

**MINUTES**

**Minutes of the 79<sup>th</sup> Meeting of the Public Health Agency board  
held on Thursday 19 November at 1:30pm,  
in Conference Rooms 3+4, 12/22 Linenhall Street,  
Belfast, BT2 8BS**

**PRESENT:**

- |                         |   |
|-------------------------|---|
| 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                              |
| Councillor William Ashe | - Non-Executive Director                              |
| 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:**

- |                      |                                   |
|----------------------|-----------------------------------|
| Mr Robert Graham     | - Secretariat                     |
| Mr Paul Cummings     | - Director of Finance, HSCB       |
| Mrs Joanne McKissick | - External Relations Manager, PCC |

**APOLOGIES:**

- |                        |  |
|------------------------|--|
| Mrs Fionnuala McAndrew | - Director of Social Care and Children, HSCB |
|------------------------|--|

		<b>Action</b>
<b>110/15</b>	<b>Item 1 – Welcome and Apologies</b>	
110/15.1	The Chair welcomed everyone to the meeting and apologies were noted from Mrs Fionnuala McAndrew.	
<b>111/15</b>	<b>Item 2 - Declaration of Interests</b>	
111/15.1	The Chair asked if anyone had interests to declare relevant to any items on the agenda. No interests were declared.	

**112/15 Item 3 – Minutes of previous meetings:**

• **Meeting of 15 October 2015**

112/15.1 The minutes of the previous meeting, held on 15 October 2015, were approved as an accurate record of the meeting.

**113/15 Item 4 – Matters Arising**

113/15.1 There were no matters arising.

**114/15 Item 5 – Chair’s Business**

114/15.1 The Chair made reference to the recent Ministerial announcement on the future of health and social care in Northern Ireland. He advised members that PHA staff had had an opportunity to attend a workshop at which the Chief Executive outlined key aspects of the announcement and what this might mean. He said that changes provided an opportunity to do things differently, and for innovation, and advancing new ideas for a changing environment. He added that the PHA should not let slip any opportunities which might be seized at this brief window in time.

114/15.2 The Chair said that he had met with all non-executive members on a 1:1 basis, and altogether, and that this had been useful. He added that he had attended a Safe and Well event in the Down Lisburn area.

114/15.3 The Chair informed members that he had met with Assistant Directors Janet Little, Mary Black and Lorraine Doherty and continued to be impressed by the range of work in which the PHA is involved.

114/15.4 The Chair said that he had attended one of the consultation events on Lifeline and that he was planning to attend the next Board meeting of Public Health England.

**115/15 Item 6 – Chief Executive’s Business**

115/15.1 The Chief Executive also made reference to the Ministerial announcement and said that he was expecting further information from DHSSPS regarding the constitution of the expert panel and the consultation process.

- 115/15.2 The Chief Executive said that he had attended the AGM of Resurgam in Lisburn at which Mervyn Storey attended. He said that Mr Storey had been complimentary of the work of PHA.
- 115/15.3 The Chief Executive said that as part of the next phase of the work relating to local government and the implementation of Making Life Better, he had attended a series of meetings with local Councils. He made specific reference to the work undertaken by Belfast City Council on their City plan which maps together their relationships with other regional and statutory bodies.
- 115/15.4 The Chief Executive said that he had visited three areas in Ballymena with councillors and local community representatives.
- 115/15.5 Alderman Porter outlined an example of how the work that PHA does in local communities is important. He said that £20k of PHA funding had helped secure £500k of future investment from other bodies.
- 116/15 Item 7 – Finance Update – PHA Financial Performance Report (PHA/01/11/15)**
- 116/15.1 Mr Cummings presented the Finance Report and advised that the year-to-date position showed a surplus of £21k against a budget of £43.8m, which is made up of a £224k deficit in non-Trust expenditure and a £245k surplus in the management and administration budget. He added that the year-end position is projected to be a break even one.
- 116/15.2 Mr Cummings highlighted the section in the report looking at non-Trust expenditure and explained that the surplus in the Lifeline budget is being offset by expenditure within both Health Improvement and Health Protection. He clarified that these are not overspends, but issues regarding profiling the budget across the year.
- 116/15.3 Mr Drew asked if there was a reason for the underspend. Mr Cummings explained that this was due to a change in activity levels. Dr Harper added that the reduction has followed recent meetings with Contact regarding their management of the contract. Mr Drew sought assurance that the needs of callers

were continuing to be met. Dr Harper indicated this was at the core of PHA's work with the provider as well as monitoring and review of the contract. Mr McClean explained that the issue was about ensuring that callers were receiving appropriate follow-up therapies consistent with their specific needs.

