

MINUTES

**Minutes of the 71st Meeting of the Public Health Agency board
held on Thursday 18 December 2014 at 1:30pm,
in Fifth Floor Meeting Room, 12/22 Linenhall Street
Belfast, BT2 8BS**

PRESENT:

Mrs Julie Erskine	- Acting Chair
Dr Eddie Rooney	- Chief Executive
Ms Oriel Brown	- Nurse Consultant (<i>on behalf of Mrs Cullen</i>)
Dr Carolyn Harper	- Director of Public Health/Medical Director
Mr Edmond McClean	- Director of Operations
Councillor William Ashe	- Non-Executive Director
Mr Brian Coulter	- Non-Executive Director
Dr Jeremy Harbison	- Non-Executive Director
Mrs Miriam Karp	- Non-Executive Director
Alderman Paul Porter	- Non-Executive Director

IN ATTENDANCE:

Mr Paul Cummings	- Director of Finance, HSCB
Mrs Fionnuala McAndrew	- Director of Social Services, HSCB
Mr Robert Graham	- Secretariat

APOLOGIES:

Mrs Pat Cullen	- Director of Nursing and Allied Health Professionals
Mr Thomas Mahaffy	- Non-Executive Director
Mrs Joanne McKissick	- External Relations Manager, Patient Client Council

		Action
159/14	Item 1 – Welcome and Apologies	
159/14.1	The Chair welcomed everyone to the meeting and noted apologies from Mrs Pat Cullen, Mr Thomas Mahaffy and Mrs Joanne McKissick.	
160/14	Item 2 - Declaration of Interests	
160/14.1	The Chair asked if anyone had interests to declare relevant to any items on the agenda. No interests were declared.	

161/14 Item 3 – Minutes of the PHA Board Meeting held on 20 November 2014

161/14.1 The minutes of the previous meeting, held on 20 November 2014, were approved as an accurate record of the meeting, subject to two amendments – the title at paragraph 146/14 should read, "...held on 16 October 2014" and an incorrect spelling of "Harbison" at paragraph 153/14.6.

162/14 Item 4 – Matters Arising

162/14.1 There were no matters arising.

163/14 Item 5 – Chair's Business

163/14.1 The Chair expressed her thanks to the previous Chair, Mary McMahon, for her work and dedication to the Public Health Agency.

163/14.2 The Chair advised that a schedule of meetings and workshop dates had been circulated for 2015. She said that for future meetings, she would like to send out Chair's business in advance. Also, she wished to ensure that presentations at meetings were limited to 10 minutes followed by questions. Finally, she said that if any members wished to put any items onto the agenda to advise the secretariat 14 days in advance of the meeting.

163/14.3 The Chair informed members about meetings she had attended since she had taken up post. She said that she had attended the PHA staff engagement workshop at Mossley Mill which she said was an excellent event. She also met with PHA staff at Ormeau Avenue and Alexander House and with HSCB finance staff.

164/14 Item 6 – Chief Executive's Business

164/14.1 The Chief Executive said that along with the previous and current Chairs, he had attended the PHA mid-year Accountability Review meeting. He said that that format of the meeting was different, and that he found the meeting to be very productive.

164/14.2 The Chief Executive noted that there had been a significant amount of coverage, across all media outlets, regarding Organ

Donation, including two full page advertisements provided by the Irish News which carried the PHA logo.

164/14.3 The Chief Executive said that he had attended the inaugural meeting of the All Departmental Officials Group regarding the implementation of the new public health framework, Making Life Better.

165/14 Item 7 – Personal and Public Involvement (PHA/01/12/14)

165/14.1 The Chair welcomed Michelle Tennyson, Martin Quinn, Angela Crocker and John Toal to the meeting.

165/14.2 Ms Tennyson said that she hoped that the presentation would show how a small amount of money can make a big difference. Mr Quinn began the presentation with an overview of recent developments within PPI before asking Belfast Trust Speech and Language Therapist Angela Crocker and service user John Toal to talk about Mr Toal's "Choking Story". Ms Crocker and Mr Toal outlined how an incident of choking that he had suffered led to a need for greater awareness of the dangers of choking.

165/14.3 Members expressed their thanks to Ms Crocker and Mr Toal for coming and presenting to the Board.

165/14.4 Dr Harbison asked Mr Quinn if there was any update on the research proposal. Mr Quinn said that a joint research project by Queen's and the University of Ulster had just been established and he hoped that this work would be finished by mid-March 2015.

165/14.5 Members noted the PPI update.

