

MINUTES

**Minutes of the 78th Meeting of the Public Health Agency board
held on Thursday 15 October at 1:30pm,
in Fifth Floor Meeting Room, 12/22 Linenhall Street,
Belfast, BT2 8BS**

PRESENT:

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| Mr Andrew Dougal | - Chair |
| Dr Eddie Rooney | - Chief Executive |
| Dr Carolyn Harper | - Director of Public Health/Medical Director |
| Mrs Mary Hinds | - Director of Nursing and Allied Health Professionals |
| Mr Edmond McClean | - Director of Operations |
| Mr Brian Coulter | - Non-Executive Director |
| Mr Leslie Drew | - Non-Executive Director |
| Mrs Julie Erskine | - Non-Executive Director |
| Mr Thomas Mahaffy | - Non-Executive Director |
| Alderman Paul Porter | - Non-Executive Director |

IN ATTENDANCE:

- | | |
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| Mr Simon Christie | - Assistant Director, Finance, HSCB (<i>on behalf of Mr Cummings</i>) |
| Mr Robert Graham | - Secretariat |
| Mrs Joanne McKissick | - External Relations Manager, Patient Client Council |

APOLOGIES:

- | | |
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| Councillor William Ashe | - Non-Executive Director |
| Mr Paul Cummings | - Director of Finance, HSCB |
| Mrs Fionnuala McAndrew | - Director of Social Care and Children, HSCB |

94/15	Item 1 – Welcome and Apologies	Action
94/15.1	The Chair welcomed everyone to the meeting and apologies were noted from Councillor Billy Ashe, Mr Paul Cummings and Mrs Fionnuala McAndrew.	

95/15 Item 2 - Declaration of Interests

95/15.1 The Chair asked if anyone had interests to declare relevant to any items on the agenda. No interests were declared.

96/15 Item 3 – Minutes of previous meetings:
• **Meeting of 20 August 2015**

96/15.1 The minutes of the previous meeting, held on 20 August 2015, were approved as an accurate record of the meeting.

97/15 Item 4 – Matters Arising

86/15 PHA Annual Business Plan 2015/16

97/15.1 The Chief Executive confirmed that, following approval by the PHA Board, the Annual Business Plan had been forwarded to DHSSPS and that DHSSPS had written to PHA confirming their acceptance of the Plan.

66/15 Commissioning Plan 2015/16

97/15.2 Mr Coulter asked whether there was any update on the Commissioning Plan. The Chief Executive advised that HSCB had been seeking formal clarification of some of the issues that PHA had raised but this had not yet been received. He said that he would raise this at the PHA's next Sponsorship Review Meeting with DHSSPS.

98/15 Item 5 – Chair's Business

98/15.1 The Chair informed members that he had met with Assistant Directors Mary Black and Janice Bailie and continued to be impressed by the range of work that the PHA is involved in.

98/15.2 The Chair said that he had attended a meeting of the Irish Cardiac Society, but was disappointed that the focus was not on prevention.

98/15.3 The Chair expressed his thanks to members for their attendance and participation at the recent Board away day on the Corporate Strategy.

