision-making by giving them rapid insight into the current situation, manage risks and anticipate future issues.

This forms part of our **Creating Insights from Data** work, in collaboration with NSS and Scottish Government.

HIGHLIGHT | **New research opportunities through TELEPORT project**

We are collaborating with the University of Edinburgh and researchers at Swansea University in addressing challenges that researchers experience in accessing data to conduct national-scale research.

The TELEPORT project is a pilot project to connect 'Trusted Research Environments' (TREs), which will mean researchers can access data via one interface. This enables researchers to gain a comprehensive understanding of scientific outputs at a national level.

Successes so far include:
- development of a platform to sit within the TREs which will provide a gateway to 'federated data access'
- establishment of strategic partnerships with custodians of national-level data in Wales and Scotland
- facilitation of access to a significantly larger sample size towards national representability public involvement and engagement throughout its development, ensuring solutions aligned with public interests and values.
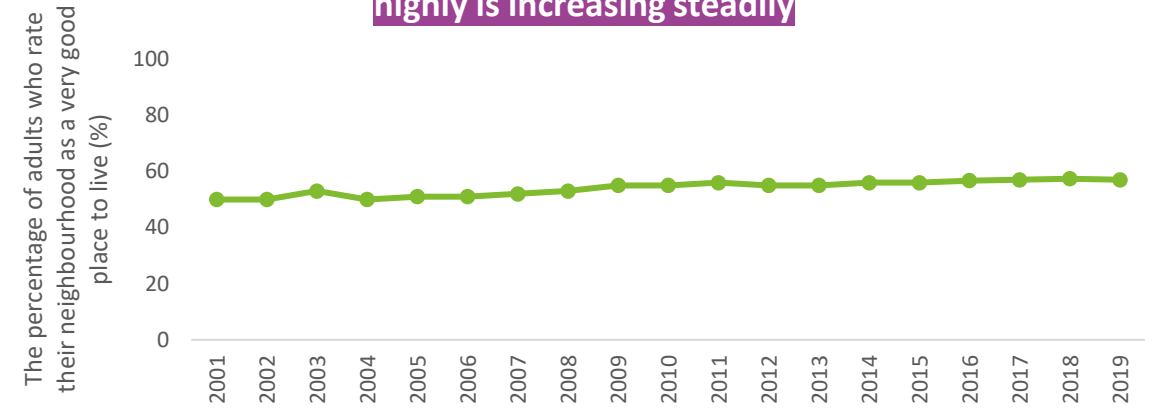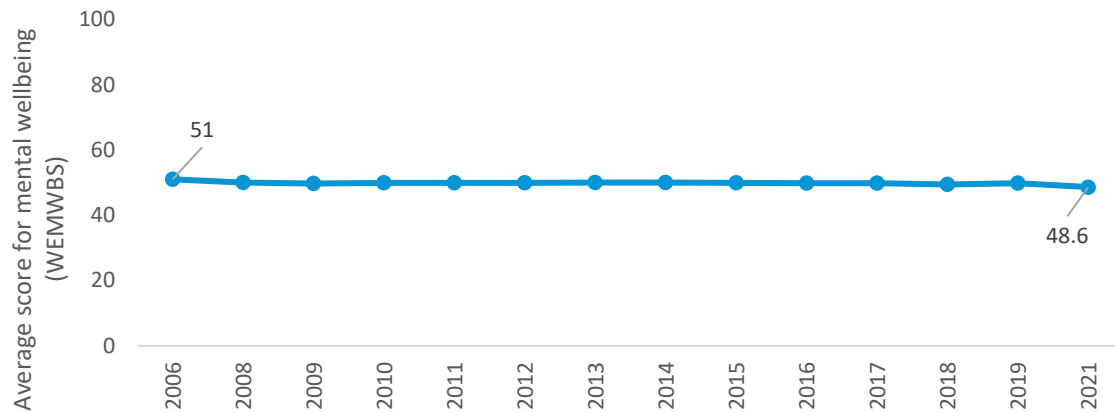
PROMOTE HEALTH AND WELLBEING: OUTCOMES

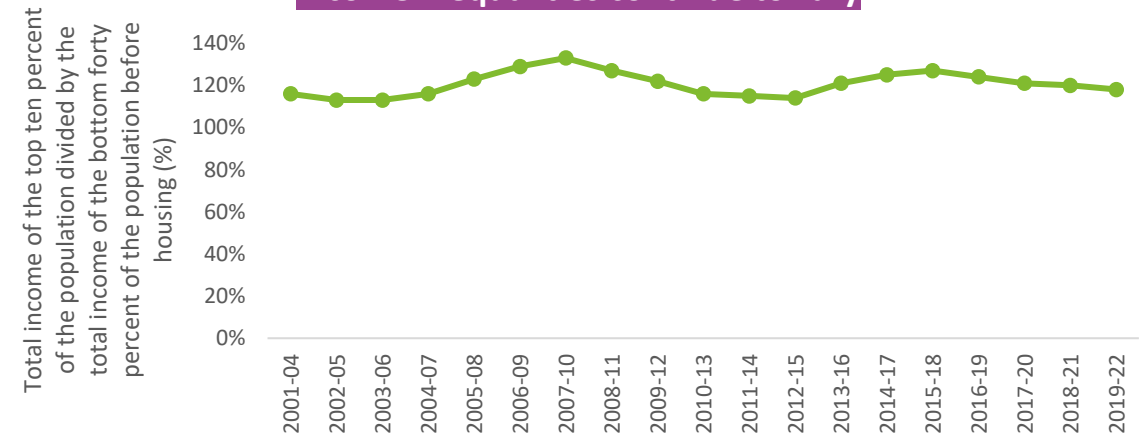The number of children living in relative poverty seems to be relatively constant since 2015/16
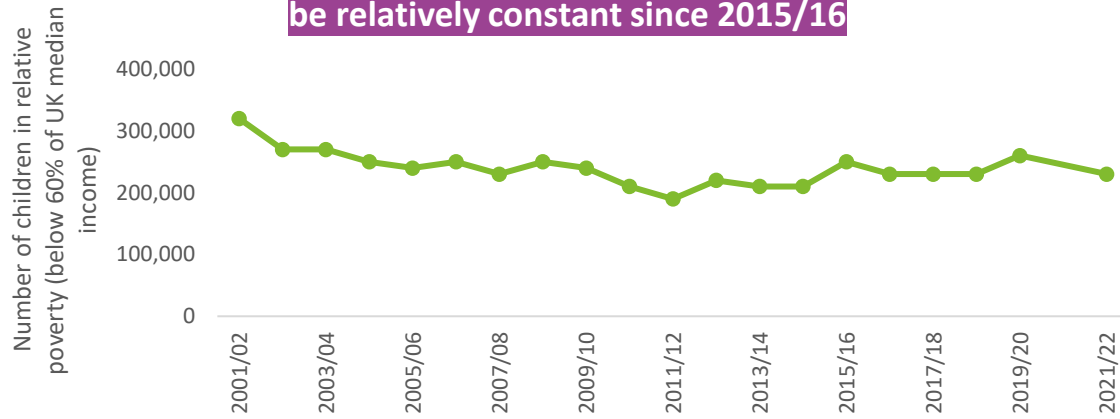
The proportion of people who rate their neighbourhood highly is increasing steadily

Average mental wellbeing has declined slowly

Income inequalities continue to vary

PROMOTE HEALTH AND WELLBEING: HIGHLIGHTS AND CHALLENGES

HIGHLIGHT | WHO Collaborating Centre for Health Promotion

Collaborating between countries helps us learn lessons from other nations. One way in which we do this is by being a World Health Organization (WHO) designated collaborating centre.

In October 2023, our status WHO Collaborating Centre for Health Promotion and Public Health Development was renewed for the next four years.

With over 40 years of continuous designation, our centre is one of the world's oldest WHO Collaborative Centres for child health. Our focus is on developing, monitoring, and evaluating child and adolescent public health policy and developing evidence-informed actions.

Current work focuses on developing standards and actions for the upcoming European Child and Adolescent Health Strategy. This is due to go to Health Ministries across Europe for consultation in early 2024, with the ambition that it will be adopted for action at national levels in September 2024. We continue highlighting work in Scotland and access international support and collaboration where possible.

HIGHLIGHT | Partnership with One Parent Families Scotland

We have entered a Partnership Agreement with One Parent Families Scotland (OPFS) to collaborate on the co-design and delivery of a parental employment project for low-income parents.

We are aiming welcome a first cohort of parents into role by the end of March 2024, and will collate learning from this work and from other NHS Boards who have similar schemes to inform roll-out of similar pathways across all Boards.

This will help to generate additional evidence on how NHSScotland can use it position as an anchor approach to widen access to fair work for groups at greatest risk of poverty.

The project will contribute to strengthening how we use our role as an employer to improve health as well as diversity and inclusion and supporting single parents to access opportunities in the organisation.

