

MINUTES

**Minutes of the 62nd Meeting of the Public Health Agency board
held on Thursday 20 February 2014 at 1:30pm,
in Public Health Agency, Conference Rooms,
12/22 Linenhall Street, Belfast, BT2 8BS**

PRESENT:

Ms Mary McMahon	- Chair
Dr Eddie Rooney	- Chief Executive
Mrs Pat Cullen	- Director of Nursing and Allied Health Professionals
Mr Edmond McClean	- Director of Operations
Alderman William Ashe	- Non-Executive Director
Mr Brian Coulter	- Non-Executive Director
Mrs Julie Erskine	- Non-Executive Director
Dr Jeremy Harbison	- Non-Executive Director
Mrs Miriam Karp	- Non-Executive Director
Mr Thomas Mahaffy	- Non-Executive Director
Alderman Paul Porter	- Non-Executive Director

IN ATTENDANCE:

Mr Owen Harkin	- Director of Finance, HSCB
Mrs Joanne McKissick	- External Relations Manager, Patient Client Council
Mr Robert Graham	- Secretariat

APOLOGIES:

Dr Carolyn Harper	- Director of Public Health/Medical Director
Mrs Fionnuala McAndrew	- Director of Social Care and Children, HSCB

		Action
18/14	Item 1 – Apologies	
18/14.1	The Chair welcomed everyone to the meeting and noted apologies from Dr Harper and Mrs McAndrew.	
19/14	Item 2 - Declaration of Interests	
19/14.1	The Chair asked if anyone had interests to declare relevant to any items on the agenda. None were declared.	

20/14 Item 3 – Minutes of the PHA Board Meeting held on 23 January 2014

20/14.1 The minutes of the previous meeting, held on 23 January 2014, were approved as an accurate record of the meeting. The minutes were duly signed by the Chair.

21/14 Item 4 – Matters Arising

21/14.1 There were no matters arising from the minutes of the previous meeting.

21/14.2 The Chair advised that she had written a letter of thanks, on behalf of the Board, to the participant of the FNP programme who had attended the previous Board meeting.

22/14 Item 5 – Chair’s Business

22/14.1 The Chair said that she had attended the launch of the PHA’s Organ Donation campaign.

22/14.2 The Chair advised that the ALB Self-Assessment tool would be shared with members and would then be brought to the March Board meeting for approval for submission to DHSSPS.

22/14.3 The Chair informed members of two proposed future meetings. Firstly, a workshop to consider the Commissioning Plan may take place on 4 March and secondly, there will be an additional Board meeting on 11 June to consider the Annual Report and Accounts.

23/14 Item 6 – Chief Executive’s Business

23/14.1 The Chief Executive advised that the PHA had launched its organ donation campaign and he commended the quality of the work in putting together the campaign.

23/14.2 The Chief Executive said that he had attended an event with the Minister and Business in the Community looking at workplace health.

23/14.3 Mr Coulter asked whether the Northern Ireland Blood Transfusion Service would also promote organ donation. The Chief Executive said the NIBTS is part of the UK-wide network for blood and

transplants so they would have access to all of PHA's new campaign materials.

24/14 Item 7 – Finance Update

PHA Financial Performance Report (PHA/01/02/14)

Review of Scheme of Delegated Authority (PHA/02/02/14)

- 24/14.1 Mr Harkin presented the financial report for the period up to 31 December 2013 and said that there is a currently a surplus of £758k. He noted that approximately 38% of PHA's overall budget is due to be spent during the final quarter of the year, and that finance staff would be meeting with PHA budget managers to review this.
- 24/14.2 Mr Harkin advised that the issues regarding Lifeline had yet to be resolved and continued to represent a risk to PHA. He said that there is currently an underspend in the management and administration budget and that this underspend would be used to cover other pressures.
- 24/14.3 Mrs Erskine expressed her concern about Lifeline. Mr Harkin said that meetings were taking place to resolve the issues. Mrs Karp added the issues around Lifeline are currently on the PHA's Corporate Risk Register.
- 24/14.4 Mr Harkin moved onto the Scheme of Delegated Authority and said that this had been updated following the implementation of BSTP. He said that this would ensure that invoices are forwarded to the appropriate staff for approval.
- 24/14.5 Mrs Erskine said that the review had been considered by the Governance and Audit Committee and that there were no issues. Alderman Porter asked whether, following this review, individual members of staff, who may not previously have had responsibility for approving invoices could seek a review of their post given the extra duties. Mr Harkin acknowledged the comment, but said that he did not foresee any issues in that regard.
- 24/14.6 Members approved the Scheme of Delegated Authority.

