

Title of Meeting	122 nd Meeting of the Public Health Agency Board
Date	21 May 2020 at 1.30pm
Venue	Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast

Present

- Mr Andrew Dougal - Chair
- Mrs Olive MacLeod - Interim Chief Executive
- Mr Edmond McClean - Interim Deputy Chief Executive / Director of Operations
- Mr Rodney Morton - Director of Nursing and Allied Health Professionals
(*via video link*)
- Professor Hugo van Woerden - Director of Public Health
- Alderman William Ashe - Non-Executive Director (*via video link*)
- Mr John-Patrick Clayton - Non-Executive Director (*via video link*)
- Ms Deepa Mann-Kler - Non-Executive Director (*via video link*)
- Alderman Paul Porter - Non-Executive Director (*via video link*)
- Professor Nichola Rooney - Non-Executive Director (*via video link*)
- Mr Joseph Stewart - Non-Executive Director (*via video link*)

In Attendance

- Mr Paul Cummings - Director of Finance, HSCB
- Ms Marie Roulston - Director of Social Care and Children, HSCB (*via video link*)
- Ms Jenny Redman - Boardroom Apprentice (*via telephone link*)
- Mr Robert Graham - Secretariat
- Mr Stephen Wilson - Assistant Director, Communications and Knowledge Management

Apologies

- Dr Aideen Keaney - Director of Quality Improvement

49/20 | Item 1 – Welcome and Apologies

49/20.1 The Chair welcomed everyone to the meeting. Apologies were noted from Dr Aideen Keaney.

49/20.2 The Chair advised members that he and the Chief Executive would have to leave the meeting at approximately 2:30pm to meet with the Minister and that he has asked Mr Stewart to chair the meeting during this

period.

50/20 Item 2 – Declaration of Interests

50/20.1 The Chair asked if anyone had interests to declare relevant to any items on the agenda. No interests were declared.

51/20 Item 3 – Minutes of previous meetings

51/20.1 The minutes of the Board meeting held on 23 April 2020, were approved as an accurate record of that meeting.

51/20.2 The notes of the Board briefing held on 6 May 2020 were approved as an accurate record of that meeting.

52/20 Item 4 – Matters Arising

52/20.1 There were no matters arising.

53/20 Item 5 – Chair’s Business

53/20.1 The Chair expressed concern that a large number of individuals do not do well on ventilators. In fact, he said there is evidence indicating that between 30 and 40% of individuals with COVID-19 who are treated on ventilators do not survive. He added that the President of the Faculty of Intensive Care Medicine had indicated that continuous positive airways pressure (CPAP) may be an appropriate and less invasive form of treatment for some individuals with COVID-19. Mr Morton said that additional CPAP machines were procured and utilised as part of the response to the pandemic. Mr Cummings added that he has commissioned a report to look at the use of different treatments to see which is most appropriate.

53/20.2 The Chair suggested that many people stayed at home too long before admitting themselves to hospital. Mr Cummings agreed that this was certainly a factor at the start of the outbreak, but the messaging now is that people should go to a COVID-19 centre as soon as possible. The Chair worried that individuals might leave it too late and would not be eligible for CPAP. Mr Morton gave an assurance that this was not the case.

54/20 Item 6 – Chief Executive’s Business

54/20.1 The Interim Chief Executive said that the staff of the PHA continue to remain very busy dealing with the pandemic, but also starting to plan for the recovery phase. She said that work is ongoing to look at how to make the office environment safer for staff returning with enhanced cleaning taking place and a one-way system on the staircases introduced.

- 54/20.2 Ms Mann-Kler asked if there were any particular concerns about staff health and wellbeing. The Interim Chief Executive said that the senior staff have been taking most of the workload and need to take a proper break. She advised that work is starting to ramp up in terms of contact tracing, and that there will be a presentation later in the meeting on Health Improvement initiatives. Ms Roulston added that there is a staff health and wellbeing group that has been set up by Ms Michelle Tennyson, which is receiving feedback from staff on a range of issues. The Chair asked what happens to that feedback.
- 54/20.3 Mr Clayton said that he had a concern about how social distancing will be managed within the office, and noted that there will be staff who will continue to have childcare responsibilities. The Interim Chief Executive advised that Dr Keaney is leading a piece of work to overhaul the working environment on the 4th floor which will help cleaning staff carry out more in-depth cleaning. She said that there are increased amounts of hand gels and sanitisers throughout the building, but she acknowledged that there remain some concerns regarding the canteen. She said that correspondence has been sent to all staff keeping them up to date on what has been happening.
- 54/20.4 Alderman Porter said that it is important to keep the messaging positive as this has been a difficult time for people.