CHALLENGE | Partnership and Prioritisation

The current societal context around cost-of-living crisis combined with the significant challenges on public sector finances means that the gap between the need for action on the wider determinants of health and wellbeing and the capacity of public services to respond to that need is growing.

This context is replicated at an organisational level and a key challenge right now is making decisions about where we focus our resource in 24/25, ensuring we are adapting what we are doing so it is both realistic and impactful within the current delivery context. Ongoing engagement with key stakeholders is critical to doing this well. Another key part of managing this dynamic will be strengthening our processes within programmes for responding to in-year requests and being able to adapt/pivot appropriately so that we have flex to respond to new in-year priorities in a way that doesn't leave teams overloaded and/or confused about direction of travel.

TRANSFORMING PHS: HIGHLIGHTS AND CHALLENGES

HIGHLIGHT | PHS Staff Conference

PHS held our first ever in person Staff Conference with over 600 members of staff attending and key stakeholders such as Scottish Government, COSLA. Attendees enjoyed a full programme of speakers, a musical performance, workshops, panel sessions and opportunities to network.

Our keynote speaker, Professor Sir Michael Marmot set the tone for the day and expertly summarised the impacts of more than a decade of UK austerity on health. Despite the current challenges such as the cost-of-living crisis, Prof Marmot offered hope for the future, showcasing how a number of regional alliances had come together to form 'Marmot towns'.

We are now taking forward discussions on the potential for Scotland to become a 'Marmot country', in partnership with the Scottish Government, local government and Directors of Public Health. Work is underway to analyse the evaluation of the conference. Colleagues in Strategy, Governance and Performance will use this, alongside analysis of our Speaker Series to inform plans for staff and stakeholder engagement.

HIGHLIGHT | Annual Review

We had a successful Annual Review meeting with the Minister for Public Health, Ms Minto, and Councillor Kelly, COSLA Spokesperson for Health and Social Care. A huge amount of effort from across the organisation was made to prepare for the event and contributions made on the day.

The Annual Review is a key part of how NHS Boards are held to account for the significant public investment made in them. This was demonstrated on the day with showcases of our work on child poverty, winter planning and blood-borne virus elimination campaigns.
We also answered questions posed by the public, the Minister and Councillor through the public element of our session which was. The Minister and Councillor were both very impressed with our work and keen to hear more about it and have asked for more frequent contact with PHS.

We will be issued an Annual Review letter from our sponsors and will continue to progress the actions addressed in the letter. Next year, we will look forward to an even fuller annual review with more time for the Minister and Councillor to hear about our work and with members of the public able to join in person.

CHALLENGE | Covid Public Inquiry

Short-term demands on PHS from ongoing inquiries – most notably the UK Covid Public Inquiry and the Crown Office/Police Scotland inquiries into care home deaths – continue to be substantial. Moreover, medium-term demands from these sources as well as the Scottish Covid Public Inquiry, remain difficult to predict up to at least 2026.
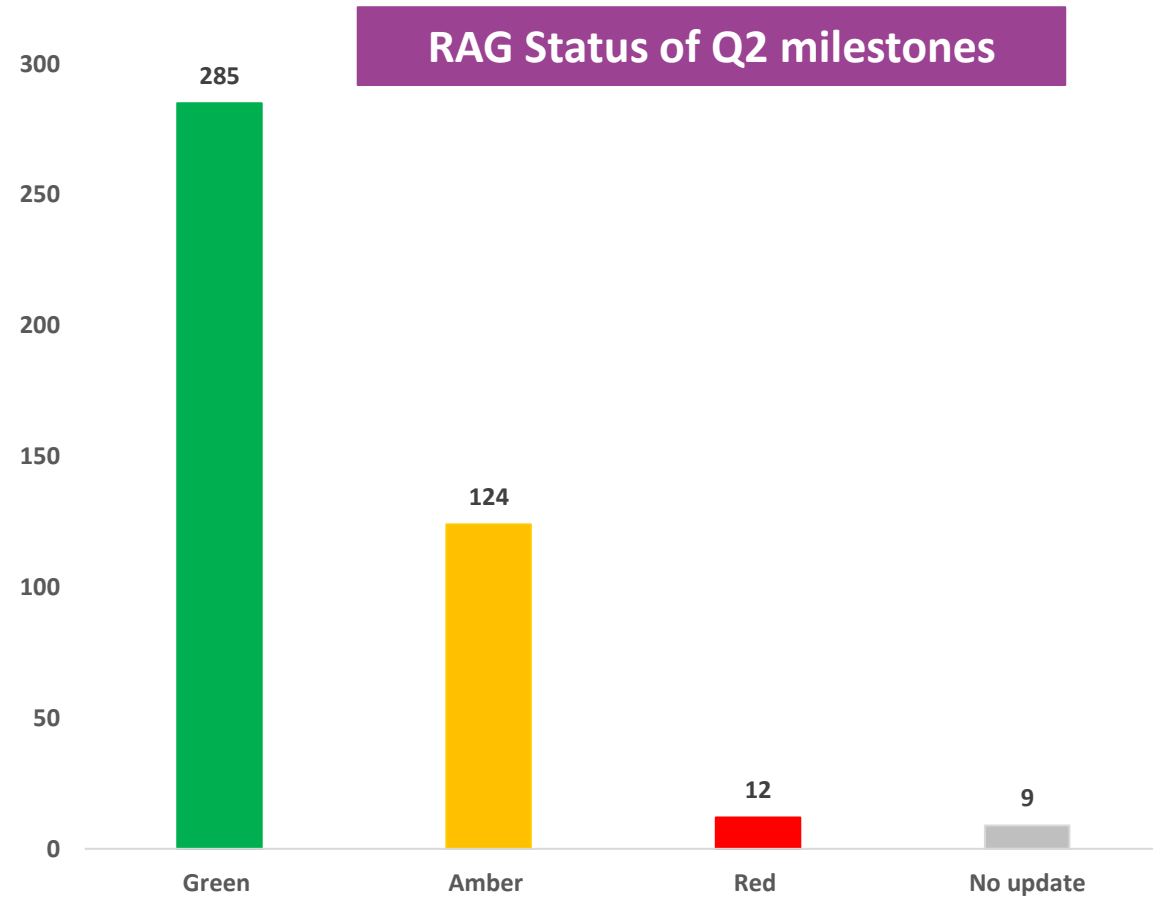
The Public Inquiries Programme has delivered effective PHS engagement with Module 2a of the UK inquiry (Scottish decision making), culminating with the appearance of three PHS colleagues – Scott Heald, Nick Phin and Jim McMenamin – at the public hearing in Edinburgh in January.

