

Title of Meeting	126 th Meeting of the Public Health Agency Board
Date	15 October 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 Rodney Morton	- Director of Nursing and Allied Health Professionals
Professor Hugo van Woerden	- Director of Public Health
Alderman William Ashe	- Non-Executive Director
Mr John-Patrick Clayton	- Non-Executive Director (<i>via video link</i>)
Ms Deepa Mann-Kler	- Non-Executive Director
Alderman Paul Porter	- Non-Executive Director
Professor Nichola Rooney	- Non-Executive Director
Mr Joseph Stewart	- Non-Executive Director

In Attendance

Ms Christine Frazer	- Assistant Director of Finance, HSCB (<i>via video link</i>)
Dr Aideen Keaney	- Director of Quality Improvement (<i>via video link</i>)
Ms Marie Roulston	- Director of Social Care and Children, HSCB (<i>via video link</i>)
Miss Rosemary Taylor	- Assistant Director, Planning and Operational Services (<i>via video link</i>)
Mr Robert Graham	- Secretariat

Apologies

None

98/20 | Item 1 – Welcome and Apologies

98/20.1 The Chair welcomed everyone to the meeting. There were no apologies.

99/20 | Item 2 – Declaration of Interests

99/20.1 The Chair asked if anyone had interests to declare relevant to any items on the agenda. Mr Clayton declared an interest during the discussion at paragraph 105/20.8.

100/20 Item 3 – Minutes of previous meeting held on 17 September 2020

100/20.1 The minutes of the Board meeting held on 17 September 2020 were approved as an accurate record of that meeting.

101/20 Item 4 – Matters Arising

92/20.2 Trust Funding

101/20.1 Mr Stewart sought clarity on the statement made by Mr Cummings in the previous minutes that PHA would be liable for the redundancy costs for Trust staff if PHA stopped a programme that those staff were directly involved in. The Chair said that Mr Cummings had provided him with information in terms of how much money is being allocated to Trusts, but his query related to how this money is spent and what performance management arrangements are in place. Alderman Porter said that for community and voluntary sector organisations, PHA funding would cover staff costs. Mr Stewart said that further detail is needed on PHA's financial liability if Mr Cummings' statement is true, a statement backed up by Alderman Ashe. The Chair said that his specific query related to staff in Trusts but he said that he would speak to Mr Stephen Bailie in HSCB. The Chair stated that his single purpose was to discover on what the money was spent and to ensure there was effective performance management

93/20.8 Priadel

101/20.2 Mr Clayton asked if there was a further update on the discontinuation of Priadel. Mr Morton advised that there is further information on this in the Chief Executive's Report, but to note that the decision to discontinue is now on hold.

102/20 Item 5 – Chair's Business

102/20.1 The Chair said that he continues to have concern that PHA is being asked to carry out functions by the Department in the absence of confirmed funding. He added that he felt it was wrong that PHA has had to scale back or stop the programmes in which staff were directly involved. Professor Rooney said she thought that there should be a separate line in PHA's budget which would record COVID-19 related expenditure, as even though existing or unspent PHA funds were now redirected to cover COVID-19 costs, this should be easily identified in the budget. She asked whether PHA knew how much it was spending in relation to COVID-19 work. Professor van Woerden explained that there are two business cases which have been submitted to the Department of Health, but have not yet been signed off. He said that all the necessary paperwork is in place and he has no reason to believe that PHA will not receive approval and the required funding. The Interim Chief Executive reiterated that there is a paper trail. The Chair sought assurance that PHA has the authority to spend on these areas and the

