

**Minutes of the 33<sup>rd</sup> Meeting of the Public Health Agency board  
held on Thursday 18 August 2011, at 1:30pm,  
The Bann Room, Farset International,  
466 Springfield Road, Belfast, BT12 7DW**

**PRESENT:**

- |               |   |
|---------------|---|
| Ms M McMahon  | - Chair   |
| Mr E McClean  | - Director of Operations                              |
| Dr C Harper   | - Director of Public Health/Medical Director          |
| Mrs M Hinds   | - Director of Nursing and Allied Health Professionals |
| Mrs J Erskine | - Non-Executive Director                              |
| Mrs M Karp    | - Non-Executive Director                              |
| Mr T Mahaffy  | - Non-Executive Director                              |
| Mr R Orr      | - Non-Executive Director                              |

**IN ATTENDANCE:**

- |               |  |
|---------------|--|
| Mr P Cummings | - Director of Finance, HSCB                  |
| Dr A Mairs    | - Consultant in Public Health                |
| Mr C McMullan | - Cancer Screening Programmes Manager        |
| Dr M Neely    | - Assistant Director, HSC R&D                |
| Ms J Jackson  | - Chief Executive's Office/Committee Manager |
| Mrs H Quigley | - Secretariat                                |

**APOLOGIES:**

- |                |  |
|----------------|--|
| Dr E Rooney    | - Chief Executive                            |
| Mrs F McAndrew | - Director of Social Care and Children, HSCB |
| Mrs M Hully    | - Chief Executive, Patient Client Council    |
| Dr J Harbison  | - Non-Executive Director                     |

**Chair's Business**

**77/11** The Chair welcomed everyone to the meeting and asked if anyone had interests to declare before the meeting commenced. None were declared.

**78/11** The Chair updated members on a number of duties she had undertaken since the previous board meeting. Of particular note were the following:

- *Appointment panels met for the Local Government board*

*members*

- *Performance assessments for Non-Executives have been completed*
- *A paper was tabled at the meeting for members' consideration on dates and topics for the PHA board workshops. These have been confirmed until December 2012. It was suggested that PHA board workshops would be reviewed at the May board review workshop in 2012.*

The Chair advised that all actions had been completed following the PHA board Away Days held on 16 and 17 June 2011.

#### **79/11 Chief Executive's Business**

The Chair advised that the Chief Executive had been greatly involved with the Belfast Transplant Games during the 4 to 7 August 2011.

Mrs Hinds advised members that the Minister, following his attendance at events around the World Police and Fire Games in New York, has a programme of visits to healthcare providers in the US. These include some time to be spent with partners in Boston on the connected health agenda. Dr Andrew McCormick has suggested that Mr Eddie Ritson accompany the Minister on the Boston leg of this visit, with a view to preparing the ground for events in October, when Minister Poots and Minister Foster will both be in Boston.

Mr Ed McClean informed members that HSCB had proposed a workshop for reviewing and signing off the Trust Delivery Plans in the period of 22 to 27 September 2011.

Mr McClean will liaise with Mr Bloomfield regarding confirmation of the date and time for the workshop.

**Mr McClean**

#### **80/11 Minutes of the PHA board Meeting held on 16 June 2011**

Members agreed the minutes of the meeting held on 16 June 2011 as an accurate record of the meeting. The minutes were duly signed by the Chair.

#### **81/11 Minutes of the PHA Special board Meeting held on 30 June 2011**

Members agreed the minutes of the meeting 30 June 2011, to discuss the final joint Commissioning Plan, as an accurate

record of the meeting. The minutes were duly signed by the Chair.

**82/11 Matters Arising**

Finance Report

Mr Cummings advised members that the Month 2 Finance Report had been circulated to all PHA board members, as agreed at the last PHA board meeting.

**83/11 Finance Report**

Mr Cummings provided an update to PHA board members on the following issues:

- *Summary of budgeted / actual expenditure position for PHA as of 30 June 2011*
- *Key financial issues for 2011/12 include delivery of £2.534m recurrent savings and control of administrative costs - £16.5m – can only be exceeded with DHSSPS approval*
- *Up to 30.06.11 underspend of £220,000 S&W and £63,000 G&S – total = £283,000*
- *Current Programme surplus of £6.011m – information returned to Operations from budget holders suggests PHA planned expenditure broadly in line with allocation.*

Mr Cummings also reported to members that PEDU opted to look at financial services this year. The HSCB met with PEDU on Tuesday and discussions had taken place on how to improve the efficiency of the health service, and look at ways to develop the situation for the year ahead.