We will therefore continue to manage pressure on the most impacted parts of PHS, most notably senior colleagues in CPH. To do this we use mitigating strategies such as using locum support for some colleagues and improving efficiencies in how we review and gather information in engaging with the inquiries. An exercise is ongoing to map time committed by PHS colleagues to this work, to help better manage future 'supply against demand'.
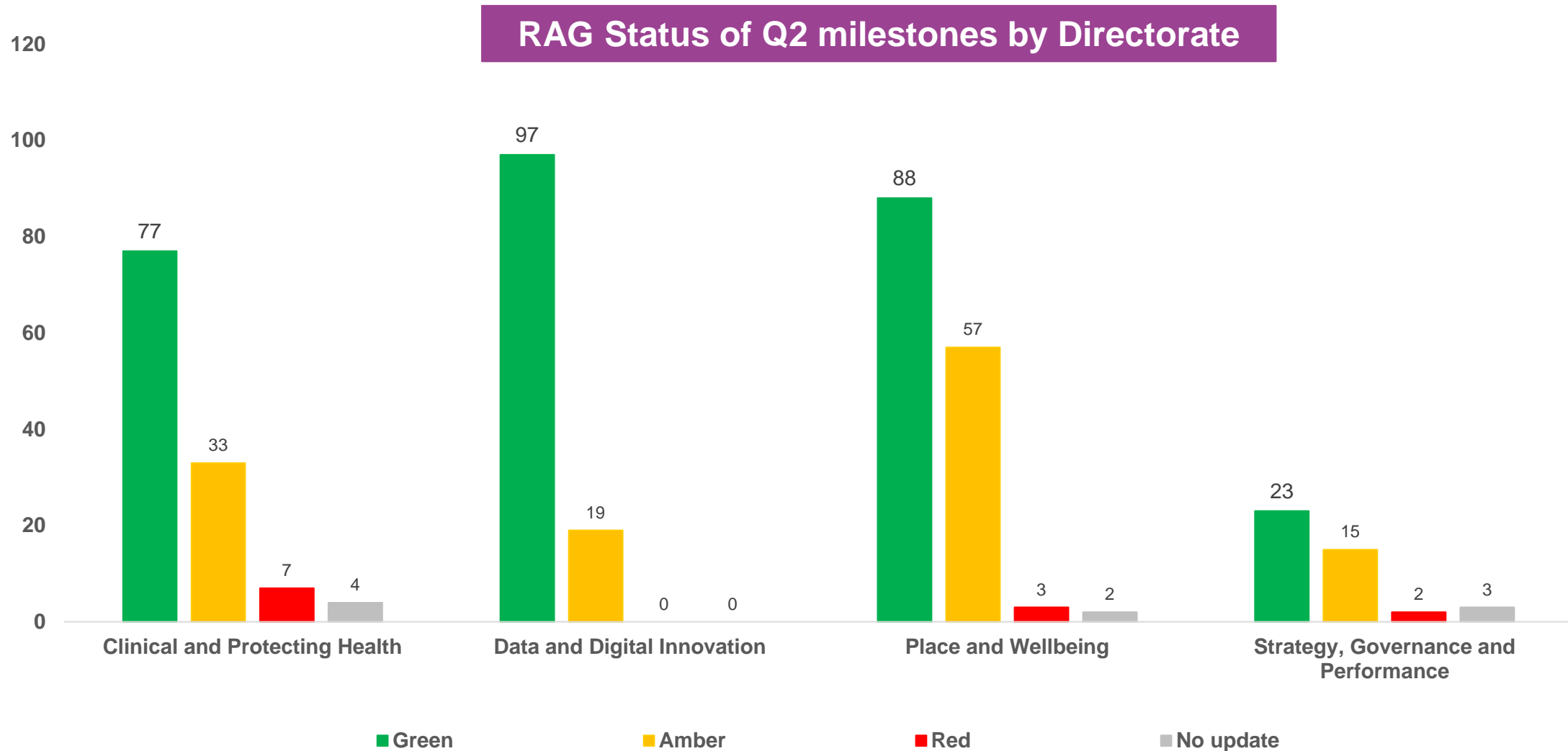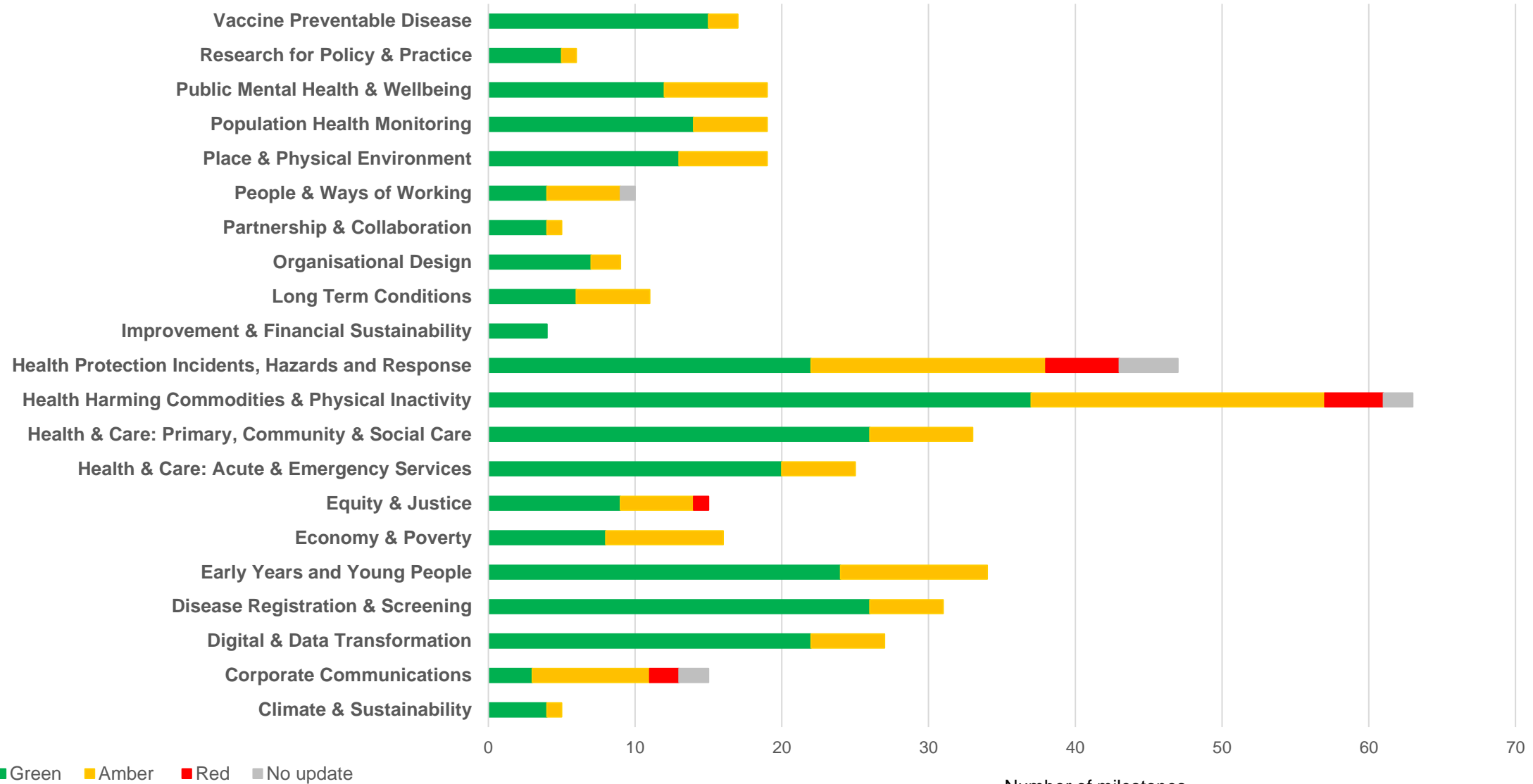
ANNUAL DELIVERY PLAN PROGRESS

CATEGORY	No.
No of Programmes	21
No of Deliverables	323
No of Milestones	1688
Q1 Milestones	478
Q2 Milestones	430
Q3 Milestones	414
Q4 Milestones	366

RAG Status of Q2 milestones

Green	Amber	Red	No update
285	124	12	9

RAG STATUS OF MILESTONES BY DIRECTORATE

RAG Status of Q2 milestones by Directorate

	Green	Amber	Red	No update
Clinical and Protecting Health	77	33	7	4
Data and Digital Innovation	97	19	0	0
Place and Wellbeing	88	57	3	2
Strategy, Governance and Performance	23	15	2	3

RAG STATUS OF MILESTONES BY PROGRAMME

Green   Amber   Red   No update

Number of milestones

REASONS FOR INCOMPLETE MILESTONES
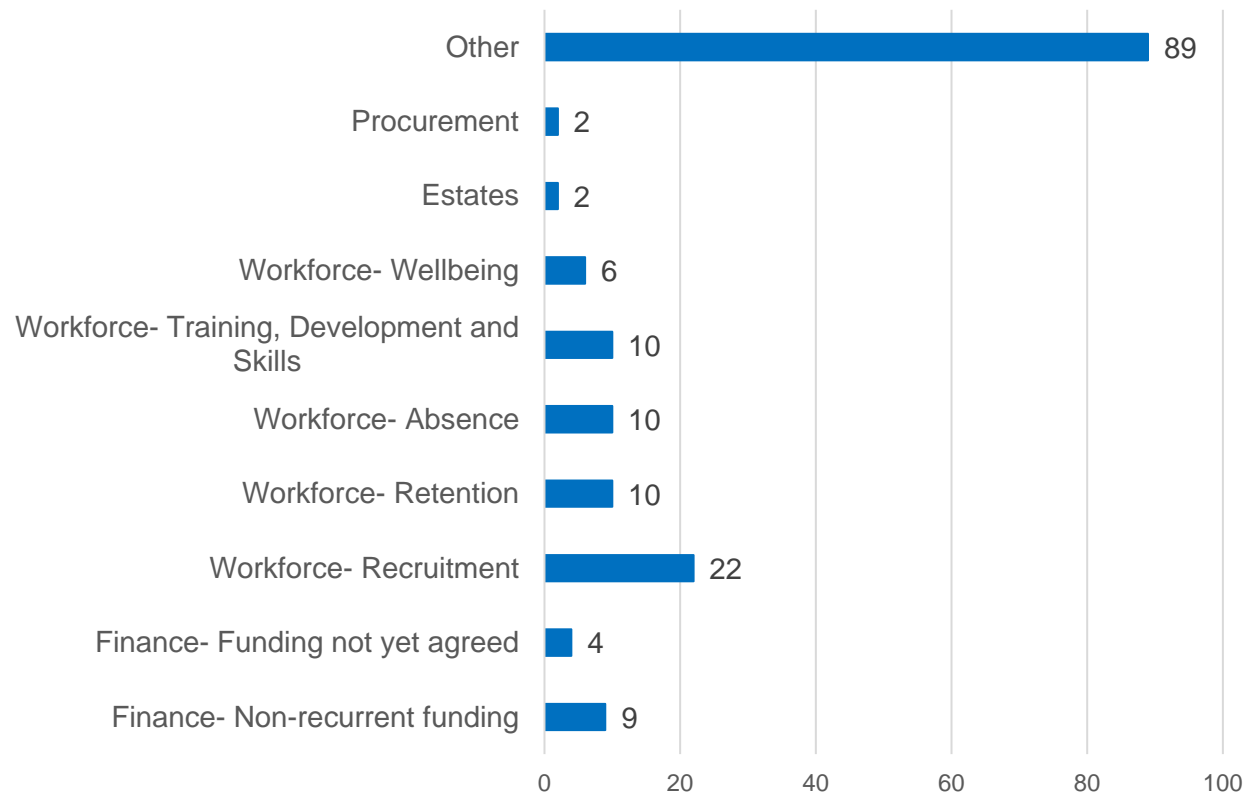
The main reasons listed as 'Other' include:
- Capacity issues
- Competing priorities
- Dependence on others both internal and external
- IT issues/developments
- Work taking longer than expected