- Interim Chief Executive confirmed that this was the case. Alderman Porter felt that no money should be spent until there is a formal authorisation to do so.
- 102/20.2 Mr Stewart advised that he, along with Mr Clayton and Ms Mann-Kler had spent considerable time discussing this issue at the recent Governance and Audit Committee with Mr Cummings and the representative from the Northern Ireland Audit Office. He said that he had asked if NIAO had issued any guidance for such a situation, but was advised that no guidance has been issued. He said that he followed up by asking how this expenditure would be viewed in light of the principles of the Treasury Orange Book and was advised that although the auditors fully understood the difficulties of this particular unusual scenario, there would be an expectation that there is a clear audit trail of any decisions. He went on to say that Mr Cummings was confident that there was a clear audit trail of those business cases of which he had oversight but that some may have been subject to revision subsequently and he was unable to comment upon them. Mr Clayton noted that there had been discussion about the status of some of the business cases and that some had been revised and it was therefore important that the Board be regularly advised as to their status. Ms Mann-Kler said that this should form part of the Finance Report **[Action – Ms Frazer]**. She added that there should be a reflection in terms of PHA's Internal Audit work this year and ensuring that PHA's processes are tight and its governance arrangements are sound.
- 102/20.3 The Chair asked if it would be possible to have a line on COVID-19 expenditure within the Finance Report. Ms Frazer said that this could be included, but she pointed out that for the PHA the amount is relatively small.
- 102/20.4 The Chair said that as part of the development of the Corporate Strategy PHA should be involving staff and service users. He asked about support arrangements for this work given there was dedicated support during the development of the previous Strategy. Miss Taylor advised that the staff member concerned has moved on, but she will be speaking to Ms Anne McMurray about support from within PHA's planning function **[Action – Miss Taylor]**.
- 102/20.5 The Chair advised that he has asked if it would be possible to get copies of the presentations that were delivered at the NICON conference. He said that he was impressed by the presentation delivered by Mr Joe Rafferty, Chief Executive of Mersey care and it thought it may be useful to invite Mr Rafferty to Northern Ireland. Ms Mann-Kler highlighted an issue around data about suicides. Mr Morton explained that although the data will change, the risks associated with mental health and drug use remain high. The Chair clarified that there will be a reclassification whereby deaths by suicide that also link to drug use will not be counted. Professor van Woerden undertook to prepare a short paper outlining the implications of the change in the definition **[Action – Professor van**

Woerden] Professor Rooney agreed that Mr Rafferty's presentation was excellent and that it would be beneficial to engage further with him.

103/20 Item 6 – Chief Executive's Business

103/20.1 The Interim Chief Executive presented her Report and said that she was working on delivering the report in a format that mirrored the functions of the PHA, but that this would take time. The Chair noted that there is a huge amount of work being placed on the Interim Chief Executive, often at short notice, and that she had also been required to appear at the Health Committee earlier today.

103/20.2 Ms Mann-Kler asked about the digital self-trace. The Interim Chief Executive advised that this was launched last week and that at the next meeting she would be able to give a better summary of its effectiveness. She explained that as the numbers start to increase people will be texted to advise them to self-isolate and then there could be more focus on the higher risk cases. Mr Clayton noted that the numbers are increasing and he asked about the ability of the contact tracing centre to cope and how PHA can gauge if people are self-isolating when advised to do so. Professor van Woerden acknowledged that self-isolation can be difficult for people and that different people comply to varying extents with self-isolation. He noted that the modelling does take into the account the possibility of people not self-isolating when required and that recent research has shown that the number who actually self-isolate is quite low. He suggested that key societal figures could have an impact on the way people behave.

103/20.3 The Interim Chief Executive said that the contact tracing system is currently stretched and that PHA is competing with hospitals for staff creating a shortage of nurses. She said that an appeal has gone out for people to help and that every Saturday job interviews are taking place and people are being recruited. She added that the ability to text contacts is a boost and will help as the numbers continue to rise.

103/20.4 The Interim Chief Executive explained that at the outset PHA's approach had been to develop a high quality service where each contact would receive a telephone call of up to 45 minutes. She felt that this level of interaction would have helped encourage people to self-isolate and that if a different approach is taken there may be an impact on people's behaviour. She added that the focus at present is on forward contact tracing but she felt that it would be beneficial to undertake backward contact tracing in order to determine the sources of infection as 80% of the infection is caused by 20% of the population. She said that the system is under pressure and that with the numbers going up, PHA will need to flex its approach. Alderman Porter expressed concern about the impact on people who have to self-isolate on more than one occasion. Professor van Woerden conceded that as the prevalence increases people may have to self-isolate on three or four occasions. The Interim Chief Executive said if people adhere to the guidelines they

are less likely to contract COVID-19.

103/20.5 Professor Rooney asked about work with schools. The Interim Chief Executive advised that the dedicated cell in PHA HQ has been set up with staff from health protection and nursing. She explained that if there is a positive case in a school this team will link with the school head teacher to discuss next steps and that PHA will send a letter to the school. She said that this approach has been well received.

104/20 Item 7 – Finance Report (PHA/01/10/20)

104/20.1 Ms Frazer began by informing members that the role of Director of Finance within HSCB, with specific responsibility for the provision of financial services and advice to the Board of the PHA, has been advertised and closes at the end of this month. She said that she, along with her other Assistant Director colleagues, will cover this role in the meantime.

104/20.2 Ms Frazer took members through the Finance Report and said that at the end of August PHA has a surplus of almost £2m. She added that the projected year-end surplus of £1m and that the Department of Health has been advised of this. She explained that the impact of COVID-19 is beginning to affect the overall position as programmes are being scaled back.