99/15 Item 6 – Chief Executive’s Business

- 99/15.1 The Chief Executive began his business with an overview of recent developments with regard to unscheduled care. In terms of background, he explained that last July the Minister had set up a taskforce to look at 12-hour breeches, with membership including the Chief Medical Officer, Chief Nursing Officer and representatives of all HSC organisations. He advised that as of today, this work has progressed to a new stage which is being co-chaired by himself and Valerie Watts, Chief Executive, HSCB. He added that this was a significant development and presented a lot of challenges bringing the different organisations into unique partnerships. He explained that he would be co-chairing a Strategic Accountability Group, but that there would also be a Regional Unscheduled Care Group chaired by Pat Cullen (PHA) and Dean Sullivan (HSCB), as well as five locality networks, one in each LCG area.
- 99/15.2 The Chief Executive advised that the focus of this work was on core areas of public health, with emphasis on prevention as well as effective discharge, with an increased focus on the patient. He said that correspondence is being issued to the HSC today, and this together with terms of reference will be shared with Board members. He added that this work will place additional pressures on HSCB and PHA staff.
- 99/15.3 The Chief Executive informed members that a new webpage has been launched as part of the NI Direct website whereby the public can access up to date information on waiting times at emergency departments. This, he said, will help the public make better decisions in terms of where to access care. Mrs Hinds explained that the Patient Client Council was central to the development of this new webpage, as they co-ordinated a group to provide feedback on what the page should look like.
- 99/15.4 Mr Drew asked about the remit and timelines. The Chief Executive explained that the focus work was on emergency departments, but acknowledged that this is inter-related with all other aspects of care. He added that the task group has already been working for 14 months with a clear remit of eliminating 12-hour breeches. Mr Drew underlined that this is a significant piece of work. The Chief Executive agreed but noted that two of the HSC Trusts have almost eradicated their 12-hour

breeches. He added that in terms of financial resources, this work has been identified as a priority area.

99/15.5 Mrs McKissick thanked Mrs Hinds for acknowledging the work of PCC in the development of the information webpage and said that this showed a good example of co-design.

99/15.6 The Chair asked about the out of hours service and if the general public is aware of it, and if it has been successful. The Chief Executive said that PHA's concern initially was to reduce the 12-hour waiting times. Dr Harper said that there are increasing numbers of out of hours sessions, but these cannot be staffed with medical staff, and that there have been lengthy discussions about workforce planning in this area as population trends show that the population is growing, and getting older, therefore demand will increase.

99/15.7 The Chair asked whether there is a link between the use of these services and socio-economic groups. Dr Harper said that the issue is more to do with legacy and cultural behaviours and added that there is work to terms in terms of managing the flow of patients. She added that the Belfast Trust has been making good progress in this area, particularly with the new emergency department that has recently opened.

99/15.8 Members noted the Chief Executive's business.

100/15 Item 7 – Finance Update – PHA Financial Performance Report (PHA/01/10/15)

100/15.1 Mr Christie presented the Finance Report and advised that the year-to-date position showed a surplus of £450k against a budget of £34.5m, which is made up of a £300k surplus in non-Trust expenditure and a £149k surplus in management and administration. He added that the year-end position is projected to be a break even one.

100/15.2 Mr Christie highlighted the section in the report looking at non-Trust expenditure and explained that the majority of the surplus comes from within the Lifeline budget, where activity had reduced. He moved onto the management and administration budget and noted that £1.3m had been removed from this budget at the start of the year, but the fact that there was a surplus of

£149k was credit to the work of the Directors for their close scrutiny of this area. However, he said that PHA could not rest on its laurels at this point. He finished his overview of the report by saying that although the prompt payment statistics were below the DHSSPS target, it was close.

100/15.3 Mr Coulter said that at the Governance and Audit Committee meeting, the issue of Contact's financial viability had been raised and had been advised that this issue was being kept under review.

100/15.4 Mr Christie responded by explaining that PHA has a budget for the Lifeline contract, and that payments to Contact (who provide the service) are made when PHA receives invoices based on activity. He noted that the number of calls has been lower, in keeping with revised protocols to ensure compliance with the contract. He indicated that from PHA's perspective, there is little financial risk, but PHA would be mindful of Contact's sustainability. Mr Coulter asked what would happen if Contact decided not to run the contracts and the risks to the service. Mr Christie explained that PHA had undertaken its own due diligence checks and he did not see any reason why the service would not continue over the duration of the contract. He added that this is a contract that PHA has with a third party, and that the third party is required to adhere to the terms of the contract. Dr Harper advised that there are contingency arrangements in place and there are regular performance reviews.

100/15.5 Mr Drew said that continuity is important, as well as the consultation process and procurement of the new service. He suggested that it may not be in Contact's interest to maintain it, but the Chief Executive said that as long as Contact is receiving the funding, it is in their interest to maintain the service.