This information relates to the 135 milestones recorded as amber or red.   More than 1 reason can be given for non-delivery of each milestone.
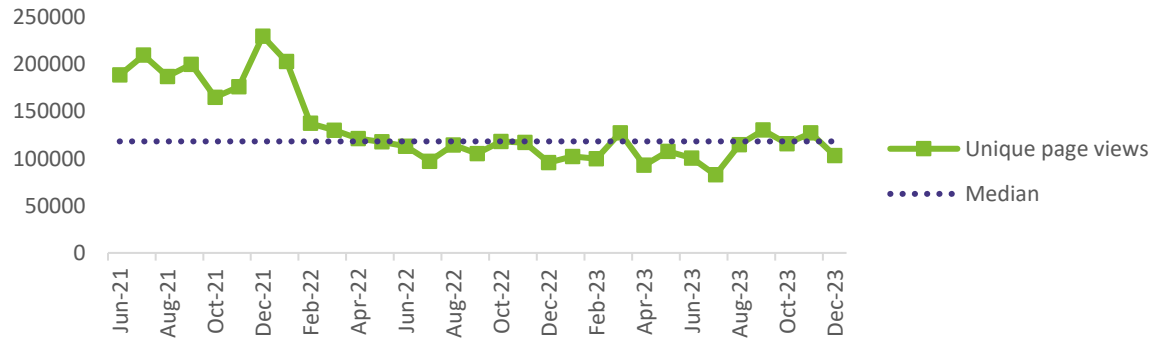
Impact on Programme of Q2 Red Milestones

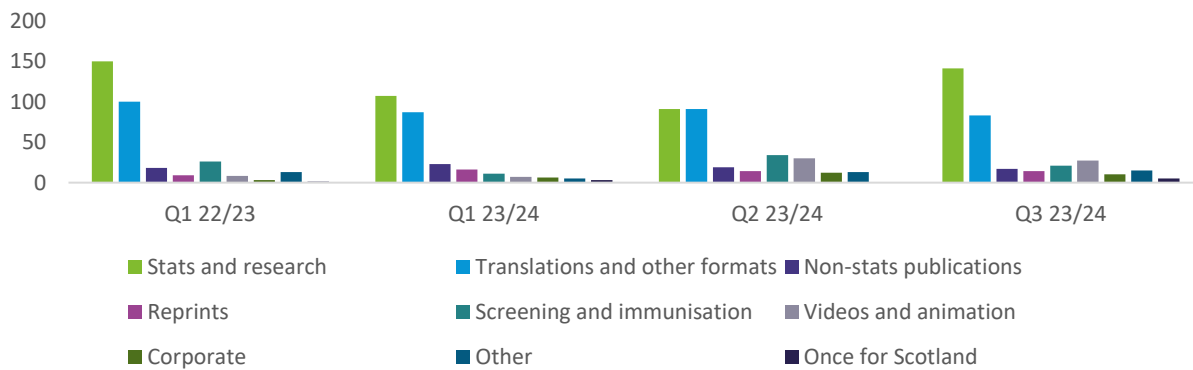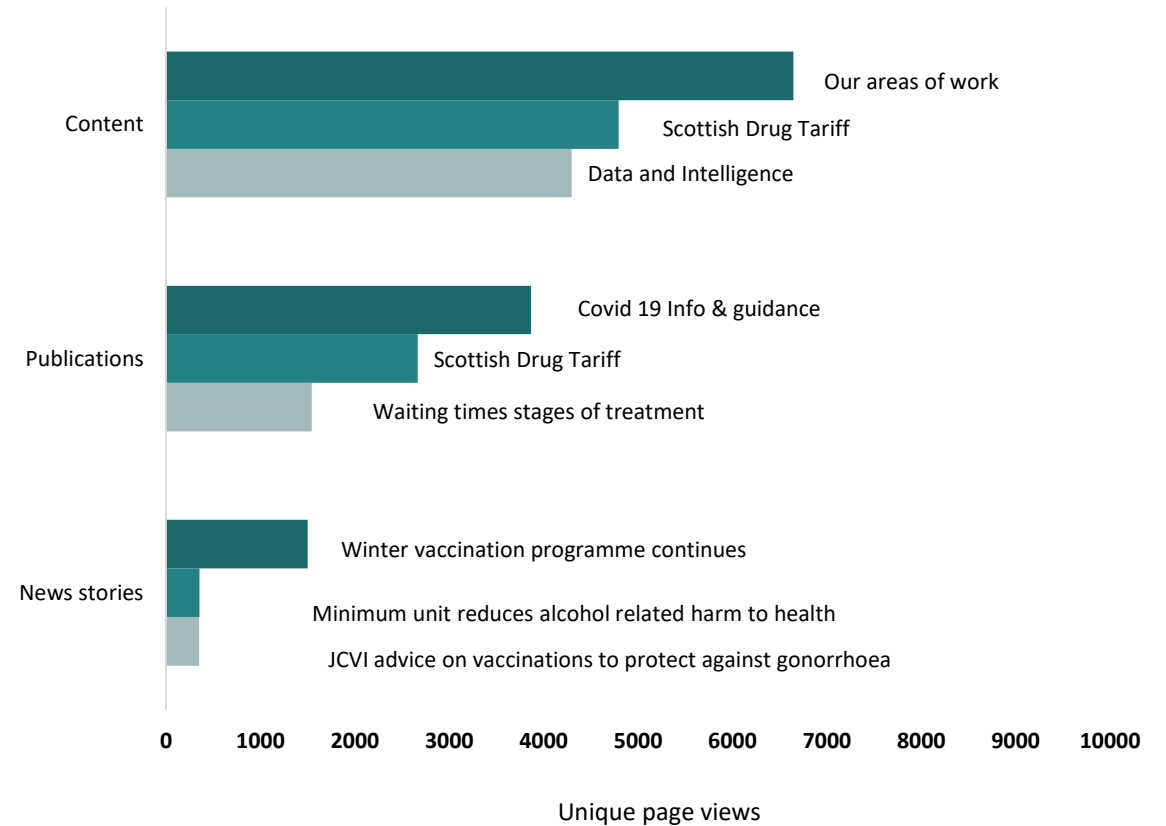| Programme	Red Milestone relates to:	Impact
Corporate Communications	Develop The Spark intranet	Minimal impact on the overall programme because considerable work is already underway in terms of internal communication and routine content updates to The Spark. Plan is to have the full internal communications strategy and roadmap for improvements by the end of Q3.
Equity & Justice	Input to Police Scotland Strategy	Milestone missed because of a delay with our partners. This has a low impact on the programme because we are progressing other elements.
Health Harming Commodities & Physical Inactivity	Alcohol Brief Interventions (ABI)	Delayed due to staffing and other priorities. The ABI is under review by consultants of public health medicine and following this a decision on future will be made.
	Vaping Related (Hospital) Statistics	No significant impact as publication has been rescheduled for May 2024 to allow further time for internal review and consideration. An internal position paper is planned for early 2024 to outline revised position.
Health Protection Incidents, Hazards and Response	Pathogen Genomic Sequencing Service	Delay is caused by approval of the business case pending from SG. Genomics service staff are on Fixed Term Contracts to the end of March 2024. As a result, we will have to give them notice that their contract may not be extended risking the loss of highly specialised experienced staff and therefore affecting service delivery.
	GIZ surveillance activities	Other urgent priorities have delayed this work. Remaining vacancies awaiting budget confirmation before approval to taking them forward.
	One approach to zoonotic infection	Vacancies, unplanned absence and an increase in work due to a surge in response activity (including incident response) have halted progress. As a result, all non-urgent response work is on hold.
	Fit for Travel and TRAVAX products	Insufficient staff resources to deliver the Q2 milestone. This will have a significant impact in this area. We are working with Scottish and UK partners to find a way forward and optimise travel health services in Scotland.
	Public Health Microbiology	Our IT development partner is unable to support this work. The Genomics Service IT/data infrastructure are not resilient due to delays in strengthening the IT infrastructure affecting sample/data flow which impacts service capacity, quality and outputs. This means service user and/or quality assurance requirements are not being fully realised.