104/20.3 Ms Frazer advised that the Trust-related programme expenditure should be fully utilised and following on from the earlier conversation, she said that a lot of this funding is for permanent posts and there is a contractual obligation on PHA vis-à-vis these posts. She reassured members that these programmes are regularly monitored and she said that either she or Miss Taylor can provide more information if required. The Chair asked if the monitoring relates to the activity or to the funding. Ms Frazer replied that it would relate primarily to the activity, but that COVID-19 has meant that some staff had temporarily been moved into other work. Miss Taylor said that performance monitoring is still taking place but she acknowledged that some programmes may be undertaking different work than they were originally intended to do. She advised that programme managers are speaking to providers.

104/20.4 Ms Frazer moved onto the direct programme expenditure and said that are challenges for PHA as the underspend in this area is likely to increase but managers were currently reviewing with an objective to returning to break even by the year end. She said that the management and administration budget also has a surplus as there are challenges in not only filling posts, but in the time lag in doing so. She estimated that the surplus would be at least £1m by the year end.

104/20.5 Ms Frazer advised that there are ring fenced funds for COVID-19 and for Transformation funds. With regards to COVID-19 funding she explained there is £600m currently being held with the Department of Finance for

- Health in respect of which the Department of Health has recently advised the DoF of its assessment of the full potential costs for Health and Social Care for 2020/21. This should include approved bids submitted by the PHA to the DoH and Ms Frazer stated that she would keep members updated on this area.
- 104/20.6 Mr Stewart suggested that the estimate of the surplus is a conservative one, and that it is likely to increase. He asked whether the Department has given an indication as to how this surplus will be treated. Ms Frazer said that £1m has already been declared for consideration by the Department for use across the whole HSC. She said that PHA is likely to be more and more challenged in terms of spending its allocation so it will be necessary to keep on top of these figures and to look at other ways of using the funding in a meaningful way.
- 104/20.7 The Chair sought clarity as to whether due to COVID-19 there was no discretion to reallocate funding. He also queried why the HSCQI salary budget was in deficit. Ms Frazer explained that in previous years if there was an underspend in the administration budget it could have been transferred to the programme budget, but realistically this would not be possible this year. With regard to the HSCQI, she explained that in year the HSCQI deficit would be met by surpluses in other areas of the Admin budget. Miss Taylor added that going forward there is an issue in terms of identifying recurring funding for HSCQI. The Interim Chief Executive advised that there is a number of posts across the organisation which have been vacant for over a year and she is going to review these **[Action – Interim Chief Executive]**. Dr Keaney thanked the Chair for drawing attention to the HSCQI budget.
- 104/20.8 The Board noted the Finance Report.
- 105/20 Item 8 – Update on COVID-19**
- 105/20.1 Professor van Woerden delivered a presentation giving members an overview of the number of positive cases, ICU occupancy and deaths associated with COVID-19. He showed members a map detailing the density of cases across Northern Ireland before giving a breakdown by Local Council area. In summary, he said that the numbers are rising which will lead to an increase in the occupancy of ICU admissions and deaths and may result in further restrictions being put in place.
- 105/20.2 The Chair asked about the use of ventilators. Professor van Woerden advised that CPAP is now more frequently used as it is less invasive. He added that there is now greater societal awareness that if people start to feel breathless they should go to hospital.
- 105/20.3 Alderman Porter asked where the correlation is between the data presented and testing, and if the R number factors in the fact that more testing is being carried out. Professor van Woerden agreed that the data can only report against what is being tested and in the first wave