25/14 Item 8 – Review of Standing Orders and Standing Financial Instructions (PHA/03/02/14)

- 25/14.1 Mr McClean said that the annual review of Standing Orders had been undertaken and that changes made had been done to reflect recent DHSSPS circulars. Mr Harkin added that the Standing Financial Instructions had also been updated to reflect DHSSPS guidance, but also issues around procurement.
- 25/14.2 Mrs Erskine confirmed that the Governance and Audit Committee had considered the review and had not identified any issues.
- 25/14.3 Members approved the review of Standing Orders and Standing Financial Instructions.

26/14 Item 9 – Governance and Audit Committee Update (PHA/04/02/14)

- 26/14.1 Mrs Erskine said that the Governance and Audit Committee had met on 6 February and had considered the review of the Scheme of Delegated Authority and the review of Standing Orders and Standing Financial Instructions.
- 26/14.2 Mrs Erskine advised that the Committee had also received an update on fraud and had reviewed the timetable for the production of the Annual Report and Accounts as well as an update on BSTP and the External Audit Strategy.
- 26/14.3 Mrs Erskine added that the Committee had considered the Audit Committee Self Assessment Checklist.
- 26/14.4 Members noted the update from the Committee Chair.

27/14 Item 10 – Programme Expenditure Monitoring System (PEMS) Report (PHA/05/02/14)

- 27/14.1 Mr McClean said that the latest PEMS Report indicated that there was a slight overcommitment, but this was not unduly concerning. He added that the amount in negotiation had reduced to £107k.
- 27/14.2 Mrs Karp asked for more information about ISCYP. The Chief Executive advised that PHA has a commitment to ISCYP until 31

March 2014, after which point, the responsibility will pass over to HSCB.

27/14.3 Members noted the PEMS Report.

28/14 Item 11 – Investment Plan (PHA/06/02/14)

28/14.1 The Chief Executive said that, following the Business Plan workshop, this Investment Plan represented PHA's commitment to have a detailed Plan in place. He explained that this Plan focused on new monies, but that there were elements of the Plan which related to Programme for Government expenditure. He explained that, while he has accountability for the PfG expenditure, the Chief Medical Officer at DHSSPS is the Senior Responsible Officer.

28/14.2 Mr McClean advised that this Plan was the first part of a more detailed Plan which would be brought to the Board. This document was based on growth funding and takes into account pay and prices uplift. He added that the areas listed deal with developments to meet service provision pressures as well as Commissioning Directions and other DHSSPS priorities.

28/14.3 Mr McClean added that many of the funding areas will be familiar to members, but some of the funding may be reallocated to meet increasing demands and that further conversations were required to ensure that demographic growth is covered. He said that while the majority of the Plan represents 2014/15, there were initiatives highlighted for 2015/16.

28/14.4 Alderman Ashe asked whether the Chief Executive had any concerns about any of the initiatives within the Plan. The Chief Executive said that he was content and that the Plan had taken into account discussions with DHSSPS colleagues. Alderman Porter noted that there was no reference to the Social Investment Fund. The Chief Executive said that it would not have been possible to include this in 2014/15, but that discussions had taken place with Councils and that the next PHA Corporate Strategy would include community planning. He said that DHSSPS had formally written to PHA regarding its input to community planning.

28/14.5 Mr McClean advised members that two of the areas, Family Nurse Partnership and Alcohol Liaison Services, had now

reached a stage of development where colleagues had negotiated with HSCB and were currently featured on the list of current pressures for 2014/15.