WEBSITE

Since the peak of 2020/21, our traffic has achieved a normal level

Legend: Unique page views, Median

Statistics and research continue to be our most common publications

Legend: Stats and research, Translations and other formats, Non-stats publications, Reprints, Screening and immunisation, Videos and animation, Corporate, Other, Once for Scotland

X-axis: Q1 22/23, Q1 23/24, Q2 23/24, Q3 23/24

Most popular pages of www.publichealthscotland.scot by content type

Content:
- Our areas of work
- Scottish Drug Tariff
- Data and Intelligence

Publications:
- Covid 19 Info & guidance
- Scottish Drug Tariff
- Waiting times stages of treatment

News stories:
- Winter vaccination programme continues
- Minimum unit reduces alcohol related harm to health
- JCVI advice on vaccinations to protect against gonorrhoea

Unique page views

MEDIA COVERAGE

The number of mentions of us in the media peaked during COVID-19

— Media Mentions ⋯⋯ Median
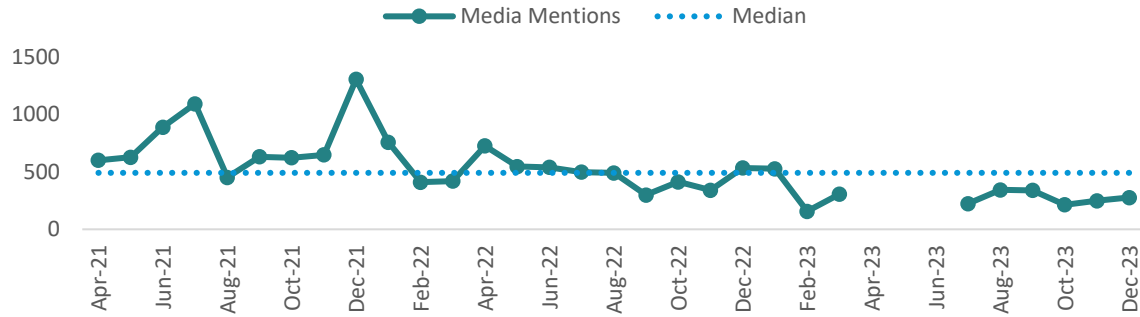
As coverage of us has declined, the proportion of positive coverage has increased

— Positive ⋯⋯ Positive Median
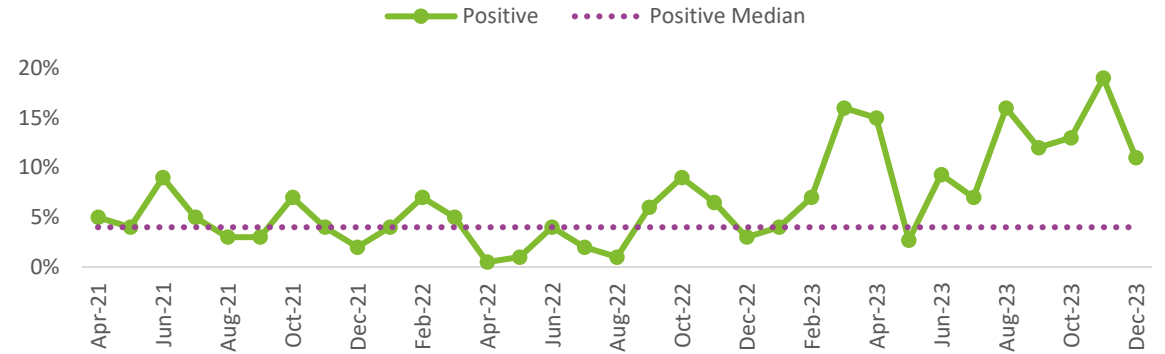
At the same time, the percentage of neutral coverage of us (probably linked to our statistics) has fallen

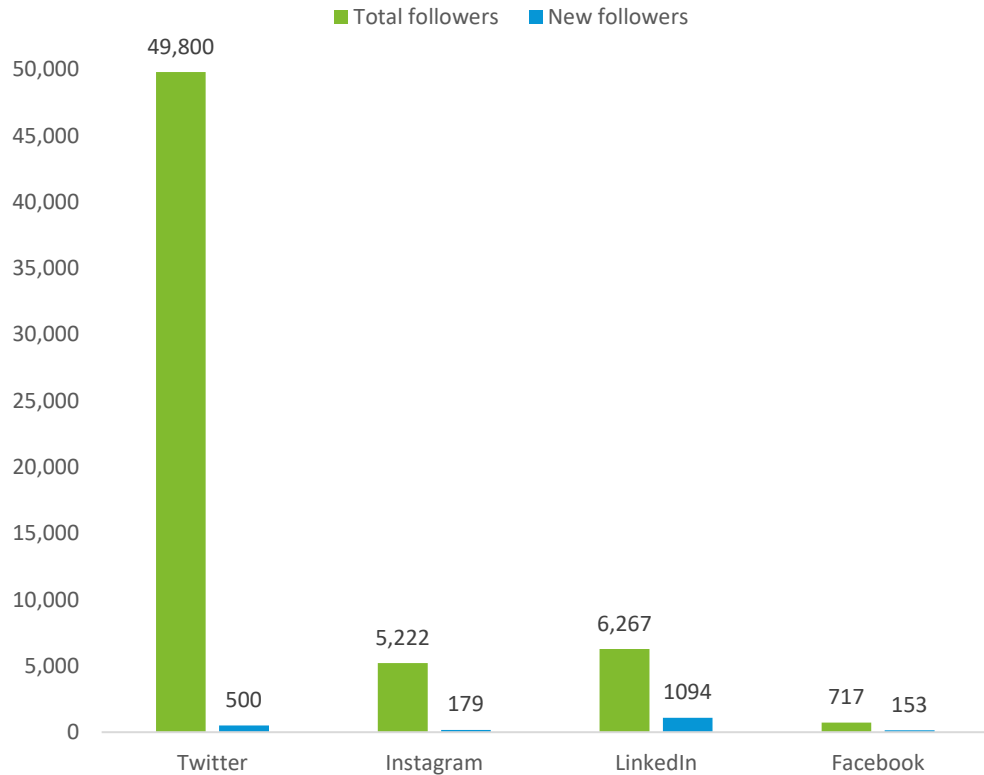— Neutral ⋯⋯ Neutral Median
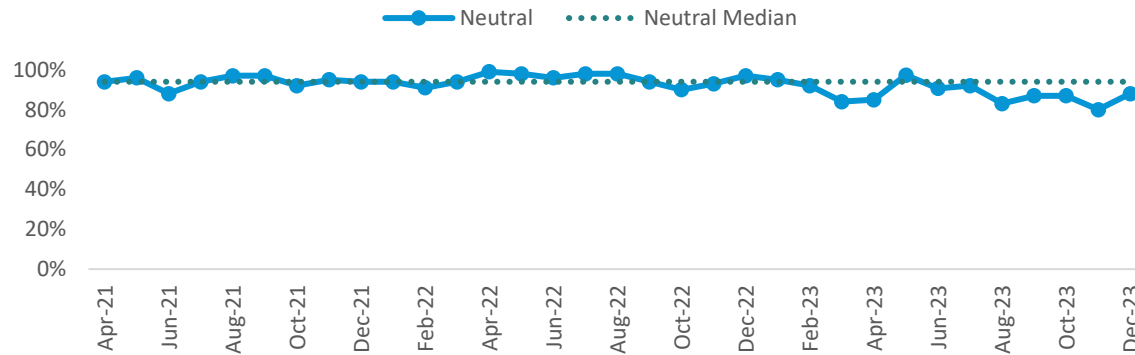
Negative coverage of us in the media is consistently low