116/15.4 Dr Harper advised that demand for the follow-on counselling services has decreased. Mr Drew clarified that the previous level of calls being invoiced was unnecessarily high. Dr Harper said that following a clinical audit, this was noted to be the case and that PHA took action in this regard. Mr Cummings added that mediation had been required. Mr Drew asked whether the business case reflected the current volume of activity and whether going forward the contract should cost less. Dr Harper said that this should be case, but she added that any underspend is being reinvested into other mental health and suicide prevention work.

116/15.5 Alderman Porter noted that this has been a major issue for the PHA Board and it was refreshing to see this reduction.

116/15.6 Mr Cummings moved on to the management and administration budget and said that PHA should be pleased that it is achieving savings despite the reduction in this budget for 2015/16.

116/15.7 Mr Cummings drew members' attention to the mid-year balance sheet at the end of the Report.

116/15.8 Members noted the Finance Report.

**117/15 Item 8 – Performance Management Report – Corporate Business Plan and Commissioning Plan Directions Targets for Period Ending 30 September 2015 (PHA/02/10/15)**

117/15.1 Mr McClean presented the performance management report for the first six months and said that it covered both the Business Plan targets and the Commissioning Plan direction targets. He said that at this stage two of the targets were rated "red" and 18 were rated "amber". He noted that many of these were rated this way due to factors outwith PHA's control.

117/15.2 Alderman Porter asked whether of the targets had been carried over from previous years but Mr McClean advised that these

were new targets.

- 117/15.3 Mr Mahaffy asked whether the “green” rating for Making Life Better was truly reflective of progress to date and what this was being measured against. The Chief Executive began his response by saying that a fuller update on Making Life Better would be presented at a future meeting. He said that the targets to date principally related to the establishment of the different forums and that these had begun to meet. Mr Mahaffy said he hoped that Making Life Better would have a greater impact than the previous Investing for Health strategies. The Chief Executive said that he also hoped that this would be the case, and said that it was critical that there was buy-in to Making Life Better across all sectors. Mr Mahaffy made reference to the Anti-Poverty Strategy. The Chief Executive said that it was important that all of these different strategies, including anti-poverty be fed into the next Programme for Government.
- 117/15.4 Mr Coulter made reference to the C difficile and MRSA levels and expressed concerns about the Trusts exceeding their targets. He suggested that this action should be rated “red”. Dr Harper explained that there are differences between Trusts, and that in any Trust where the target is being exceeded PHA would meet with Trusts and local GPs. She said that with regard to anti-microbial resistance, PHA has limited resources to take forward work in this area, but that this area is seen as a priority over the coming years. She said that with regard to C difficile and MRSA, Trusts have made significant progress in recent years and that Trusts in Northern Ireland are holding their own in comparison to Trusts across the rest of the UK.
- 117/15.5 Mr Coulter said he understood PHA’s role to be an advisory one. Dr Harper agreed that DHSSPS sets the policy and PHA has to monitor this and, in response to a question from the Chair, she advised that there is an Escalation Policy. She pointed out that the number of cases is quite small in relative terms.
- 117/15.6 Mr Drew said it was pleasing to see so many targets rated as “green”. He asked that, given the proposed changes, was there any indication as to which delivery areas would be affected. The Chief Executive said that it would depend on which functions were transferred.

- 117/15.7 Mr Mahaffy asked about the commissioned report relating to PPI. Mrs Hinds agreed to send Mr Mahaffy a copy of this report.
- 117/15.8 Mrs Erskine said that she hoped that the new HRPTS system would allow PHA to monitor the registration of nurses and midwives. Mrs Hinds said that PHA is looking at alternative solutions.
- 117/15.9 Mr Coulter asked about the Diabetic Retinopathy Screening Programme. He noted the absence of a key member of staff and asked about the impact of this on the programme. Dr Harper acknowledged that there are backlog issues, but the programme is getting back on track. The Chair asked if there was any evidence of a lower take-up on this programme from those of lower socio-economic classes. Dr Harper said that there is an extensive action plan, and as part of this there are videos on the PHA website from patients who have previously used the programme and want to encourage others to come forward.
- 117/15.10 The Chair congratulated staff on their achievements to date. Members noted the performance management report.
- 118/15 Item 9 – Unscheduled Care**
- 118/15.1 The Chief Executive reminded members that at the last meeting he had announced that new arrangements were being put in place to take forward work in unscheduled care. He said that the Regional Unscheduled Care Group had held its first meeting and that the Strategic Accountability Group, which would be jointly chaired by himself and Valerie Watts, Chief Executive of HSCB, was holding its first meeting on 7 December.
- 118/15.2 The Chief Executive noted that this is a significant additional workload for both HSCB and PHA with a lot of resources being consumed and no backfill.
- 118/15.3 The Chair asked if there was a timeline for the completion of this work. The Chief Executive said work is being undertaken every day, but this was a long term project and the meeting of 7 December would be used an opportunity to evaluate progress to date.
- 118/15.4 Members noted the update on unscheduled care.

