

Confirmed Minutes of the Board Meeting held on 25 March 2021, (held electronically via Microsoft Teams and livestreamed via the web)

Present:			
Jan Williams	(JW)	Chair	
Jyoti Atri	(JA)	Interim Executive Director of Health and Wellbeing	
Rhiannon Beaumont- Wood	(RBW)	Executive Director of Quality, Nursing and Allied Health Professionals	
Tracey Cooper	(TC)	Chief Executive	
Kate Eden	(KE)	Non-Executive Director, Vice Chair and Chair of Quality, Safety and Improvement Committee	
Dyfed Edwards	(DE)	Non-Executive Director and Chair of Audit and Corporate Governance Committee	
Huw George	(HG)	Deputy Chief Executive and Executive Director of Finance and Operations	
Mohammed Mehmet	(MM)	Non-Executive Director (Local Authority)	
Judi Rhys	(JR)	Non-Executive Director (Third Sector)	
In Attendance:			
Sally Attwood	(SA)	Deputy Director Strategy and Planning (from item 3.3)	
Sian Bolton	(SB)	Transition Director, Knowledge Directorate	
John Boulton	(JB)	Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru	
Liz Blayney	(LB)	Deputy Board Secretary and Board Governance Manager	
Helen Bushell	(HB)	Board Secretary and Head of Board Business Unit	
Alisha Davies	(AD)	Head of Research and Development (for item 3.2)	
Eleri Davies	(ED)	Interim Medical Director	
Angela Fisher	(AF)	Deputy Director of Finance (for item 3.7.1)	

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Robin Howe	(RH)	Interim Director of Integrated Health Protection	
Lucy Jugessur	(LJ)	Internal Audit Manager	
Neil Lewis	(NL)	Acting Director of People and Organisational Development	
Leah Morantz	(LM)	Head of Communications	
Jamie Topp	(JT)	Digital Editor	
Stephanie Wilkins	(SW)	Trade Union representative	
Apologies:			
Mark Bellis	(MB)	Director of Policy and International Health, WHO Collaborating Centre on Investment for Health & Well-being	
Diane Crone	(DC)	Non-Executive Director (University)	
Sian Griffiths	(SG)	Non-Executive Director (Public Health)	
Andrew Jones	(AJ)	Acting Executive Director Public Health Services	
Alison Ward	(AW)	Non-Executive Director (Local Authority)	

The meeting commenced at 10am

PHW 233/2021 Welcome and Apologies

In opening the meeting, JW noted that it was a year since the Board began meeting virtually. Over the course of the past year, the global impact of COVID-19 had been immense, with the loss of over 2.75 million lives around the world, almost 5,500 of them in Wales. JW asked the Board to observe a minute's silence in memory of all those who had died.

JW then welcomed everyone to the meeting, explaining the need to continue with virtual meetings, with the main focus remaining on a COVID-19 related agenda. The coming year would hopefully see the return of the wider Board agenda.

The meeting was open to the public including staff via a livestream link on the website; JW extended a warm welcome to those observing the meeting online.

JW summarised the role of the Board as the Governing Body of the organisation, with specific responsibilities for: strategy development and direction; building and sustaining strategic partnerships; setting risk appetite and overseeing strategic risks; scrutinising in-year performance against plans and setting the organisational tone and culture. The Board was committed to ensuring that every member of staff could come to work and be their best selves, without fear of disadvantage or discrimination of any kind.

JW advised that the Board conducted its meetings in line with a formal Board Etiquette; the recently updated version could be found on the website here - Board and Executive Team - Public Health Wales. She also explained that, in

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line with its commitment to continuous improvement, the Board agenda optimised the time spent on assurance and approval; papers were taken as read, to facilitate this.

The Board **noted** the apologies for absence.

PHW 234/2021 Declarations of Interest

Board members made no declarations of interest in addition to those already recorded on the Declarations of Interest Register.

PHW 235/2021 Board Assurance Framework

PHW 235.1/2021 Chief Executive's Report

TC provided a verbal update, highlighting the following issues:

- The enhanced relationships and meetings over the past year with Local Government partners; these were in addition to meetings held with both Welsh Government and NHS colleagues.
- The reduction in COVID-19 transmission rates; there were regional variations, and these were subject to a proactive management approach;
- The Welsh Health Equity Status Report initiative (WHESRi), issued recently and available on the website here Placing Health Equity at the heart of Coronavirus recovery for building a sustainable future for Wales Public Health Wales; this was a product of Public Health Wales' World Health Organisation (WHO) Collaborating Centre status and the strong collaboration with WHO Europe office. A Memorandum of Understanding between the WHO and Welsh Government in 2020 had facilitated the work, which TC was confident would be seminal in its impact on future public policy in Wales. MB would provide a further report to the May 2021 Board meeting; in the meantime, she asked the Board to consider and disseminate the report;

Action: MB

 The formal response from the Office of the Information Commissioner (ICO) on the data breach that had occurred in 2020. RB-W added detail, confirming that the ICO would not be taking any reguatory action, concluding that Public Health Wales had acted promptly and appropriately. The ICO had made two recommendations concerning the completion of the remedial actions already underway and the full implementation of the Action Plan.