— Negative
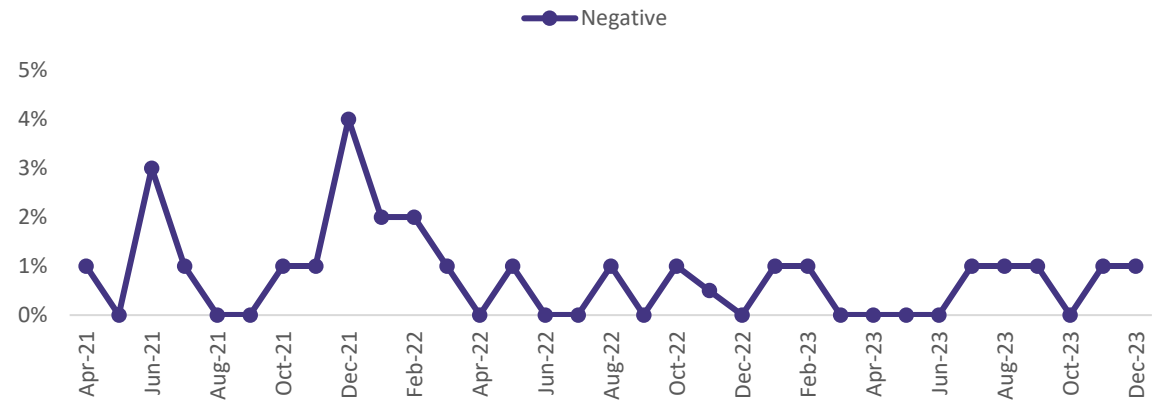
SOCIAL MEDIA

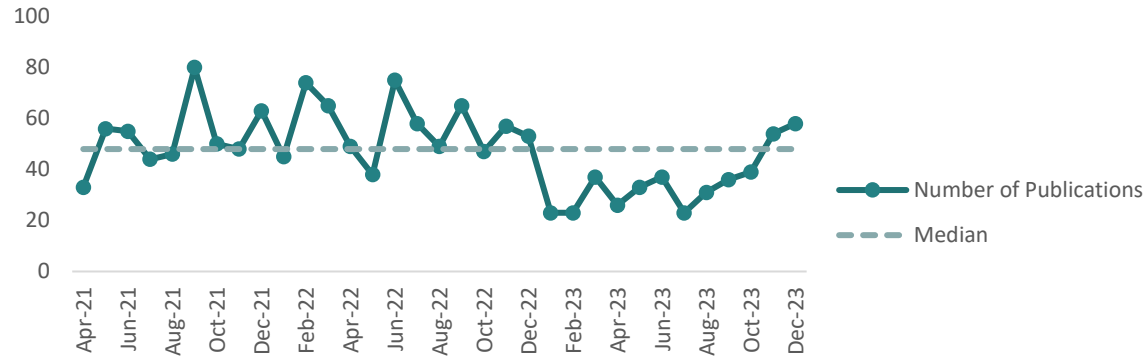## Twitter (X) is the social media platform that offers us the greatest reach

Total followers ■ New followers ■

Platform	Total followers	New followers
Twitter	49,800	500
Instagram	5,222	179
LinkedIn	6,267	1094
Facebook	717	153

Story about World Mental Health Day had the greatest reach on social media this quarter

Platform	Story	Series1
Twitter	World Mental Health Day	
Twitter	Poverty is a public health & human rights issue-Blog	
Twitter	Update on new synthetic drugs	
Instagram	Young people encouraged to take up vaccines at school	
Instagram	Police Scotland 'That Guy' campaign	
Instagram	Sign Protect campaign	
LinkedIn	Event: Sir Michael Marmot speaking	
LinkedIn	Event: Annual review post promo	
LinkedIn	Learning; Child Poverty Learning Hub available	
Facebook	Don't let your protection fade	
Facebook	World Diabetes Day	

■ Series1

STATISTICAL GOVERNANCE & ADVERSE EVENTS

Number of Statistical Publications Released

Number of Open Data Live Resources

Statistical Publications

We published 151 statistical publications during October-December and the number of live data resources increased to 850 in December 23.

As the graph above illustrates, there has been a sustained reduction in the number of statistics we have published since January 2023. This is because of COVID-19-related publications coming to an end. During the pandemic we saw an increase of approximately 30% in publication series outputs compared to our legacy organisations. At the peak of reporting during the pandemic, almost a quarter of PHS publications were in direct response to COVID-19. As these publications have been consolidated or discontinued, we have seen a reduction in the number of statistical publications.

Adverse Events

We define adverse events as a Category 1 Information Governance event, Clinical Governance event, or an event requiring reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulation (RIDDOR) 1995.

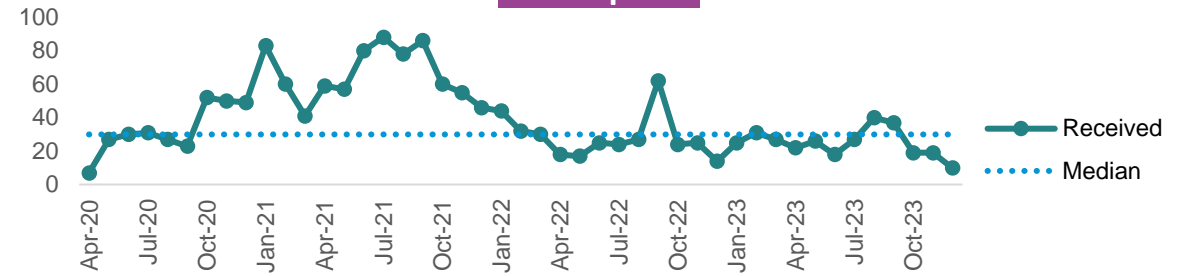During the period Oct-Dec '23 there we none of these events.

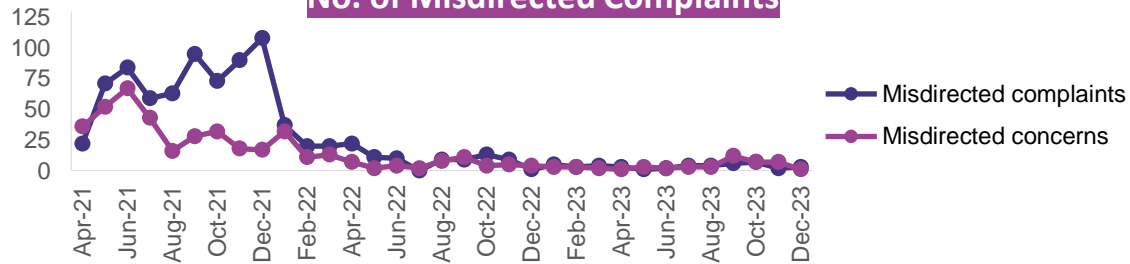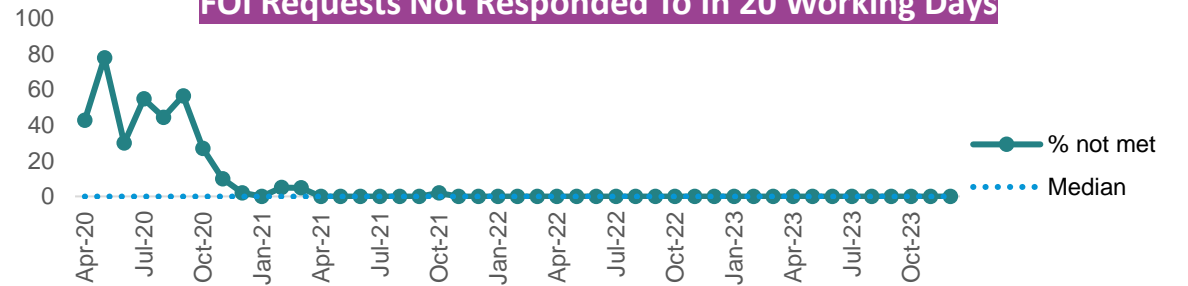# COMPLAINTS AND FREEDOM OF INFORMATION

No. of Complaints

Legend: Complaints, Concerns

FOI Requests

Legend: Received, Median

No. of Misdirected Complaints
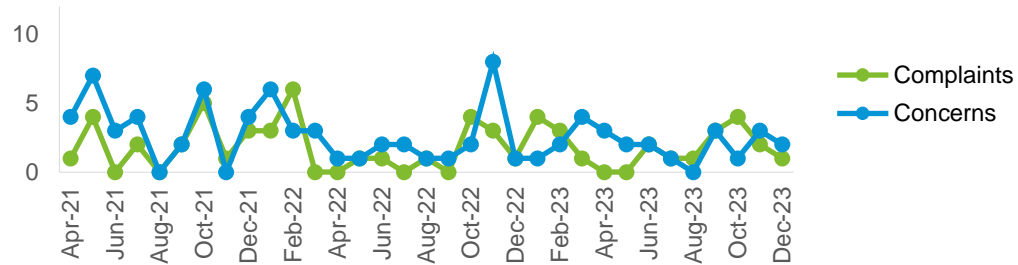
Legend: Misdirected complaints, Misdirected concerns

FOI Requests Not Responded To In 20 Working Days
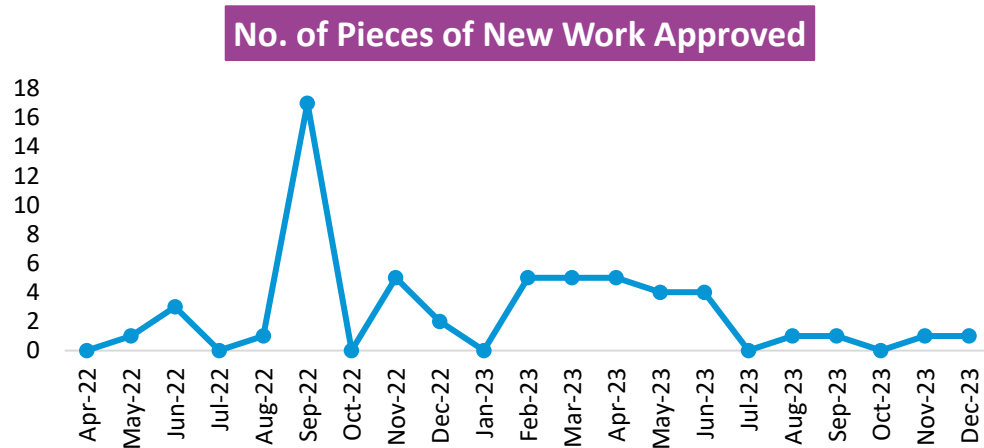

Legend: % not met, Median

Complaints

During the period Oct– Dec '23 we received 7 complaints and 6 concerns. The number of misdirected complaints and concerns continues to be small.