100/15.6 Mr Drew asked the £34m that is allocated to Trusts and whether there are mechanisms in place for monitoring how effectively this money is being used. Mr McClean explained that there are Service Level Agreements with Trusts with regular reporting arrangements and nominated identified officers for each contract, as well as clear escalation arrangements where issues of non-performance arise.

100/15.7 Mr Coulter asked about the strategic review referenced in the

section on management and administration expenditure. The Chief Executive explained that PHA is currently processing application for the Voluntary Exit Scheme (VES), but that there remained issues for PHA in terms of how it would absorb the required 15% savings outlined by DHSSPS, and whether there will be any flexibility as there was for 2015/16, or indeed a requirement to make further savings. He said that there are huge implications for PHA in terms of how it will conduct its business. Mr Coulter said that from a governance point of view, this represented an unsatisfactory position for the Board.

100/15.8 The Chair sought clarity on the impact of £2.8m of savings. The Chief Executive explained that if these savings were to be made fully from management and administration costs, it equated to possibly 45-55 posts being lost. The Chair commended the work of Directors for maintaining this financial position, given the current difficulties.

100/15.9 Members noted the Finance Report.

101/15 Item 8 – Investment Plan Update (PHA/02/10/15)

101/15.1 Mr McClean explained that this update gave members an overview of programme expenditure as at the end of September. He said that an additional £2m of funding had been provided to PHA on top of the £82.65m, but there were areas where PHA was awaiting additional funding.

101/15.2 Mr McClean drew members' attention to the proposal for the use of £400k of slippage and explained that these non-recurrent initiatives had been identified following discussions with Finance and the public health and nursing directorates.

101/15.3 Alderman Porter asked whether any sectors were being disadvantaged unduly because of the cuts to programme budgets. Mr McClean said that no specific sector was losing out, and that most of PHA's programme funding continued to support the community and voluntary sector.

101/15.4 The Chair noted that the funding on suicide prevention was higher than that of mental health and asked how the determinations were made in terms of where the money is spent. Dr Harper advised that the responsibility of

commissioning core services within mental health lies with the HSCB, and that PHA's role is a preventative one, therefore the majority of the funding is allocated to the Lifeline contract. She added that there are legacy budgets as well as demand-led services and that in some instances direction is given to PHA to comply with DHSSPS priorities.

- 101/15.5 Mrs McKissick asked for further detail on initiatives relating to older people's services and nursing. Mrs Hinds agreed to share this information with Mrs McKissick.
- 101/15.6 The Chief Executive noted that there were legacy budgets inherited by PHA, and also specific ring-fenced budgets, but that DHSSPS had begun to give greater flexibility to PHA in this regard. He said that PHA's procurement processes had allowed for more consistency in approach.
- 101/15.7 Mr Drew asked whether some of these contracts should be approved by the Board. Mr McClean said that many of the contracts are contained within programme planning proposals which are signed off annually by the Board. Mr Christie added that there is a Scheme of Delegated Authority (SODA), which is in line with both Standing Orders and Standing Financial Instructions that these are reviewed and approved annually by the Board. Alderman Porter said that there is a balance to be struck between the Board setting strategic direction and micro-managing the many contracts and he felt that there was currently an appropriate balance. Mr Drew made reference to the recent Northern Ireland Audit Office report on the Northern Ireland Events Company. Mr Christie noted that the report had been raised at the Governance and Audit Committee.
- 101/15.8 The Chair asked about the outcomes of projects and how these were objectively analysed, and if they were 1-year or 3-year contracts. Mr McClean said that there were mainly 3-year contracts, but with evaluation built in. Mr Christie reiterated that the Board approves the PHA's Standing Orders and Standing Financial Instructions, as well as its Assurance Framework, which gives assurances in areas such as procurement.
- 101/15.9 The Board noted the Investment Plan update.