55/20 Item 7 – Finance Report

- 55/20.1 Mr Cummings presented the final Finance Report for 2019/20 and said that PHA had ended the year within the $\pm 0.25\%$ tolerance with a surplus of £115k. He said that Trust expenditure had remained largely in line with previous years, but there had been a slight overspend in programme expenditure offset against the underspend in the management and administration budget. He said that the capital expenditure had matched the budget, and although there was a slight dip towards the end of the year, the prompt payment performance remained high.
- 55/20.2 The Chair congratulated Mr Cummings and his colleagues for this very successful outcome.
- 55/20.3 Mr Stewart echoed the views of the Chair. He noted that some of the payments had not been able to be made on time due to terms and conditions of contracts not being met.
- 55/20.4 The Chair asked if any unallocated expenditure could be used to finance a media campaign. Mr McClean said that this was possible, but it would have to fit within the wider framework of other campaigns. He advised that PHA has received its allocation letter for 2020/21 and will be bringing a financial strategy to the Board based on this allocation.
- 55/20.5 Alderman Ashe also expressed his thanks to Mr Cummings and his

team for their work in not only achieving a break-even position, but completing the work on time given competing priorities.

55/20.6 The Board noted the Finance Report.

56/20 Item 8 – Update from Chair of Governance and Audit Committee

56/20.1 Mr Stewart advised that the Governance and Audit Committee had met on 20th May and that the main papers considered, namely the draft Annual Report and Governance Statement, had been considered in the confidential session of the meeting.

56/20.2 Mr Stewart said that the Committee had expressed concern about receiving an updated corporate risk register, and that it has been agreed that a special meeting of the Committee will be convened within the next 2/3 weeks following completion of the latest review. He highlighted particular issues that should feature on the risk register, including reputational damage and resilience.

56/20.3 The Board noted the update from the Chair of the Governance and Audit Committee.

57/20 Item 9 – Update on COVID-19

Distinct Role of PHA in the COVID-19 Crisis

57/20.1 Professor van Woerden said that there is a clear statutory role for PHA in terms of improving the health of the population.

57/20.2 Professor van Woerden said that work is now commencing that PHA is assisting with in terms of getting treatments programmes, which had been stood down during the pandemic, back up and running.

Survey of a Sample of the Northern Ireland Population

57/20.3 The Chair said that there is a need to establish a baseline on the incidence of COVID-19 and carry out a random survey of a sample of the Northern Ireland population. Professor van Woerden said that there is currently a telephone survey of up to 1,000 people a week that can help come up with a symptoms perspective. He added that the ONS is also doing a survey, but not a Northern Ireland-specific one.

57/20.4 Professor van Woerden said that two antibody tests have now been approved. He added that as part of the Research and Development work, there are studies planned in conjunction with the Republic of Ireland with some protocols being developed. He advised that left over samples from hospitals are going to be tested. The Chair remarked that this was a very positive development.

57/20.5 Mr Clayton said that he had seen some information suggesting that the

overall death rate is currently higher when COVID-19 deaths are taken out of figures, and asked if this is being looked at. Professor van Woerden acknowledged that there is a risk of this with services being reduced, and also with people not seeking help. He said that studies are carried out on excess deaths during the flu season, and that a similar exercise is being conducted in relation to COVID-19. The Chair recalled that a letter had been received from Northern Ireland Chest Heart & Stroke expressing concern to the interim Chief Executive that individuals potentially with heart attacks and strokes were reluctant to call 999 and that it had suggested there should be a further run of the FAST campaign.