Freedom of Information (FOI) Requests

The number of requests received is in line with volumes received last year. We continue to respond to requests within the 20 working days.

NEW WORK APPROVED

No. of Pieces of New Work Approved

Month	Work Approved
Oct	• None
Nov	• National Drug-Related Deaths Database (NDRDD).
Dec	• Survey of health and social care workforce attitudes towards and experiences of COVID-19 and Flu Vaccination Programme (Winter 2023)

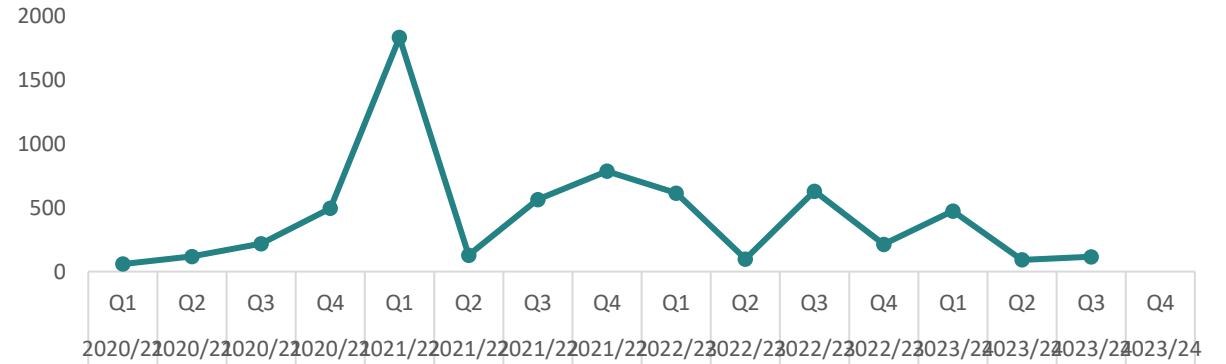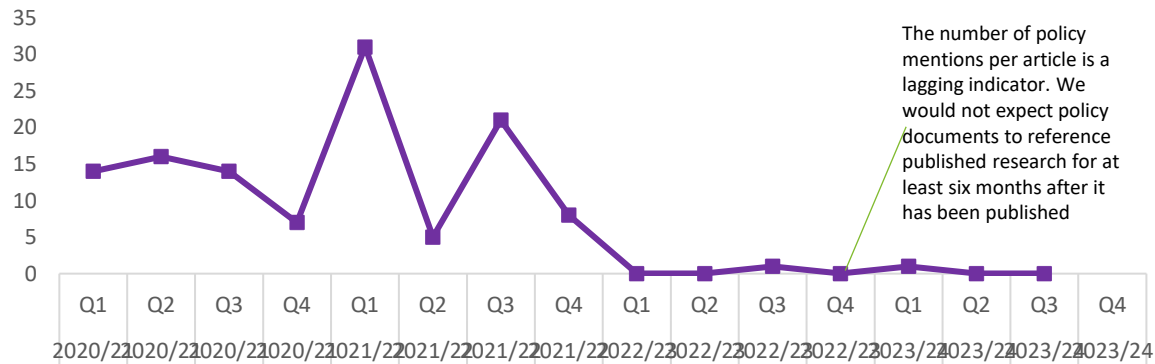# RESEARCH ARTICLES

NUMBER OF RESEARCH ARTICLES PHS STAFF HAVE AUTHORED OR CONTRIBUTED TO
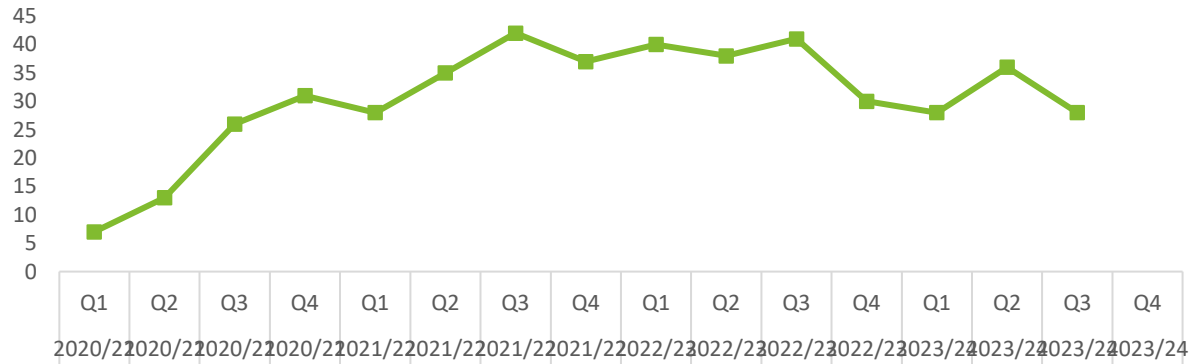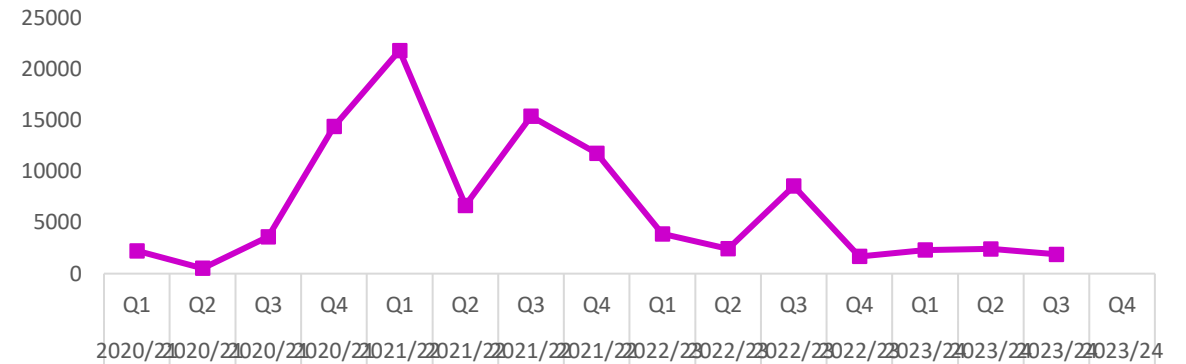

NUMBER OF NEWS ARTICLES REFERENCING RESEARCH ARTICLES PHS STAFF AUTHORED OR CONTRIBUTED TO

NUMBER OF POLICY DOCUMENTS REFERENCING RESEARCH ARTICLES PHS STAFF AUTHORED OR CONTRIBUTED TO

The number of policy mentions per article is a lagging indicator. We would not expect policy documents to reference published research for at least six months after it has been published

NUMBER OF TWEETS REFERENCING RESEARCH ARTICLES PHS STAFF AUTHORED OR CONTRIBUTED TO

Title: Does timely vaccination help prevent post-viral conditions?

Published in British Medical Journal, November 2023

Authors: Manoj Sivan, Mike Ormerod, Rishma Maini

Rishma Maini comments:

"This paper comments on evidence on the impact of covid-19 vaccination in reducing the burden of long COVID. It also appraises the findings from a population-based longitudinal study in Sweden providing compelling data on the protective effect of covid-19 vaccination in reducing a person's risk of developing long COVID.

"PHS co-authored the publication alongside a patient with lived experience of long COVID and Professor Manoj Sivan from the University of Leeds. The paper aims to highlight the importance of mass vaccination early on in a viral pandemic if we are to successfully limit the future burden of post-viral syndromes. It also advocates for increased research into post-viral conditions which are often difficult to diagnose and treat, as well as very debilitating."

About this Attention Score

In the top 5% of all research outputs scored by Altmetric

High Attention Score compared to outputs of the same age (99th percentile)

High Attention Score compared to outputs of the same age and source (96th percentile)

262
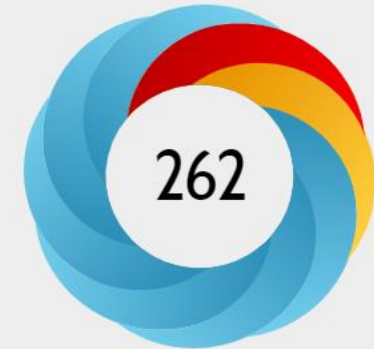
About this Attention Score

In the top 5% of all research outputs scored by Altmetric

MORE...