**166/14 Item 8 – Finance Update
PHA Financial Performance Report (PHA/02/12/14)**

166/14.1 Mr Cummings presented the Finance Report and said that the year to date position showed a deficit, but that he was not concerned at this stage.

166/14.2 Mr McClean presented members with an update on the Investment Plan for 2014/15 and 2015/16. He explained that following correspondence from DHSSPS, PHA is expected to

retract £1.5m from its overall programme expenditure, but in addition, funding from OFMDFM will not now be provided, leaving PHA with a shortfall of £205k for contractual commitments.

- 166/14.3 Mr McClean advised that initiatives which have commenced will not be stopped, but that other initiatives may be delayed. In response to a question from Alderman Porter, he confirmed that the PHA senior management team had amended and approved this proposal. Alderman Porter also asked about the potential for other contracts to run over in terms of cost. Mr Cummings said he was confident that this would not be the case. He added that he did not anticipate additional funds being provided in 2015/16 for new service developments.
- 166/14.4 Dr Harbison asked whether the areas highlighted in this proposal had been flagged up with DHSSPS. Mr McClean said that the list of service pressures for 2015/16 had been raised with DHSSPS.
- 166/14.5 Members noted the finance update.

167/14 Item 9 – Winter Preparedness

- 167/14.1 Dr Lorraine Doherty joined the meeting and gave members an overview of arrangements in place for winter preparedness. The presentation covered three main areas – severe weather, flu and ebola. One of the biggest issues which Dr Doherty flagged up was the low uptake among HSC staff of obtaining the flu vaccine.
- 167/14.2 Mr Cummings said that he shared the concerns expressed by Dr Doherty and asked whether it should be made compulsory for frontline staff to get the vaccine. Dr Harper noted that during this year, significant efforts had been made to ensure that all primary school children obtained the vaccine, and that next year that effort could be more focused on increasing uptake within the HSC.
- 167/14.3 Members expressed concern that healthcare professionals, who are subject to regulation, could be deemed to be acting unprofessionally by not obtaining a vaccine which would reduce the risk of spreading an infection. The Chief Executive agreed that time should be taken to review this and gain a better

understanding of what the obstacles are and how best to address these.

167/14.4 Mrs McAndrew commented that in terms of emergency planning, HSCB staff work very closely with PHA staff and she commended the tremendous work undertaken in this area, and cited the example of the recent coverage about ebola and how reassuring the messages were coming from PHA.

167/14.5 Members noted the update on winter preparedness.

At this point Councillor Ashe left the meeting.

168/14 Item 10 – Presentation on Integrated Care Partnerships

168/14.1 Dr Sloan Harper joined the meeting and presented members with an update on the work of the 17 Integrated Care Partnerships (ICPs) in Northern Ireland. He outlined the role of ICPs, particularly within the Commissioning process, and gave examples of service changes that had been introduced.

168/14.2 The Chief Executive noted that ICPs can no longer be seen as separate from the main HSC system, but that they have links across a lot of areas. However, he added that it was difficult to determine how they were making an impact and that it was important that the Commissioning Plan should reflect this. Dr Harper agreed and said that a regional commissioning process had begun in January 2013 and that a series of outcomes had been commissioned within a budget of £14m. He added that a lot of projects appeared to be community projects, but were in fact developed through the local commissioning process and the Transformation Programme Board, set up under TYC, and that there are project boards and teams in place.

168/14.3 The Chief Executive said that it was important to understand all of the different interfaces and to ensure that these were working in a complementary, rather than competitive way. Dr Harper agreed that this was a valid point. The Chief Executive asked for a breakdown of the ICP funding to be provided to the PHA Board.

168/14.4 Dr Harbison said that this was a complex area of work and he asked how individual patients and clients would know that they

had been identified to participate in the joint working process. Dr Harper said that if a patient's care was going to change, they would be advised accordingly. He added that the risk stratification process is a background process. Dr Harbison felt that the process should be a co-productive one, but Dr Harper said that it was about ensuring that there is a multi-disciplinary review of every patient's care.

168/14.5 Members noted the update on Integrated Care Partnerships.

169/14 Item 11 – Governance and Audit Committee Update (PHA/03/12/14)

169/14.1 Mr Coulter advised that the minutes of the meeting of 8 October were available for members, and that he had given an overview of that meeting at the Board meeting in October. He moved on to update members on the key issues discussed at the meeting of 10 December.