Testing in Northern Ireland

- 57/20.6 Professor van Woerden said that testing is a huge project, but Northern Ireland has carried out more tests per capita than other parts of the UK. He advised that testing has been expanded in care homes, and anyone who is over the age of 5 and is symptomatic can be tested. He assured members that there is no shortage of testing capacity in hospitals.
- 57/20.7 The Chair asked when all care homes will be tested. Professor van Woerden explained that if more than one resident in a care home tests positive, then all residents and staff are tested. He said that a rolling programme of testing will be done across all care homes on a priority basis, in conjunction with HSC Trusts and the Northern Ireland Ambulance Service (NIAS). Mr Morton clarified that the Trusts will undertake the majority of the work, with NIAS helping out.
- 57/20.8 Professor Rooney asked about PHA's role in infection prevention control and giving guidance to nursing homes, following a BBC news article on care homes, where DoH response had been that PHA had given advice from the start. Mr Morton explained that as part of their normal duties in any outbreak the PHA health protection team supports care homes and provides infection prevention control advice. He added that as part of a wider programme, the PHA, with the HSCB, worked with Trusts to ensure that there was sufficient PPE. Professor Rooney asked if PHA was reactive in giving its advice, after an outbreak or did it also provide advice proactively re managing COVID-19. The Interim Chief Executive said that the health protection service is available 365 days a year. She said that Mr Morton and Ms Roulston worked together to develop a programme of support for every care home and that Northern Ireland was more proactive than any part of the UK in this work. She added that working with Trusts and RQIA, additional staff and advice were provided to care homes and she commended the work that was done.
- 57/20.9 Mr Clayton noted the involvement of Trusts and NIAS in testing, but he asked what PHA's role was in this area specifically. He also asked about the frequency of testing. Professor van Woerden explained that one of PHA's Assistant Directors, Dr Brid Farrell, is leading the advisory group for the Department of Health in regard to testing. He said that

there is a dynamic approach in terms of testing in homes.

- 57/20.10 Alderman Porter asked if PHA was working to link with political parties to ensure they are clear as to what PHA's role is. Mr Wilson said that there is a plan in place for engagement with all political parties to ensure they are brought up to speed on the main issues and are clear as to PHA's role. He noted that the work of PHA is not only focused on health protection. The Chair noted that there had been a request from the Health Committee to all health organisations in order to supply information in a more timely manner.
- 57/20.11 Ms Mann-Kler asked whether Executive Director colleagues have any concerns in relation to testing. Professor van Woerden acknowledged that reassurance is important, but the tests are far from perfect, but the quality is improving. He noted that at present the tests are picking up about 80% so that means for the other 20% there are false negatives. He said that there continues to be good co-operation between the different parties looking at testing, but he felt that this will continue to be a pressure point. Mr Cummings added that there is an issue about supply of reagents for testing.
- 57/20.12 The Chair said that there is a challenge in terms of knowing where to direct and target testing. Professor van Woerden noted that tests can give a false positive and a false negative, and that in any system priority has to be given to ensure that those who are highest priority can get access to tests. Mr Stewart asked who is assessing the quality of the laboratories carrying out the testing. Professor van Woerden advised that all laboratories take part in a national quality assurance programme, which is a combination of self-assessment and a site visit. He added that for the UK, Colindale is recognised as the best in the UK. However he assured members that there are clear quality standards in regard to testing, wherever it takes place.

Tracing

- 57/20.13 The Interim Chief Executive reminded members that the PHA had set up a pilot contact tracing service, but now the next phase of this work is being put in place in preparation of the lifting of lockdown restrictions. She advised that there has been a significant number of people volunteering to assist, but it would be impossible to train 700 people. She said that presently PHA is dealing with up to 50 positive cases a day, but it is difficult to contact trace many of them due to not being able to obtain contact telephone numbers, but a workaround is being looked at.
- 57/20.14 The Interim Chief Executive explained that the new service will run for a minimum of 1 year, and there will be three tiers. She said the bottom tier will be a call centre where people who do not wish to use an app can speak to a call handler. She went on to say that the middle tier will consist of nurses and health protection officers who are skilled in contact

tracing. She said that PHA has contacted a number of nurses on Trust banks, and have also offered contracts to two environmental health staff.