Mentioned by
- 8 news outlets
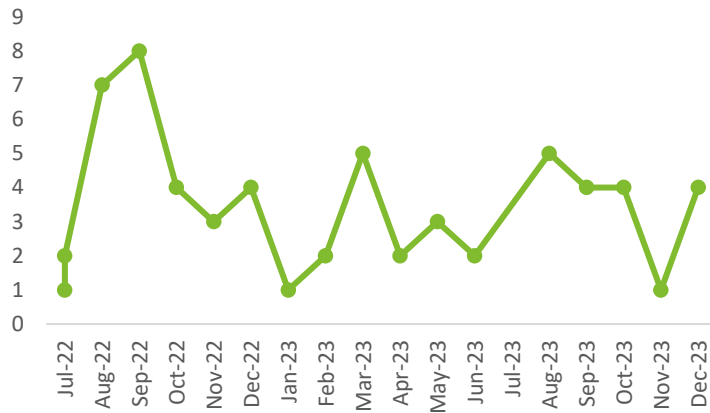- 3 blogs
- 340 X users

Citations
- 2 Dimensions

Readers on
- 1 Mendeley

CONSULTATIONS AND CALLS FOR EVIDENCE

Consultations Responded To

https://consult.gov.scot/equality-and-human-rights/a-human-rights-bill-for-scotland-consultation/

NHS Scotland - Medicines Homecare Review - Call for Evidence (office.com)

Enhancing the accessibility, adaptability and usability of Scotland's homes: consultation - Scottish Government - Citizen Space

Health and social care integration authority planning and performance reporting statutory guidance: consultation - Scottish Government consultations - Citizen Space

Occupational Health: Working Better - GOV.UK (www.gov.uk).

Alcohol: Minimum Unit Pricing (MUP): Continuation and Future Pricing: Consultation - Scottish Government consultations - Citizen Space

https://www.gov.uk/government/consultations/consultation-on-the-statutory-levy-on-gambling-operators/consultation-on-the-structure-distribution-and-governance-of-the-statutory-levy-on-gambling-operators#introduction

Tackling the Nature Emergency - strategic framework for biodiversity: consultation - gov.scot (www.gov.scot)

Abortion Services (Safe Access Zones) (Scotland) Bill - Scottish Parliament - Citizen Space

No. of Consultations Responded To

Evidence To The Scottish Parliament
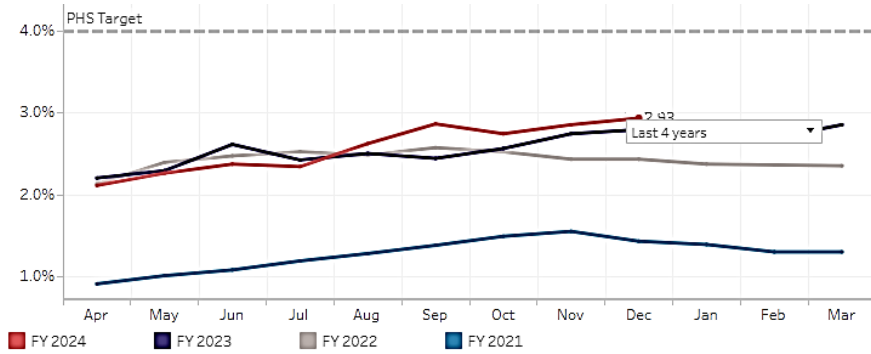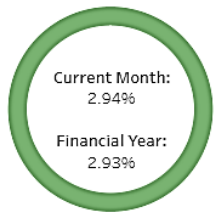
Date	Committee	Subject
14/11/2023	Health, Social Care and Sports Committee	Vaping and Nicotine Vapour Products

PEOPLE CHARTS
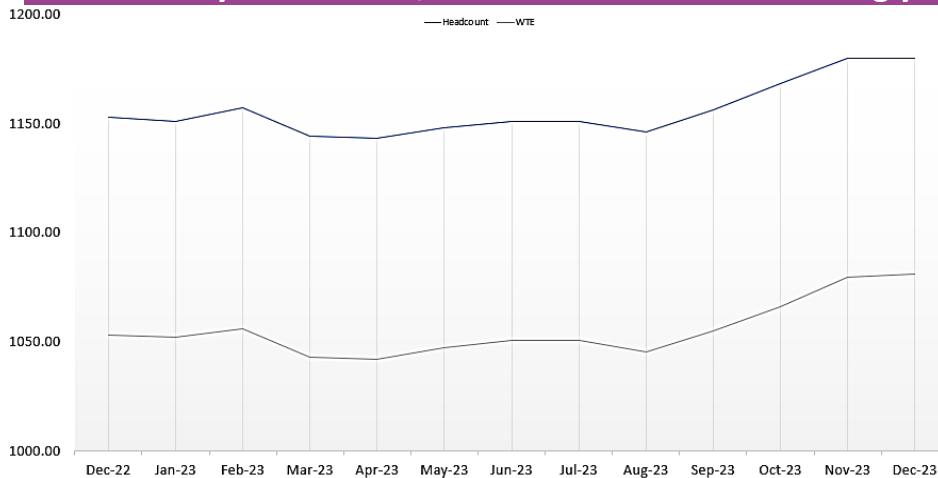

Annual Comparison of Total Sickness Absence trend

Percentage of appraisals completed, development plans and objectives set

Workforce by Headcount / WTE for the 12 month rolling year

Trend graph showing starters and leavers over 12 month rolling year

Overall Trend

Current Month: 2.94%

Financial Year: 2.93%

Short Term Financial Year 1.47%

Long term Financial Year 1.46%
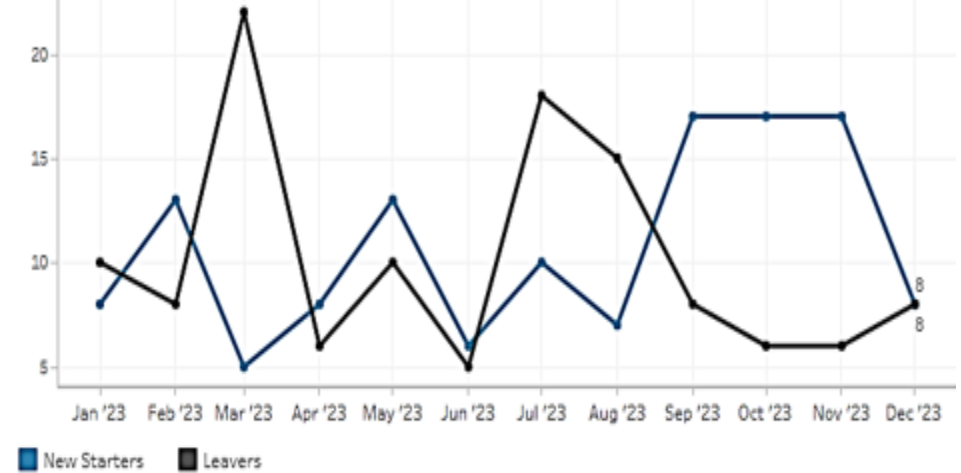
PEOPLE DEVELOPMENT

Number of days taken to hire new staff
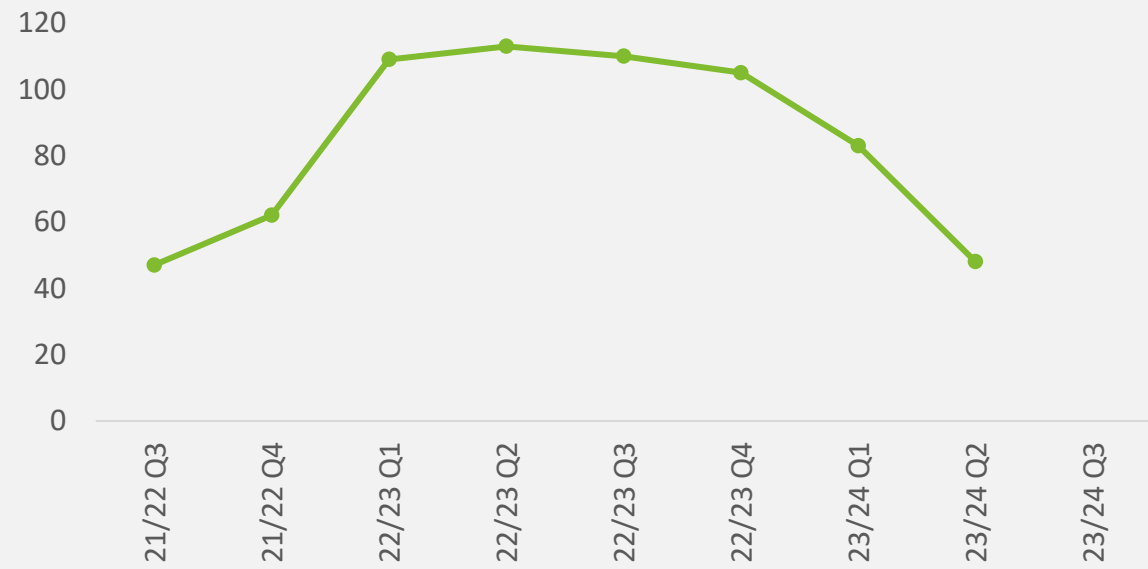
Headcount, WTE and posts advertised by directorate