- 28/14.6 Mr Mahaffy asked about the impact of the new Public Health Strategy. The Chief Executive said that PHA's new Corporate Strategy would be closely aligned with the new Public Health Strategy. Mr McClean added that, following its publication, PHA would seek to understand its practical implications before deciding where to commit funds. He said that the purpose of this Plan was to enable expenditure to commence as soon as possible in 2014/15.
- 28/14.7 Dr Harbison asked about the Family Nurse Partnership programme and the Alcohol Liaison Services and queried the rationale for these being transferred to HSCB. Mrs Cullen explained that, with regard to FNP, it is seen as an extension to core services and therefore should be funded by the commissioners. Dr Harbison asked about the impact on the rollout of FNP, if it is not part of the final Commissioning Plan. Mrs Cullen said that there have been ongoing discussions with HSCB and DHSSPS regarding the list of current pressures and that priority will be given to those that are currently within the Commissioning Direction. Mr Harkin said that there remains a funding gap to support the draft Commissioning Plan and that the options to close this gap include seeking additional funding or asking Trusts to make further efficiencies. The Chief Executive said that FNP remains a priority for PHA.
- 28/14.8 The Chief Executive said that the Alcohol Liaison Service is the subject of ongoing discussions between PHA and HSCB as there are budget implications for PHA depending on the outcome of those discussions.
- 28/14.9 Dr Harbison sought clarity on whether the list of developments identified as potentially HSCB developments, would come back to PHA if they could not be funded by HSCB. The Chief Executive confirmed that this would be the case.
- 28/14.10 Members approved the draft Investment Plan.

- 29/14** **Item 12 – Performance Management Report – Corporate Business Plan and Commissioning Plan Directions Targets for Period ending 31 December 2013 (PHA/07/02/14)**
- 29/14.1 Mr McClean gave an update on the Business Plan and Commissioning Plan Direction targets for the period up to 31 December 2013 and said that seven targets had moved from “amber” to “green”, four had moved from “green” to “amber” and that one had moved from “green” to “red”.
- 29/14.2 The Chair said that the number of targets rated “green” reflected well on the organisation.
- 29/14.3 Mrs Erskine asked whether the target that had been moved from “green” to “red” was due to circumstances beyond PHA’s control. Mr McClean confirmed that there were some procurement difficulties, but assured members that PHA had been working to progress these.
- 29/14.4 Mrs Karp asked PHA’s role in health inequalities, particular vis-à-vis the migrant population. Mrs Cullen acknowledged that this is an area that PHA should focus on and respond to the needs of this group. Dr Little added that there are issues whereby migrants are not eligible for treatment unless there is a risk to public health or an infectious disease issue. The Chair said that this is an area where the work of the community and voluntary sector is very important.
- 29/14.5 Dr Harbison asked about the Northern Ireland New Entrant Service. Mr McClean explained that this is a target set by DHSSPS and focused on the migrant population.
- 29/14.6 Mr Coulter asked whether the PHA had developed a view on e-cigarettes. Dr Little noted that these are currently an unregistered product. The Chair said that this issue was discussed at a recent tobacco control conference but no view had been agreed. Mrs Karp asked whether any research was being undertaken. The Chief Executive said that initial research was being undertaken and PHA would wish to have evidence of the longer term impact before deciding on its course of action. Alderman Ashe suggested that the current campaign about smoking cessation could be updated. Mr McClean said that it was highly likely that this campaign would be updated.

29/14.7 Members noted the Performance Management Report.

30/14 Item 13 – PHA Response to Consultation “Making Choices: Meeting the Current and Future Accommodation Needs of Older People” (PHA/08/02/14)

30/14.1 Dr Little said that PHA had welcomed the opportunity to respond to this consultation and noted that the first part of the document was very well written. She added that the third section contained the criteria that would be expected but that the scoring system had been difficult to understand in relation to how it applied to the first section.

30/14.2 Alderman Porter said that there was no reference in the consultation document to older people with special needs. It was agreed this comment would be added to the response.

30/14.3 Mr Mahaffy expressed concerns about the document and said that PHA should ensure that it also completes the equality screening assessment. He said that the PHA should reconsider how the first part of the “any other comments” response is worded as it suggests that PHA supports the document. He suggested reiterating the response on page 19.

30/14.4 Members approved the consultation response, subject to the amendments suggested by members.

31/14 Item 14 – Standards for Promoting Mental and Emotional Wellbeing and Suicide Prevention (PHA/09/02/14)

31/14.1 Madeline Heaney joined the meeting and gave members an overview of the proposed new standards, which will be used in the procurement of new services in the areas of mental and emotional wellbeing and suicide prevention. She said that these standards had been developed, based on PHA’s experience of working with organisations in this area, and the expectations of these organisations. She added that there had been consultation on the draft standards, and that PHA had linked with probation and victims’ services. It is anticipated that PHA will facilitate awareness sessions for potential providers on the new standards.