- 57/20.15 The Interim Chief Executive outlined that it was envisaged that this middle tier service will have up to 30 people working 12 hours a day, 7 days a week at a location still to be finalised, but possibly in Ballymena. She added that the team will be led by a doctor and there will also be the capacity to undertake analytics of the data gathered.
- 57/20.16 The Interim Chief Executive advised that there is a steering group leading this work with a robust project structure including a risk register and an action log, and that there are workstreams on HR, finance and communications. She said that the PID for this work is with the Minister and he is expected to make an announcement shortly on this work.
- 57/20.17 Ms Mann-Kler asked whether equality considerations are being taken into account. The Interim Chief Executive advised that the group and met with the Human Rights Commissioner, and would also be meeting with the Equality Commissioner. She added that there is also representation from the Patient Client Council on the group, as it is acknowledged that it will be important to get to those “hard to reach” groups.
- 57/20.18 Professor Rooney asked who is involved in the group. The Interim Chief Executive advised that it is being chaired by the former Deputy Chief Medical Officer, Dr Liz Mitchell. Professor Rooney asked about the HR input. The Interim Chief Executive explained that HR are helping to expedite the recruitment process as the team needs to be in place quickly.
- 57/20.19 Mr Stewart said that it is important that the Board is sighted on this work and asked how the decision was made that PHA was to lead on this. The Interim Chief Executive advised that PHA has always carried out contact tracing as it is a health protection function. Professor van Woerden said that this type of work would be done on a routine basis in tracking infections such as TB, so it was understandable that the Department asked PHA to lead.
- 57/20.20 The Interim Chief Executive explained that of the 3 tiers, 2 will be managed internally, while the call centre tier will be managed by NI Direct. He added that the Chief Medical Officer is very actively involved in this process and that the steering group is providing effective oversight. She understand that the Board wishes to see more detail, and she agreed to share this when it becomes available.

At this point the Chair and Interim Chief Executive stepped out of the meeting.

Nursing/Care Homes

- 57/20.21 Mr Morton advised members that the PHA and HSCB have developed a model to assist care homes and that the key elements of this work are around the prevention of infection, wraparound care and providing additional support in terms of staff. He added that this work is being monitored by a steering group but also by the Chief Nursing Officer and Chief Social Services Officer as well as by Mrs Mary Hinds and Ms Patricia Donnelly who have been asked to provide independent scrutiny to the process. He said that he would be happy to share the paper that has been produced together with the action plan.
- 57/20.22 Ms Mann-Kler noted that the PHA had recently attended the Northern Ireland Assembly Health Committee and there had been questions asked regarding care homes. She asked whether there was a robust audit trail in terms of the governance of PHA's remit in this area. Professor van Woerden explained that the elderly are in a vulnerable group, and PHA has worked from the outset on dealing with vulnerable groups including not only elderly in care homes, but people in shared accommodation and supported living as well as homeless people. He also highlighted risks in shared living establishments where groups of people live together and there are large numbers of people coming in and out. Therefore, he noted that while care homes were not specified, PHA has been working from the outset on assisting a range of vulnerable people in different settings.
- 57/20.23 Ms Mann-Kler asked about PPE and if there are sufficient quantities and if the single use policy remains in place. Mr Morton acknowledged that PPE remains tight for all sectors, but he informed members that he is part of a group that has completed a modelling exercise to look at PPE demand over the next year. He said that this model will be used to inform future procurements to ensure that there is an accurate and consistent supply. He added that the model includes supply for the independent sector.
- 57/20.24 In relation to PPE in care homes, Mr Morton said that he was not aware of any concerns and that the Trusts are taking the lead in terms of providing support to care homes. He acknowledged that the issue of single use PPE is a complex one, and that his team has produced a paper on the repurposing and reuse of PPE in line with effective decontamination procedures. He said that there will be further work looking at sessional use in certain types of environments. He explained that if it is not possible to maintain social distancing, then there is an expectation that PPE will be changed each time there is interaction with a patient.
- 57/20.25 Professor Rooney asked whether PHA is monitoring COVID-19 among groups with complex needs and intellectual disability. Mr Morton said that within PHA and HSCB there is a cellular structure, and this ensures that all vulnerable groups are picked up. He said that there has been a

lot of work undertaken in mental health hospitals and community hospitals, and that Mrs Mary Hinds and Ms Patricia Donnelly are also looking at this area as part of their remit.