102/15 | **Item 9 – Governance and Audit Committee Update
(PHA/03/10/15)**

- 102/15.1 Mr Coulter advised members that the draft minutes of the meeting of 10 June had now been formally approved by the Committee. He said that at the meeting on 10 June, the Annual Report and Accounts had been prepared, and that the Committee had met in private with the external auditors, but that there were no major issues. At the meeting in June, Mr Coulter said that the Committee had considered the Corporate Risk Register on which two new risks had been added.
- 102/15.2 Mr Coulter moved on to update members on the meeting of 14 October. He began by saying that members had considered the recent NIAO report on the Northern Ireland Events Company. The Chair said that all members should read this report.
- 102/15.3 Mr Coulter said that the Committee had received the Report to those Charged with Governance, which commended staff on the high standard of financial reporting and accounting. He said that the report cited two risks which related to BSO Shared Services and contracts with the community and voluntary sector, however progress was being made in both these areas.
- 102/15.4 Mr Coulter updated members on the Internal Audit progress report and said that Internal Audit would be carrying out a follow-up audit on any critical issues. He said that the Committee had again considered the Corporate Risk Register and that a further new risk had been added relating to property management. He acknowledged that there been a significant amount of activity recently in seeking out options for PHA, but with no resolved outcome as yet. Mr Coulter added that the recent Internal Audit report on PHA's risk management processes noted that there is not an annual Board workshop to consider the Corporate Risk Register, but he was content that members are engaged in the risk management process under the current arrangements.
- 102/15.6 Mr Coulter said that the Committee had considered the Assurance Framework and also correspondence relating to the Controls Assurance Standards of which 15 of the 22 apply to PHA, three of which will be audited by Internal Audit. He said that the Committee had considered a suite of ICT Security Policies, as well as the Mid-Year Assurance Statement which is

being recommended to the Board today for approval.

102/15.7 Mr Coulter advised that the Committee had received a report on HSCB/PHA/BSO Emergency Preparedness. He asked whether there were any ramifications in the light of the recent re-emergence of an Ebola case in Scotland. Dr Harper said that the same protocols would apply and that there would be follow-up with anyone who may have been in contact with this individual. Mr Coulter queried whether GPs are equipped to recognise Ebola, but Dr Harper said that GPs and staff in emergency departments are aware of the arrangements.

102/15.8 The Chair returned to the issue about accommodation and said that he had discussed this with the Chief Executive, and that this was a priority area going forward.

102/15.9 The Board noted the Governance and Audit Committee update.

103/15 Item 10 – Mid-Year Assurance Statement (PHA/04/10/15)

103/15.1 The Chief Executive highlighted the internal control divergences within the Mid-Year Assurance Statement and in particular the issues relating to accommodation. He acknowledged that, to date, two full business cases had been prepared relating to accommodation which had taken a lot of effort, but there remained no solution at this time.

103/15.2 The Chief Executive said that the issue of accommodation will be raised at the Mid-Year Accountability Review meeting, and that a joint meeting should take place with Health Estates and PHA's sponsor branch. He acknowledged that the current situation is unsatisfactory.

103/15.3 The Board approved the Mid-Year Assurance Statement.

104/15 Item 11 – Review of Disability Action Plan 2013-18 (PHA/05/10/15)

104/15.1 Mr McClean said that the Disability Action Plan had been reviewed and noted that since Dr Jeremy Harbison had stepped down from the Board, there was a need to appoint another non-executive as a disability champion. He drew members' attention to the action plan and particularly the action relating to PHA

giving opportunities to those with disabilities, as appropriate.

104/15.2 Mr McClean advised that all directorates had been involved in the development of this Plan and sought members' approval to forward this to the Equality Commission.

104/15.3 The Chair asked how many PHA staff were registered as disabled. Mr McClean said that no staff were formally registered, but was aware that a number of staff may otherwise be considered as having a disability and had been involved in recent work.

104/15.4 The Board approved the Disability Action Plan.

105/15 Item 12 – Presentation on Public Information Campaigns

105/15.1 Mr McClean welcomed Mr Stephen Wilson and Ms Linda Giles to the meeting and invited them to give an update on Public Information Campaigns. Mr Wilson cautioned that campaigns should not be seen as the be all and end all of creating awareness of particular issues.