## **119/15 Item 10 – Lifeline Consultation**

- 119/15.1 Dr Harper gave members an update on the Lifeline consultation process. She said that there have been a number of consultation events, and that in general the questions raised at these events related to the separation of the telephone from the follow on services, and the skillset of those handling the calls. She said that all of the main themes from the consultation would be collated and fully considered.
- 119/15.2 Dr Harper outlined the proposed next steps. She said that there would be a workshop for PHA Board members on 17 December to look at a draft of the paper summarising the main issues emerging through the consultation process which would be formally brought to the PHA Board in January 2016. She said that to date 157 responses had been received to the consultation.
- 119/15.3 Alderman Porter asked whether specific groups were targeted as part of the consultation, and when responses are received, are any major concerns or issues raised dealt with immediately. Dr Harper said that she would check this, and in terms of responses the summary report will show the numbers of responses made by individuals, organisations, staff etc.
- 119/15.4 Mrs Erskine and Mr Drew both stated that they had attended one of the consultation events and commented on the professionalism of the PHA staff participating.
- 119/15.5 Mr McClean said that PHA Board members would receive a copy of each of the submissions.
- 119/15.6 Members noted the update on the Lifeline consultation.

## **120/15 Item 11 – Media Monitoring on Suicide**

- 120/15.1 Mr McClean welcomed Mr Stephen Wilson and Ms Roisin McManus to the meeting and invited them to deliver the presentation on media monitoring on suicide.
- 120/15.2 Mr Wilson explained that the area of media monitoring on suicide has been well researched and the way that the press pick up and

report on suicide has raised major concerns, and this was highlighted in the Protect Life Strategy.

- 120/15.3 Ms McManus gave an overview of the media monitoring and explained that in her role she would analyse each reference to suicide in the press and if necessary, follow this up with the appropriate organisation if it is deemed that the coverage is inappropriate. She added that PHA had begun to work with the universities, offering courses in communications, and the National Union of Journalists.
- 120/15.4 Mr Wilson said that PHA has begun to work with the Western Trust as part of its Community Response Plan. He said that there is a need to be more responsive in terms of closing down sites on social media.
- 120/15.5 Alderman Porter asked whether an article that has been shared on social media can be taken down. Ms McManus explained that if there is a link to an article and the article has been amended then the link will direct people to the updated article.
- 120/15.6 Mr Drew suggested that PHA could work with other organisations in this e.g. PSNI and Translink.
- 120/15.7 Mr Coulter welcomed this work but added that with the advent of social media, the scale of the problem is huge and it is important to come up with ways of addressing these issues.
- 120/15.8 Mrs McKissick asked who was delivering the training. Ms McManus advised that it was herself and a colleague from Samaritans. Mrs McKissick asked what would happen in a situation where an organisation does not comply with the guidelines set. Mr Wilson said that the guidelines developed by Samaritans have a lot of credibility and are generally followed.
- 120/15.9 The Chair asked if editors are responsive when issues are raised. Ms McManus said that in approximately two-thirds of cases PHA would receive a response. She added that the training is not targeted solely at journalists but also editors.
- 120/15.10 Members noted the presentation on media monitoring on suicide and thanked Ms McManus and Mr Wilson for an insight into this important area of PHA work.