57/20.26 Mr Morton said that he, and Professor van Woerden, are working on a new infection prevention control framework which should be finalised in the coming weeks. Ms Roulston added that she has weekly telecalls with Directors across all 5 Trusts to get an overview of current work, and that there is a structure in place.

57/20.27 Professor Rooney said that she was seeking to clarify PHA's role in terms of infection control. Mr Morton assured members that PHA is working with HSCB in this area. He advised that PHA has a specific health protection role for all members of the community, irrespective of location, but for commissioned services this responsibility lies with the Trusts. He said that PHA's role is to monitor any infection outbreaks and ensure that they are dealt with. He noted that it is a complex landscape as some providers are in the public sector, while others are in the private sector.

57/20.28 Mr Clayton said that he would hope to see an improvement based on the additional measures that are being put in place. He asked about PPE and, declaring an interest as a UNISON representative, he passed on concerns about high failure rates in fit testing for certain types of respirator masks and that whilst not all Trusts had provided data on this, the data which were available indicated that this was an issue disproportionately affecting women. Mr Morton explained that there are different types and grades of FFP3 respirator masks and it is not uncommon for these to fail a FIT test. However, he said that there should be an opportunity to be tested for another type of mask. He acknowledged that this could become challenging if the number of options is reduced, but that he is undertaking a piece of work looking at the failure rate of certain products to ensure that these particular products are not being bought in large volumes. He emphasised that it is the Trusts' responsibility to ensure staff get tested for an alternative type of mask.

57/20.29 Mr Clayton asked for an update on the independent sector. Mr Morton said that the Trusts are helping independent sector providers.

57/20.30 Professor van Woerden noted that Northern Ireland is procuring face masks from international manufacturers who are using local templates.

57/20.31 Mr Morton said that there is beginning to be a flattening of the curve and that the trend is now not an upward one, but he conceded that there are homes with complex needs. He said that going forward there will need to be further work to improve infection prevention control, with enhanced cleaning, but there will be a challenge in managing footfall. He said that there will be a need to maintain the highest standards possible in order to protect the most vulnerable citizens.

57/20.32 Professor van Woerden delivered a short presentation to members. He began by showing how the number of confirmed outbreaks in care homes has decreased in recent weeks and how the interventions by PHA and HSCB have helped to reduce the number of cases. He showed an age pyramid which highlighted that the highest number of deaths from COVID-19 has been in the older age categories. In summary, he said that there has been significant spread of COVID-19 in nursing homes, which was expected, but that the curve is beginning to flatten. In general terms, he said that there is a delicate balance to be met in terms of the lockdown as there is a risk of inadvertently causing ill health while trying to prevent harm.

At this point Mr Morton and Ms Roulston left the meeting.

Post Lockdown

During this section the Chair and Interim Chief Executive returned to the meeting.

57/20.33 Mr Stewart welcomed Mr Séamus Mullan to the meeting and invited him to give his presentation.

57/20.34 Mr Mullan gave members an overview of the work that the Health Improvement team has been involved in with other stakeholders. He advised that each Local Council has its own emergency response team and there is a member of PHA Health Improvement staff on each of these groups. He added that PHA is also working with the Department for Communities.

57/20.35 Mr Mullan advised that PHA has over 500 contracts with community and voluntary sector organisations and that a demand and capacity analysis of the services provided by these contracts has shown that overall demand for services has either increased or stayed the same. He said that undertaking this exercise gives PHA intelligence as to where an increase in demand can be anticipated. He added that where resources have been stood down, this allows for a direct intervention to ensure that additional funding can be reinvested in other areas.

57/20.36 Mr Mullan reminded members that this is Mental Health Awareness week, and PHA, as the organisation responsible for the Lifeline contract, has been monitoring the number of calls to the Lifeline service, and there has been a slight increase in previous weeks after a dramatic decline. He showcased the work of the Multi Agency Triage Team (MATT) that is working within the South Eastern Trust area which is a service available to those people contact 999 and require emotional support. He added that the service also helps to reduce the number of attendances at emergency departments for people in crisis. He noted that there has had to be a change in how that service is being delivered due to social distancing measures so more work is being delivered online, and he is hoping that this type of model could be rolled out more

widely.