**84/11 Statutory Supervision of Midwives Update; Reports and ICM Conference**

Mrs Hinds introduced Mrs Verena Wallace to PHA board members to talk to the paper and provide a presentation regarding “Statutory Supervision of Midwives Update; Reports and ICM Conference”.

Mrs Wallace reported that the Local Supervising Authority (the PHA) was reviewed in March 2011 and the Nursing & Midwifery Council’s report had been published. It is positive about Supervision of Midwives in the PHA and notes progress made since the reviews of the legacy WHSSB & NHSSB in 2009.

Mrs Wallace also noted the successful achievement of 53 out of 54 standards with partial achievement of the remaining standard.

She also advised that she attended the ICM in Durban where the United Nations Population Fund (UNFPA) report ‘The State of the World’s Midwifery; Delivering Health Saving Lives’ was launched in front of 3000 midwives and others interested in maternity care from over 100 countries. The shared aim of the delegates and speakers from around the world was to learn about best practice with the aim of reducing maternal and newborn mortality and morbidity globally.

The Chair thanked Mrs Wallace for the comprehensive update.

Members noted the report.

#### **85/11 NI Breast Screening Programme Annual Report & Statistical Bulletin**

Dr Carolyn Harper introduced Dr Adrian Mairs, Consultant in Public Health, to PHA board members to talk to the paper “NI Breast Screening Programme Annual Report & Statistical Bulletin” and also provide a presentation.

Dr Mairs reported that this was the first Annual Report and Statistical Bulletin for the Breast Screening Programme since the establishment of the PHA. It covers the period 1 April 2009 to 31 March 2010. The report has been reviewed by the regional breast screening quality assurance committee.

In general the Northern Ireland Breast Screening Programme was performing well in 2009/10 and met each of the key standards. A number of standards relating to process measures were not achieved by individual breast screening units. Comparison with previous years shows the significant improvements that individual breast screening units have made in process measures such as screen to routing recall, screen to assessment and round length. Comparison with statistics for England indicates that there may be potential for improvement in the invasive cancer diagnosis rate albeit, it is recognised that the prevalence of breast cancer is higher in England than in Northern Ireland.

This report is one component of the breast screening QA function. Satisfactory performance against the national standards tells us that the programme as a whole is performing well. Dr Mairs emphasized it does not tell us how individuals within the programme are performing and it can mask poor performance.

As part of the governance arrangements for breast screening QA the PHA Board was asked to consider approving the report for publication on the PHA website.

Discussion centred on those not presenting for screening and recent research reports on the effectiveness of screening. Dr Mairs advised that the PHA is currently looking at ways of including outreach to 'at risk' groups and better information for women, so that they may make an informed choice about attending for breast screening.

Members approved the report for publication on the PHA website.

The Chair thanked Dr Mairs for the detailed update and presentation to the PHA board members.

## **86/11 Business Case for the Implementation of AAA Screening within NI**

Dr Adrian Mairs presented the paper "Business Case for the Implementation of AAA Screening within NI" and he advised that The UK National Screening Committee has recommended that abdominal aortic aneurysm (AAA) screening can be offered to men aged 65.

In Northern Ireland, this policy was endorsed by a CMO letter dated 10 November 2009 (HSS (MD) 52/2009). The letter stated that an ultrasound screening should be offered to all men during the year they turn 65 and, on request, for men over 65.

The Department of Health, Social Services and Public Safety in Northern Ireland has also, in Priorities for Action 2010-2011, tasked the Public Health Agency, working with the HSC Board and Trusts, to commence preparatory work for the phased introduction of screening arrangements for abdominal aortic aneurysm.

AAA Screening is currently being rolled out across England with full implementation to be achieved by the end of 2012/13. In Scotland implementation is planned for June 2012 and Wales 2013. In Northern Ireland preparatory work is underway with a planned implementation of June 2012.

The Chair thanked Dr Mairs for this paper to PHA board members.

The business case was approved by members.

### **87/11 Completing Roll out of the NI Bowel Cancer Screening Programme**

Dr Carolyn Harper introduced Mr Colin McMullan to talk to the paper "Completing Roll out of the NI Bowel Cancer Screening Programme". Mr McMullan advised that the Bowel Cancer Screening Programme (BCSP) was launched in April 2010 in the Western and Northern Trust areas and was subsequently extended to the South Eastern Trust area from the end of June 2010.

It had been agreed by the BCSP Project Board that screening colonoscopy should only be provided in an endoscopy unit which has successfully achieved accreditation from the Joint Advisory Group on Gastrointestinal Endoscopy (JAG). Roll out in the Southern and Belfast Trust areas were delayed because they did not meet the criteria to achieve JAG accreditation, including targets for endoscopy waiting times.