31/14.2 The Chair welcomed the development of these standards as they

should improve services in the community, but she queried the strength of the HSCB endorsement. Ms Heaney explained that it would be more appropriate for the PHA to be the approving authority of the standards.

- 31/14.3 The Chair asked about the monitoring arrangements. Ms Heaney said that PHA will monitor these to assure itself that the standards are based on evidence of best practice.
- 31/14.4 Mr Coulter suggested that all of the standards should have links, where this was appropriate. Ms Heaney agreed to look at this.
- 31/14.5 Mr McClean outlined the importance of these standards, particularly in terms of shaping procurement. He said that what is outlined in the criteria will be reflected in contracts.
- 31/14.6 Dr Harbison asked if these standards would apply in the statutory sector. Ms Heaney said that some of the standards would apply, and that within HSC Trusts there would be equivalents.
- 31/14.7 Alderman Porter asked whether PHA is creating difficulties for smaller organisations in terms of meeting these standards. Ms Heaney said while some providers may have more experience than others, the standards have been market tested. She said that for example it would be important that providers in areas such as counselling and self-harm have the appropriate qualifications and background.
- 31/14.8 Mrs Erskine about the costs of implementing these new standards. Ms Heaney said that funds have been allocated for support and awareness raising sessions.
- 31/14.9 Members approved the standards.
- 32/14 Item 15 – HCAI Target Monitoring Report including Death Data (PHA/10/02/14)**
- 32/14.1 Dr Little presented the report and agreed to follow up on any queries which members had. Mr Coulter queried the rise in MRSA over the summer months. Dr Harbison expressed concern about the rise in MRSA generally, but specifically in the Western Trust and asked for an update on the actions being taken to mitigate this increase. Dr Little agreed to follow up on

these queries.

32/14.2 Members noted the HCAI Report.

33/14 Item 16 – Human Resources Report (PHA/11/02/14)

33/14.1 Hugh McPoland joined the meeting and gave members an overview of the Human Resources report. He began by noting that although the report showed a large increase in staff numbers since 2009, it should be borne in mind that at the outset many posts had not been filled. He said that DHSSPS is currently seeking information about numbers of admin and clerical staff, and that many professional staff in PHA are classed as admin and clerical.

33/14.2 Mr McPoland said that PHA's rate of absenteeism was 3.82% and he outlined initiatives that would be undertaken by BSO, in conjunction with line managers, to review this. He noted that the main reasons for absence were mental health-related and that through Occupational Health and the running of Mind Matters programmes, BSO is being proactive in this area.

33/14.3 Mr McPoland said that in future, he hoped that HRPTS would be able to provide more detailed information on staff training. He said that to date approximately 50 staff had taken up places on the Emphasis programmes.

33/14.4 Mr McPoland gave an overview of the cost of agency staff and the results of a value for money exercise on the service provided by BSO to PHA.

33/14.5 Alderman Porter asked whether there was a culture of "working from home" within PHA. Mr McPoland said that this was not generally the case.

33/14.6 Mrs Erskine suggested that in future, the learning and development section should include details of the number of staff who have had an appraisal. Mr McPoland said that HRPTS would be able to collate this information in future.

33/14.7 Mr Mahaffy asked about staff absence and whether there could be a breakdown by directorate, or by banding. Mr McPoland agreed to look at this.

33/14.8 Dr Little expressed concern that some of the information in the report could be identifiable to individual members of staff. Mr McPoland said that he was not certain this was the case, but he would review this.

33/14.9 Members noted the Human Resources Report.

34/14 Item 17 – Any Other Business

34/14.1 Alderman Porter asked whether PHA looks at the benefits achieved from its projects, particularly smaller projects. The Chief Executive acknowledged the point and said that this was an issue PHA could look at as part of the development of its new Corporate Strategy.

34/14.2 There was no other business and the Chair drew the meeting to a close.

35/14 Item 18 – Date and Time of Next Meeting

Date: Thursday 20 March 2014

Time: 1:30pm

Venue: Public Health Agency

Conference Rooms

2nd Floor

12-22 Linenhall Street

Belfast

BT2 8BS

Signed by Chair: 

Date: 20/03/14