57/20.37 Mr Mullan said that the PHA provides direct interventions into the community and voluntary sector and highlighted the CLARE project which helps deliver parcels and support to those who cannot leave their homes due to COVID-19. He said that PHA has worked with the Department of Agriculture and the Department for Infrastructure in its role as an influencer/agenda setter. He referenced the Farm Families Project and initiatives to improve physical activity.

57/20.38 In response to a comment from Alderman Porter about PHA's work in the area of mental health, Mr Mullan said that PHA is working at a policy level and has had a direct input. He added that the PHA is also part of the Protect Life Implementation Group which will be meeting soon, and PHA has an explicit role vis-à-vis the implementation of Protect Life 2. He advised that PHA will be investing up to £8m per annum on Protect Life 2 activities across Northern Ireland,

57/20.39 Ms Mann-Kler asked if PHA is taking advantage of the opportunities presented by COVID-19 as the work of the Agency is gaining greater profile exposure than previously. Mr Mullan said that there are an increased number of blogs being prepared and one blog published recently on infant mental health had a very high number of hits. He said that PHA is also working with regional organisations to capture any learning and what the important issues are for the community. Mr McClean said that much of the focus of politicians recently has been on waiting lists, and he expressed concern about how PHA can distil any learning and experience, but at the same time put greater emphasis on its core roles of prevention and improvement. He said that there is now the opportunity to make a greater case for resources for improving and protecting health.

Communications

57/20.40 Mr Wilson informed members that over the last few months the communications team in PHA has been working beyond full capacity dealing with issues relating to COVID-19. He gave members of some of the work that the team has been involved in, and what its current priorities are.

57/20.41 Mr Wilson explained that the PHA communications teams works alongside its counterparts in HSCB and the Department of Health to ensure that there is an integrated approach across all areas. He noted that the primary focus has been on health protection, but there has been work taking place across other parts of the organisation and he referenced in particular work going on within health Improvement. He added that the campaigns team has been working with the Executive Office in terms of managing the rollout of key messages and PHA provides advice on the public health content. He said that the publications team also works to supply the various needs across the

sector.

57/20.42 Mr Wilson noted the reference already made by Mr Mullan on the blog which appears on social media 3 times per week. He advised that PHA has revamped its corporate website and is looking at develop a new corporate site.

57/20.43 Mr Wilson said that one of the big successes for PHA has been its social media work with Facebook posts over the last 28 days reaching almost 30 million people, with 1.35 million engagements and 3.3 million video views. He said that the number of Facebook followers has increased by over 40,000. He added that PHA's tweets have had similar levels of engagement and that there has been a similar increase in the number of Twitter followers. He noted that in terms of how this stacks up against other public sector organisations, he said that PHA has had some of the highest performing social media posts across the UK, with one post being second only behind the Prime Minister's daily briefing.

57/20.44 Mr Wilson said that the challenge for PHA now is how to go forward and optimise this. He said that it would not have been possible for PHA to do this without the help of colleagues providing appropriate messaging.

57/20.45 The Chair commended Mr Wilson and his team for their phenomenal work.

57/20.46 Ms Mann-Kler also congratulated the team and said that having timely transparent communication is critical and the levels of engagement on social media have been outstanding. She agreed that there is now a need to build on that momentum, and she was pleased to note the joined-up nature of the messaging, which will be important as we move out of lockdown.

57/20.47 The Chair noted that due to time constraints, it had not been possible to cover all of the items on the agenda, but he asked that if members had any specific issues they wished to raise to contact him in the first instance. He thanked the Directors for their continuing efforts in this work.

58/20 Item 10 – Any Other Business

58/20.1 There was no other business.

59/20 Item 11 – Details of Next Meeting

Thursday 18 June 2020 at 1:30pm

Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast, BT2 7ES

Signed by Chair:

A handwritten signature in cursive script, appearing to read "Ann Douglas".

Date: 18 June 2020