The paper outlined proposals to complete the roll out of the NI BCSP by considering the full requirements of JAG accreditation with the impact of withholding screening for the two Trust populations. It outlines the issues caused by delaying roll out and actions being taken to reduce waiting times for the symptomatic service. The paper was approved by PHA's Agency Management Team on 5 July 2011.

Members noted the document.

The Chair thanked Mr McMullan for talking to PHA board members on the above document.

**88/11 LGB&T HSC Staff Forum and Summary of LGB&T HSC Staff Engagement**

Dr Carolyn Harper advised the purpose of the papers was to update PHA Board on the progress of the LGB&T HSC Staff engagement and to gain approval for the next steps.

The Joint Trade Union Forum asked the Public Health Agency to facilitate the exploration of establishing an LGB&T Staff Forum for HSC staff. The PHA engaged with LGB&T staff across the HSC organisations through two engagement events and an anonymous online survey to gauge interest and need.

The summary paper presented findings gathered from the engagement process with LGB&T HSC staff.

Dr Harper outlined proposed next steps:

- Meet with Trust HR Directors in order to disseminate information via senior management in HSC organisations
- Initiate the LGB&T Staff Forum – first meeting 15 September 2011
- Engage with Carecall to identify any themes of concern from LGB&T staff
- Progress any issues derived from the Forum and increase visibility and awareness of LGB&T issues.

Members were delighted that PHA had taken the lead on this initiative.

The paper was approved by PHA board members.

**89/11 HCAI Monthly Report**

Dr Carolyn Harper provided a verbal update on the “HCAI Monthly Report” highlighting a number of issues as listed below:

- *MRSA and CDI Progress Charts*
- *MRSA Death Data*
- *Trust Performance Exception Reports*
- *Incidents, outbreaks and clusters*
- *Items to note*
- *Forward look; and*
- *Changing the Culture 2010*

Members agreed that this report should be brought to the PHA board every three months instead of monthly but if any problems arose, Dr Harper would bring them back to the PHA board as and when necessary.

Members noted the document.

**90/11 HSC R&D Division Update**

Dr Michael Neely provided a verbal update on the HSC R&D Division to members on the progress against the PHA corporate objectives and the R& D business plan for the period April 2011-August 2011. Dr Neely also circulated the R&D Newsletter to members for information.

The Chair asked for a copy of this report to be posted directly to Dr Jeremy Harbison.

**Mrs Quigley**

**91/11 Safety and Quality Reporting**

Mrs Mary Hinds proposed a number of the key areas to be reflected within a composite Safety and Quality report to be submitted on a regular basis to the respective PHA and HSCB Management Teams, the Governance and Audit Committees, and to the Boards of both organisation.

This initial report outlined the key areas for inclusion and the processes in place for ensuring effective monitoring, review and compliance. It was recognised that for the majority of these areas the appropriate Lead Director presents comprehensive information on a regular basis to the relevant Management Teams. It is not intended that the proposed Safety and Quality Report will replace or duplicate existing and well established processes, rather, that it will provide a concise summary in a single report that draws all of this information together, and includes information on some areas not currently routinely reported.

Members approved the document.

**92/11 Performance Failure Protocol**

Mr McClean talked to the paper "Performance Failure Protocol". He advised that the PHA has in place agreements covering typically in the region of 600 initiatives to improve and protect health and well-being. The paper outlines a process to support



staff in those - rare - occasions where an initiative funded exclusively or primarily by the PHA is not meeting the terms and conditions of the signed contract.

The protocol sets out a number of potential scenarios reflecting three levels of concern and risk, with the steps for dealing with the problem and how this, should there be no satisfactory improvement, is escalated in a prudent, measured and timely way.

Mr McClean noted that the protocol has been developed in consultation with significant input from PHA staff, finance and the Chair of the PHA Governance and Audit Committee.

The above document was approved by PHA board members.

**93/11 Any Other Business**

Mrs Hinds advised of an upcoming event, regarding fundraising for Somalia scheduled for 2 September 2011. She expressed her gratitude for all those who have participated to date. It was also suggested that Non Executive Directors would like to make up a team to enter the Quiz.

**94/11 Date, Time and Venue of next meeting**

**Date:** 15 September 2011  
**Time:** 1:30pm  
**Venue:** The Board Room  
Gransha Park House  
15 Gransha Park  
Clooney Road  
Londonderry  
BT47 6FN

**Details to be confirmed of a presentation on the Family Nurse Partnership prior to lunch**

Signed by Chair:



Date: 15 September 2011