

4 July 2019

Robert Packwood
The Scottish Government
Health Protection Division
St Andrew's House
Edinburgh EH1 3DG
publichealthreform@gov.scot

Dear Mr Packwood

Consultation on new National Public Body 'Public Health Scotland'

Ramblers Scotland is pleased to have the opportunity to respond to this consultation. We are the representative body for walkers in Scotland, recognised by **sportscotland** as a governing body of sport, and we are a member of the Scottish Government's National Walking Strategy delivery forum. We help everyone, across Scotland, enjoy walking and protect the places we love to walk. We are a membership organisation with 54 local walking groups in Scotland, running 3,500 group walks a year which are led and organised by 1,200 volunteers. Our own activities relating to the delivery of our charitable objectives support the following public health priorities:

- A Scotland where we eat well, have a healthy weight and are physically active.
- A Scotland where we have good mental wellbeing.
- A Scotland where we live in vibrant, healthy and safe places and communities.

We have only responded to those questions below where we have a contribution to make.

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

We very much support the formation of this new body and its vision to "create a culture for health ... within an enabling environment". We believe this renewed focus and purpose on public health will help to positively influence change, which will be to the benefit of Scotland's population.

We are particularly pleased to see the emphasis on innovation. While this approach can bring risks, as the outcomes of activities cannot always be guaranteed, this does nevertheless lead to the foundation of an important and useful evidence base. We also welcome the context for the new body as a response to the recommendations from the Christie Commission report. We do however recognise the inherent tensions that can arise from deliberately decentralising control of activities to enable communities and partners to lead on delivery, while at the same time needing to retain oversight and accountability. This will be a challenge to resolve but it is an approach which will result in the most successful and sustainable outcomes.

The commitment to a human rights approach is welcome, as long as it also includes a children's rights approach. We also welcome the recognition that it is through partnerships within a wide range of sectors and organisations that the public health priorities can be delivered. We believe that such partnerships are crucial for delivery and we will be ready to play our own part in promoting public health as appropriate.

We agree with the recognition that "a coordinated, whole system approach is required". Public health is a cross-cutting policy area which depends upon other divisions of national and local

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government playing their own role in helping to deliver the outcomes which have been identified in the six priorities.

While we are pleased to see the leadership role envisaged for the new body, we also feel there should be greater emphasis made on the need for Public Health Scotland to play a strong advocacy role in making the case for public health to be embedded in a wide range of policy areas. It is recognised within the consultation (chapter 2, para 5) that public health works on the determinants of health, rather than focussing on the consequences of ill-health. It is therefore important that the new body is able to influence organisations and policy areas that have not previously felt they have a strong role to play in delivering public health.

As an example, our own remit relates to the public health priority relating to physical activity. It is recognised that the barriers to physical activity are not always health-related but rather are due to the wider environment. This includes the lack of infrastructure which enables people to choose to walk or cycle to work, school or to access services, or as a leisure activity. Equally, the lack of information or knowledge about where to enjoy being active outdoors can be a barrier. Therefore, it is important that the new body is able to make the case to ministers and local authority officials that there needs to be sufficient investment through both transport and countryside management budgets into paths, safe cycle routes, web-based information resources, ranger services and other related provision to ensure a better, more inclusive environment which enables everyone's physical activity levels to increase. We believe that the specific need to advocate for public health beyond health and social care departments should be emphasised within the responsibilities of the new body as set out in para 9, page 12.

Question 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?

We welcome the identification of the third sector as a vital partner for delivering the public health priorities, and the need to pro-actively involve communities in improving outcomes. Nevertheless, it is important that the priorities and objectives of Public Health Scotland are fully communicated and there are sufficient resources to build capacity and support this delivery. This will in some cases mean the core funding of third sector organisations as well as providing funding for activity-based functions. At Ramblers Scotland we have had little contact with Community Planning Partnerships to date; as a small organisation we have to prioritise engagement in national strategies and policy development over that at a local level. We therefore would welcome the opportunity to comment on Public Health Scotland's strategic plan in due course.

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

(b) What additional outcomes and performance indicators might be needed?

There should be a reference here to the Scottish Government's Active Scotland Outcomes Framework which relates to some of the stated priorities for public health.

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

We agree with the functions set out in this chapter. However, as stated in our answer to Q1 above, having a leadership role also means making the case for embedding public health priorities in the delivery of other policy areas and influencing the practice of these divisions, and we believe this should be emphasised more fully in the functions of the new body.

In addition, we note that the range of partners listed in para 4, page 35 include "public health, health protection, population health improvement, local government *and other health and non-health fields*" (our italics). We reiterate that the new body needs to be mainstreaming planning for public health into a range of policy areas beyond the sphere of health. One specific example which is not mentioned in the paper is climate change. Having declared a climate emergency, the government needs to be studying all aspects of its programme to ensure resilience and

decarbonisation are prioritised in response to this emergency. Public health has a significant role to play in this planning process, for example in terms of mitigating impacts on health from a range of environmental issues such as air quality and flooding, and on the potential heightened risks from diseases such as Lyme disease.

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

We have no particular views on the location of the headquarters, but we were interested in the suggestion on p11, para 3.8 that co-location could be investigated. We are fully supportive of this idea, as we believe it is a practical solution which could provide an opportunity to be a catalyst for change in the way that Public Health Scotland and other organisations operate.

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

We would suggest that a board member with expertise on physical activity in relation to public health would be useful. We fully support the recognition of the need to ensure third sector experience within the board.

We hope the comments above are useful and would be happy to discuss them further.

Yours sincerely

Helen Todd
Campaigns & policy manager