- many more people could have COVID-19 than was known because testing was only taking place in hospitals, but now it is also taking place in the community. However, he noted that there are individuals who are being tested that do not need to be. With regard to the R number, he advised that it was previously calculated based on hospital bed usage, but now it is calculated based on community transmission. He opined that it is not an exact science.
- 105/20.4 Alderman Porter asked whether religious and sporting events were contributing to the number of cases. Professor van Woerden agreed that there is a link between large family events and the number of cases. The Chair asked about excess deaths. Professor van Woerden said that he did not have an exact figure but he reported that there have been 66 deaths among people under the age of 65, and 8 deaths among people under the age of 45, but many of these people may have had co-morbidities. The Chair noted that recent excess death figures showed the number of deaths in hospitals and care homes, but not in private homes. Professor van Woerden advised that older people who live on their own would still tend to die in a hospital setting.
- 105/20.5 Mr Stewart noted that there are now local restrictions in place in parts of Northern Ireland and that given that PHA is providing contact tracing information, he asked whether the rise in the number of positive cases is clearly linked to the hospitality sector. Professor van Woerden said that the advice given to the Chief Medical Officer is based on the situation in Northern Ireland. He explained that people may not catch COVID-19 while sitting in a bar, but visiting other people's homes before and after going to the bar is likely to contribute to the higher number of cases. He added that there is an association between people spending time together and contracting COVID-19 and that the hospitality sector is one of the reasons for people spending time together. He added that religious events such as weddings and baptisms where people spend a lot time together before and after events can also see a spread of cases. Mr Stewart asked whether the track and trace system should pick up that there may be clusters in Belfast but then they spread to other parts of the country. Professor van Woerden agreed that this could happen and cited the example of students returning home at weekends, but he said that there is limited evidence. He said that people double or treble their risk of COVID-19 when spending time in the hospitality sector.
- 105/20.6 Ms Mann-Kler asked about hospital admissions, noting that the number had doubled between 22 September and 6 October. Professor van Woerden agreed that over the next few weeks admissions are likely to increase so measures are being put in place. Ms Mann-Kler asked if there was any data on long COVID. Professor van Woerden said that as this is a relatively new phenomenon there is not a lot of data available, but he said that there is an overlap with Chronic Fatigue Syndrome.
- 105/20.7 Professor Rooney asked about the role of PHA in providing the public

- health advice to the Department, as the PHA was the leading public health organisation and the Director of Public Health is the Northern Ireland expert in this area. The Interim Chief Executive said that the PHA provides the Department with a range of data every week.
- 105/20.8 Mr Clayton asked about care homes. He noted that the number of tests being carried out in the community has risen and that the number of outbreaks in care homes is also rising. He asked whether there has been much engagement with staff side representatives as members have been contacting his trade union with regard to PPE issues. He said that while there is emphasis on reducing the R number, the current measures may merely suppress R temporarily, so he asked what the risks are of the virus coming back again in December/January and if there is a long term strategy. The Interim Chief Executive advised that COVID-19 is a reportable disease and so care homes must report any incidents to PHA and the Duty Room will then carry out a risk assessment with the home and support that home. She added that any issues of non-compliance should be reported to the regulator. Ms Roulston said that the sector is dependent on the data that it receives from Professor van Woerden's team so it can plan how to deal with outbreaks. She added that while there has been engagement with provider organisations rather than staff, the Chief Social Services Officer, Mr Sean Holland, had held an engagement session with staff. She said that she would be content to discuss this with Mr Clayton outside of the meeting.
- 105/20.9 Professor van Woerden remarked that people die of COVID-19, but there are also people who die as a result of unemployment. He estimated that around one in 200-300 people who lose their job will die earlier than they would otherwise have done as a result of lockdown. He also indicated that there is some evidence to suggest that the incremental cost per quality adjusted life year (QALY) for the first wave of lockdown was between £250k and £1M. He referenced the Great Barrington Declaration, which has proposed a greater focus on the potential role of collective (herd) immunity and which has stressed the importance of shielding older and more vulnerable people. He recognised that there is a debate over the best approach and that it may take a decade before research can determine which was the most successful approach to controlling a COVID-19 pandemic.
- 105/20.10 The Chair thanked Professor Van Woerden for responding at short notice and compiling such a comprehensive presentation. He also remarked that it was very useful to see the data presented in such a graphic manner.
- 106/20 Item 9 – Update from Chair of Governance and Audit Committee (PHA/02/10/20)**
- 106/20.1 Mr Stewart advised that the minutes of the Governance and Audit Committee meeting of 1 July were available for members for noting. He

