

Quality Assurance			
29	The Working Group recommends that after the publication of this report the Scottish Government should work with NHS Health Improvement Scotland to explore how Quality Assurance and Quality Improvement of health protection activity across Scotland can be strengthened.	Final Report, pg 38	Scottish Government and NHS HIS
30	Once established, the Managed Health Protection Network should take over responsibility, from HPS, for the Quality Assurance of health protection work, and that it should continue to work with HIS on Quality Assurance and Quality Improvement issues.	Final report, pg 38	MHPN and HIS
31	<p>Subject to the views of HIS on the most appropriate way forward, the Working Group recommends that seminar could be held to explore the following issues, with a view to informing any future work:</p> <ul style="list-style-type: none"> <li>• the issues of shared culture and values across health protection;</li> <li>• the further development of a QA framework for health protection e.g. some high levels standards in a few key areas;</li> <li>• the development of a toolkit for problem solving, including templates for process mapping, root cause, quality improvement carts etc.</li> <li>• potential KPIs and metrics.</li> </ul>	Final report, pg 38	MHPN and HIS
Other Recommendations			
32	There should be a stronger link between Scottish Government and NHS Boards in terms of performance function and Board annual performance reviews (in relation to Health Protection)	Interim Report	Scottish Government
33	On call arrangements currently exist separately in each NHS Board. We recommend further examination of the score for combined on call arrangements between NHS boards to maximise capacity and use resources (both specialist Health Protection and generalist public health staff) most efficiently	Interim Report	MHPN
34	Interchange should be arranged between staff of HPS and NHS Boards and other activities considered to strengthen relationships and engender mutual respect and to help soften existing boundaries. This should include a wide range of activities including joint learning sessions; joint training and web based initiatives.	Interim Report	MHPN with the support of NHS Boards and HPS.

## Interim Report and Summary of Recommendations

This annex sets out each of the recommendations from the Health Protection Stocktake Interim Report and assesses each in turn in light of the proposal for a Managed Health Protection Network. The table below identifies those recommendation which could potentially be delivered within the Framework of a Managed Health Protection Network and reiterates the importance of other recommendations from the Interim Report, which form part of our overall approach.

Original Recommendation	Assessment
<b>Capacity and Resilience</b>	
<p>Scotland, as a small country, has some impressive strengths to build on but there are also weaknesses in current capacity and resilience arrangements. Smaller Boards realistically will face a lack of capacity and resilience in dealing with multiple or large incidents or even in coping with larger volumes of routine work. Overall, future challenges, suggest that demands on capacity will increase and that we must find ways to accommodate them.</p> <p>Mutual aid exists in principle but is only adhered to in practice in the North of Scotland. Arrangements should be strengthened in other areas of the country.</p>	<p>An MHPN would provide an easily accessible forum to recognise quickly, discuss and agree solutions where a Board or Boards were experiencing short term capacity problems. It would also provide a forum to review existing mutual aid arrangements and to determine whether these are satisfactory.</p> <p>Ensuring that there is sufficient capacity and resilience within the system now, and for the future as the pressure associated with burden of disease, new emerging infections and environmental hazards increases, remains a key concern. The MHPN may provide a workable means to allow NHS Boards to access and share available capacity in response to short term pressures. However, this is an area that requires to be kept under review in response to emerging pressures and a changing world. The MHPN Board could be asked to report on these issues.</p>
<b>Roles and Responsibilities</b>	
<p>There is a need to improve communication between HPS and NHS Boards. Interchange should be arranged between staff (in both directions) and other activities considered to strengthen relationships and engender mutual respect and to help soften existing boundaries. This should include a wide range of activities including joint learning sessions; joint training and web based initiatives.</p>	<p>An MHPN is of course designed to help achieve a sense of integration between all parts of a service and should therefore be expected to serve a function of improving relationships and communication. However, our recommendation on interchange and other activities should stand</p>