105/15.2 Ms Giles gave members an overview of the campaigns for 2015/16 and the process for approval of these which involves PHA, DHSSPS and the Government Advertising Unit. She showed how the overall funding for campaigns has decreased in recent years before explaining to members how a campaign is developed, from the initial research stage through to evaluation.

105/15.3 To finish, Ms Giles showed members some materials being used in current campaigns relating to cancer, sexual health and obesity.

105/15.4 Mr McClean said that during any campaign there is always engagement with the target audience. The Chair asked this is facilitated. Mr Wilson explained that this is through a range of stakeholder groups. He added that it is important that all campaigns can demonstrate value for money and effectiveness. He said that although PHA has not committed at this point to undertaking an alcohol and drugs campaign, as evidence to date suggests that this is not a successful method of changing behaviour, albeit that PHA still intends to get messages out through different media.

- 105/15.5 | The Chair asked about the reduction in funding. Mr Wilson said that this has been reduced year-on-year, but that there may be some possibility that the current level of funding would be retained for 2016/17. He said that PHA had asked about a 3-year programme, but commitment could not be given on that.
- 105/15.6 | Mr Coulter asked about the cancer campaigns. He said that the breast cancer campaign was a gender-specific one and he asked whether there would be a similar campaign for prostate cancer. He also asked about co-ordinating campaigns with other organisations. Mr Wilson said that PHA had spent a lot of time with its advertising partners considering the best strategy, based on the experience in England. He explained that there are issues in terms of belief that you can recover from cancer, and that is the message that is relevant across all types of cancer. He added that across each of the types of cancers, there are different signs and symptoms and this has to be taken into account when developing a campaign.
- 105/15.7 | Mr Wilson said that PHA had planned to do a 3-year campaign across a range of cancers, based on the experience of England and Scotland, and closely involving the different cancer charities in Northern Ireland. He added that a planned campaign on bowel cancer had been dropped, but an alternative campaign may be looked at.
- 105/15.8 | The Chair commended the professionalism and quality of the work undertaken on campaigns.
- 105/15.9 | The Board noted the update on Public Information Campaigns.
- 106/15 Item 13 – PHA Tobacco Control Update**
- 106/15.1 | Dr Harper presented a report on tobacco control. She reaffirmed that PHA's position is that e-cigarettes are not a licensed nicotine replacement therapy. Mr Coulter asked the passive smoking effects of e-cigarettes, but Dr Harper said that was no evidence yet about this. She said that the use of e-cigarettes should be included in policies on smoking in public places. The Chair said that he would like to see a ban on vaping in public.
- 106/15.2 | Mr Drew asked about the HSC smoking ban. Dr Harper said that this would come into effect next year.

106/15.3 The Board noted the update on tobacco control issues.

107/15 Item 14 – Update on Corporate Strategy

107/15.1 The Chair said that members would have received the write-up following the Board away day on the Corporate Strategy. He said that the next step is to transfer the recommendation from the away day into a series of steps to finalise the development of the Strategy. He noted that the next meeting of the Corporate Strategy Project Board is due to take place on 20 October.

107/15.2 The Chief Executive said that the development of the Strategy is a live exercise, and that this next meeting will look at all of these issues, including the chairing of that Project Board, as it is a non-executive-led Project Board.

107/15.3 The Board noted the update on the Corporate Strategy.

108/15 Item 15 – Any Other Business

108/15.1 Mrs McKissick asked when the next reports on 10,000 Voices were due to be published. Mrs Hinds advised that they would be brought to the next meeting of the PHA Board.

109/15 Item 16 – Date and Time of Next Meeting

Date: Thursday 19 November 2015

Time: 1:30pm

Venue: Conference Rooms 3+4

2nd Floor

12/22 Linenhall Street

Belfast

BT2 8BS

Signed by Chair:



Date: 19 November 2015