169/14.2 Mr Coulter advised that the new external auditors, ASM, had attended their first meeting. He said that the Committee had noted that complaints handling would be included as part of the internal audit work programme. He advised that the Corporate Risk Register had been considered and that one risk, regarding accommodation, has been escalated from the directorate register to the Corporate Risk Register.

169/14.3 Mr Coulter informed members that the first meeting of the Shared Services customer forum had taken place. He also advised that Dr Janet Little had attended to update the Committee on the Policy for the Appraisal of Medical Practitioners, and that it had been agreed that this policy should be brought to the PHA Board.

169/14.4 Members noted the update from the Committee Chair.

170/14 Item 12 – Remuneration Committee Update (PHA/04/12/14)

170/14.1 The Chair informed members that the Committee had met on 27 November and that the template for the Chief Executive's objectives had been discussed. She added that there had been discussion about the Mid-Year Accountability Review meeting and that the Committee wished to express its thanks to all staff for their work.

170/14.2 Members noted the update from the Committee Chair.

171/14 Item 13 – Research and Health Intelligence Committee Update (PHA/05/12/14)

171/14.1 Dr Harbison said that the minutes of the meeting of 5 November had been circulated for members.

171/14.2 Dr Harbison advised that the Committee had taken time to consider the draft DHSSPS R&D Strategy which is currently out for public consultation. He said that the Committee felt that the Strategy did not clearly set out a strategic direction in the same way that the equivalent strategy in Scotland did. Consequently, the Committee agreed that the Scottish model should be included as part of the PHA response. He added that the Group did not feel prevention featured in the Strategy, and also that the focus was entirely on health and not on social care.

171/14.3 The Chair thanked Dr Harbison and the Committee for preparing the PHA response for approval by the Board.

171/14.4 Members APPROVED the response to the HSC R&D Strategy.

171/14.5 Dr Harbison moved on to give members an overview of other issues discussed at the meeting. He said that the Committee welcomed the launch of the first draft of the Social Work and Social Care Strategy and that a number of suggestions from the Committee will be inputted into the PHA response.

171/14.6 Dr Harbison said that he had attended a meeting of the regional advisory group on R&D where concerns about the delay in the appointment of a Director of R&D had been expressed. Dr Harper echoed these concerns, but noted that the DHSSPS were taking the lead in the recruitment process.

171/14.7 Mrs McAndrew thanked Dr Harbison for the Committee's comments regarding the Social Work and Social Care Strategy.

171/14.8 The Chief Executive said that it was his understanding that the Director of R&D post would be advertised shortly under a PHA banner.

171/14.9 Members noted the update on the Research and Health Intelligence Committee.

At this point Mr Cummings and Alderman Porter left the meeting.

172/14 Item 14 – Serious Adverse Incidents Learning Report (PHA/06/12/14)

172/14.1 Ms Brown presented the latest Serious Adverse Incidents Learning Report for the period April to September 2014 and noted that there had been an increase in the number of SAIs, but that this was largely due to increased reporting due to increasing awareness training sessions and changes in SAI criteria.

172/14.2 Ms Brown gave an overview of the new learning issues which had been disseminated since the last report and also the thematic reviews which were ongoing. She advised that the latest Learning Matters newsletter is about to be published.

172/14.3 Ms Karp asked whether the increased awareness and reporting of SAIs is the sole reason for the increase in numbers. Ms Brown said it was one reason, but noted that the requirement to report all child death had also increased numbers, but she pointed out that in cases where the deaths were expected, it was still reported as an SAI. She added that a series of roadshows would be taking place in January and February regarding SAIs.

172/14.4 Dr Harbison noted the impact the change of criteria was having on numbers, but asked whether PHA should be concerned at the acceleration of the increase. Ms Brown said that more SAIs are being reported as each SAI concerns a patient or a family and represents learning which ensures that similar incidents do not happen again.

172/14.5 Mr Coulter asked about the five themes which came out of the workshop on older people. Ms Brown said that a report of that event was being prepared and that common themes were being identified. Mr Coulter asked about the frequency of publication of the Learning Matters newsletter. Ms Brown said that the newsletter was published once there were enough articles to make it meaningful before distribution.

172/14.6 Members noted the SAI Learning Report.

173/14 Item 15 – Any Other Business

173/14.1 There was no other business.

174/14 Item 16 – Date and Time of Next Meeting

Date: Thursday 22 January 2015

Time: 1:30pm

Venue: Conference Rooms
18 Ormeau Avenue
Belfast
BT2 8HS

Signed by Chair: _____



Date: _____

22.01.15