- 121/15** **Item 12 – 10,000 Voices Phase 2: Regional Report Relating to Care in Your Own Home (October 2015) (PHA/03/10/15)**
- Item 13 – 10,000 Voices: Regional Report on Experience of Nursing and Midwifery Care Key Performance Indicators (KPIs) (PHA/04/10/15)**
- 121/15.1 Mrs Hinds presented the two reports which were compiled following responses to the 10,000 Voices initiative. She said that she and Mr Cummings chair the steering group. To gather the responses for the initiative she said that staff had garnered stories from people in shopping centres as well as in their own home. In general, she said that the stories were positive, but that there is more learning from stories which are negative.
- 121/15.2 In terms of the first report, “Care in Your Own Home”, Mrs Hinds said that the main issues are isolation and loneliness; timing of calls and call allocation; care of clients with dementia; and communication. She said that the issue of isolation and loneliness is a major one and one that the HSC cannot resolve on its own, and that there should be joined-up working with organisations like church groups and voluntary groups. She added that a workshop will be planned as this is part of the Making Life Better strategy.
- 121/15.3 Mr Cummings said that there are workforce issues for HSC and that the current economic climate and the introduction of a new living wage will see the situation worsen.
- 121/15.4 Mr Mahaffy asked if there was a breakdown available by provider so that comparisons could be made. He also noted that there was a disproportionate number of responses from Trusts. Mrs Hinds said that people volunteered their stories and that Trust employees would tend to ask people in Trust settings for their stories, but she said that there were efforts to capture as many stories as possible from as many different settings as possible.
- 121/15.5 Councillor Ashe asked whether it was more productive for agencies to carry out a large number of short visits, or a shorter number of longer visits to patients in their own homes. Mr Cummings said that it was more likely that Trusts would allocate more time to with the more difficult calls. Mr Drew said that there would be issues in terms of the quality of the care provided in

short calls.

- 121/15.6 The Chair asked about the number of providers and if comparisons were possible, but Mr Cummings explained that one Trust has 37 providers.
- 121/15.7 Mrs Erskine asked about an action plan. Mrs Hinds said that PHA would wish to take time to review what can be done based on the findings in order to have the biggest impact.
- 121/15.8 Alderman Porter asked if the inputs are confidential. Mrs Hinds confirmed that each story is confidential, but any concerns raised are immediately escalated. Alderman Porter said that every story is vital and Mrs Hinds agreed adding that perhaps in a setting like a shopping centre people may be inclined to say more about their experiences.
- 121/15.9 Mrs McKissick said that in the main, the report supported findings from work undertaken by PCC, namely that care visits are rushed and that there are feelings of isolation and that there is a need to have a workshop which would involve people and carers. She went on to say that the issue of isolation should be looked at by Councils as part of their remit. Mrs Hinds noted that this is where Making Life Better will become important.
- 121/15.10 Mrs McKissick said that the recent Domiciliary Care Review is quite technical and asked whether there were other ways of using the information from 10,000 Voices to better inform future direction. Mrs Hinds said that this report will be shared with Trusts and they will be held to account to deliver on the recommendations.
- 121/15.11 Mr Coulter welcomed the report and said it contributed to the understanding of issues around domiciliary care. He said that one of the biggest concerns for him is about domiciliary care which is delivered by patient's own families and variances around the quality of this. He expressed concern about the variability across Trusts with regard to sheltered housing. Finally, he asked about the rigour of this exercise and if there would be any external evaluation of the 10,000 Voices project.
- 121/15.12 Mrs Hinds said that the project is held in high regard and there was a presentation about the programme delivered to the Kings

Fund in London. She said that the Sensemaker tool which is used to collate the stories can show highlight areas that staff can focus on to resolve issues. Mr Coulter said that the tool is not used for evidence-based commissioning. Mr Cummings said that the findings have forced commissioners to look at fresh ideas, but he added that the majority of this type of care is not carried out by the Trusts, where there could be up to 50 providers that we have limited control over. He went on to say that the issue of social isolation is not one that the health service alone can solve. He said that report has highlighted that a situation cannot continue whereby the tendering process leads to procuring the cheapest, and therefore, lowest quality of service.

- 121/15.13 The Chief Executive said that the use of Sensemaker has allowed PHA to analyse information better, and this added value is allowing concerns to be picked up and dealt with immediately.
- 121/15.14 Mr Drew said that in terms of procurement, there was a need to be smarter and build in criteria requirements. Dr Harper outlined to members the example of a model being used in Holland.
- 121/15.15 Mrs Hinds moved onto the second report which related to Nursing and Midwifery Key Performance Indicators. She said that there are good examples of care, but there are issues with regard to staffing levels and that there are efforts being made to increase the number of nurses with discussions taking place with heads of nursing regarding this.
- 121/15.16 Mrs McKissick said that its findings concur with those of a recent piece of work by PCC. She noted that there are issues of expectant mothers feeling that they are not being listened to and not being taken seriously. Overall, she welcomed the report and its recommendations.
- 121/15.17 Members approved the two 10,000 Voices Reports.

#### **122/15 Item 14 – Any Other Business**

- 122/15.1 There was no other business.

**123/15 Item 15 – Date and Time of Next Meeting**

Date: Thursday 17 December 2015

Time: 1:30pm

Venue: Conference Rooms 3+4  
2<sup>nd</sup> Floor  
12/22 Linenhall Street  
Belfast  
BT2 8BS

Signed by Chair:



Date: 17 December 2015