- said that there was a further meeting of the Committee on 1 October and that the agendas were broadly similar.
- 106/20.2 Mr Stewart reported that there was a lot of discussion on the Corporate Risk Register and that the updated Register is on the agenda for today's Board meeting.
- 106/20.3 Mr Stewart said that at both meetings there was discussion around procurement issues given that there are long standing audit recommendations in this area. He advised that the former Director of Operations had suggested that a sub-Committee of the Board should be established to look at the procurement plan and he said that the PHA Board should take a view on this.
- 106/20.4 Mr Stewart said that the Committee had received an update on outstanding audit recommendations and that Internal Audit was going to review the implementation dates of these. He added that at the meeting in July, the Committee had held a meeting with the internal and external auditors and that both sets of auditors were content with how the Committee discharges its responsibilities. He cautioned that the auditors had flagged up the issue of the gaps at senior level within the organisation.
- 106/20.5 Mr Stewart advised that the final "Report to those Charged with Governance" had been received and that it was a clean audit with an unqualified audit opinion. He said that the Committee had considered a self-assessment which flagged the need for some refresher training for members.
- 106/20.6 Mr Stewart noted that going forward the Committee will be asking relevant officers to come to update on specific matters and that the Interim Chief Executive is due to attend the next meeting. He thanked Miss Taylor and other PHA officers for their work in supporting the Committee as well as the other Non-Executive members.
- 106/20.7 The Chair thanked Mr Stewart for his update and acknowledged the enthusiasm and focus of those Non-Executives on the Committee. He agreed to follow up on the sub-Committee on procurement issues and to proceed with its establishment [**Action – Chair**].
- 107/20 Item 10 – PHA Mid-Year Assurance Statement (PHA/03/10/20)**
- 107/20.1 The Interim Chief Executive advised that the Mid-Year Assurance Statement had been completed prior to receiving correspondence from the Department of Health that it is not required.
- 107/20.2 In response to a query from the Chair around procurement, Miss Taylor advised that there was a particular issue for PHA in terms of progressing work in relation to the re-tendering of contracts in the field of drugs and alcohol. The Chair asked how often programmes are re-tendered. Miss Taylor said that it would normally be every 5 years but there is a balance

to be struck between getting a programme in place for a period of time, but also ensuring that it is not too long a time to enable a change. Professor Rooney asked if the work being done is taking account of Departmental policy, and Miss Taylor confirmed that this is being factored in, but a Direct Award Contract may need to be put in place in the short term. Professor Rooney felt that this area would be an important issue going forward, particularly given the change to the recording of suicide statistics in Northern Ireland and the fact that the number of deaths from drugs and alcohol will rise considerably. The Interim Chief Executive said that there was considerable discussion on this at the last meeting of the Procurement Board and good progress has been made.

107/20.3 The Chair asked whether the two senior planning posts had been filled and if these individuals will be involved in procurement. Miss Taylor confirmed that both posts have been filled, but pointed out that the work that they are required to do is more in the pre-procurement planning phase and determining what is required to be procured prior to any procurement commencing. She added that once a procurement exercise commences PHA will link with BSO PALS. The Chair asked if he could see the report of the task and finish group. Miss Taylor agreed to send him a copy.

107/20.4 Ms Mann-Kler asked about a potential divergence on staff resilience. The Interim Chief Executive advised that staff resilience is discussed regularly and also the need for staff to ensure they are taking leave as they are under constant pressure. She said that it is important that staff are supported. Professor Rooney asked whether there was more the PHA Board could do to show its support. Ms Mann-Kler suggested that a letter should issue from the Chair, on behalf of NEDs to express the appreciation of the Board for the work that staff are doing [**Action – Chair**].

108/20 Item 11 – PHA Corporate Risk Register (PHA/04/10/20)

108/20.1 Mr Stewart advised that the Governance and Audit Committee had considered the Corporate Risk Register in depth at each of its last two meetings and that the Committee was content with the wording and assessment of each risk. He suggested that there should be a risk included on the revised HSC Framework.

108/20.2 The Interim Chief Executive said that the Agency Management Team had taken the opportunity to review the Register on a line-by-line basis.

108/20.3 The Board **APPROVED** the Corporate Risk Register.

109/20 Item 12 – ALB Self-Assessment (PHA/05/10/20)

109/20.1 The Chair noted that PHA is required to complete this self-assessment annually and although it is not required to be submitted to the

Department, it provides a useful mechanism for self-evaluation.

109/20.2 Professor Rooney noted that there is a new handbook being launched by the Department for Boards of ALBs and she suggested that following its publication, it would be useful to use it to carry out an evaluation of how our board is functioning. She also highlighted the need for feedback from stakeholders on our performance. Mr Stewart agreed with Professor Rooney's suggestion. The Chair suggested that a workshop could be organised to undertake the evaluation.

109/20.3 The Board **APPROVED** the ALB Self-Assessment.

110/20 Item 13 – Update on Population Screening Programmes (PHA/06/10/20)

110/20.1 Professor van Woerden presented the update and said that the team is carrying out its work and that there is a Screening Programme Board in place. Professor Rooney said that the Board will be kept informed of any issues. The Interim Chief Executive explained that this update was brought to the new Regional Management Board and that most of the work is the responsibility of the Trusts. She said that she brought this paper in order to keep members informed to show that this vital work is still happening. She added that PHA will be required to bring regular updates to the Management Board.

110/20.2 The Board noted the update on population screening programmes.

111/20 Item 14 – Any Other Business

111/20.1 There was no other business.

112/20 Item 15 – Details of Next Meeting

Thursday 19 November at 1:30pm

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

Signed by Chair:



Date: 19 November 2020