Action: RBW

JW echoed the significance of the WHESRi report and extended the Board's congratulations to all involved; she also welcomed the findings of the ICO in respect of the data breach, and thanked RB-W for her leadership of the

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response. JW noted that the Audit and Corporate Governance Committee would continue its oversight of Action Plan implementation.

Action: DE/HG

The Board **noted** the verbal update provided by TC and **took assurance** from the discussions.

PHW 235.2/2021 Knowledge Report (Research)

SB introduced the Knowledge Report , which provided an update on COVID-19 research activities across Public Health Wales; she drew attention to the following points:

- The suspension of non COVID-19 related research activity during 2020/21; much of this related to microbiology. SB advised that the reactivation of non COVID-19 related research activity would be considered as services/ functions/ programmes are reactivated. It may be that some or all of the of the previous proposals will not be appropriate post COVID-19;
- The extensive collaborative work underway with the academic sector and the plans to build further on this;
- The summary of the current open research studies, set out in Table 1.

SB invited AD to highlight some key points, which she did using a slide presentation: https://phw.nhs.wales/about-us/board-and-executive-team/board-papers/board-meetings/2020-2021/25-march-2021/25-march-2021-board-papers/item-3-2-covid-19-presentation/

The presentation included: a summary of the urgent and planned studies underway; Public Health Wales' lead role in genomic research; Medical Research Council funded work to create a platform for enhanced public health data collection; the establishment of a Network Data Lab, one of only five in the UK; virology research supporting the validation of rapid testing kits; and consideration of the behaviours amongst COVID-19 contacts, to inform the Track and Trace Programme. The broad range of activity had enabled Public Health Wales to demonstrate a strong strategic leadership role.

AD also updated the Board on the adoption of a new organisational focus, as research activity would reflect a wider more balanced approach in 2021/22, but still use COVID-19 research to inform future work.

JW thanked SB and AD for their informative report and presentation; she then invited questions and comments:

• MM welcomed the clear and informative presentation and identified the additional opportunities available through alignment with the WHESRi report. AD confirmed that work was already underway on this, including

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an exploration of the impact of COVID-19 on employment and on the wider determinants of health.

- MM also noted the reference in the WHESRi Report to the ongoing digital divide and its impact on health inequalities; he asked whether Public Health Wales would consider progressing work on this, in conjunction with other partners. AD confirmed the intention to repeat a population survey on digital engagement undertaken in 2019, to explore the impact of COVID-19 on digital exclusion.
- DE also welcomed the informative presentation which underlined the key role of focused research over the past year. He noted the need to use the research to inform both Board level and organisational work programmes;
- KE congratulated the Knowledge Directorate on its work over the past year and praised the ability of Public Health Wales' research arm to act nimbly and to pivot rapidly in response to emerging priorities, demonstrated by the response to COVID-19. The new partnerships formed with other sectors and organisations were also testament to this nimble approach.

JW reiterated the Board's thanks to SB and AD, noting that, in its consideration of the WHESRi report, the Board would make the connections with the research agenda.

The Board **considered** the Knowledge Report and **took assurance** from the research activities across Public Health Wales.

PHW 235.3/2021 Integrated Performance Report

HG introduced the Integrated Performance Report, noting the intention to move away from the initial synopsis of the report contents, to facilitate more time for constructive challenge and discussion. HG confirmed the circulation of a PDF form of the Performance Assurance Dashboard (PAD) to support public access as well as the discussion during the meeting.

(Note: The PDF can be accessed via the following link: https://phw.nhs.wales/about-us/board-and-executive-team/board-papers/)

<u>People</u>

NL drew attention to the downward trends in respect of workplace risk assessments and completed appraisals. He explained the reasons for each and assured the Board that actions were in hand to secure improvements in 2021/22.

JW invited comments and questions:

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• MM sought assurance that, as the workplace risk assessments were designed to support staff, and to facilitate the staff vaccination programme, the downward trend did not signal a drop off in support; he was also concerned that the appraisal data could indicate a lack of seriousness about the process, with the consequent implications. NL reassured the Board on both counts, referencing the measures in place to support staff, including regular 'check-ins'; staff feedback indicated that staff found these helpful.

TC confirmed this and reminded the Board of the actions and objectives identified in early 2020 to support and protect staff health and wellbeing, as their roles evolved to meet COVID-19 priorities. Regular check-ins, meetings and discussions continued across the organisation in addition to the regular appraisals process.

• ED provided an update on medical staff appraisal. She reminded Board members that, early in 2020, as part of the COVID-19 revised requirements, the General Medical Council (GMC) had formally suspended medical validation; job planning and check-ins had continued. The GMC had recently confirmed that medical staff reappraisals would recommence from 1 April 2021. ED would capture the approved missed appraisals and reactivate the appraisals process from April 2021.

Action: ED

JW noted the resumption of the People and Organisational Development Committee; this would exercise the appropriate oversight of the issues raised in this section, on behalf of the full Board.

<u>Finance</u>

HG confirmed that, despite this year being unusual and significant, given the additional resource streams and work in response to COVID-19, Public Health Wales would meet all its statutory duties for 2020/21. As Chair of the Audit and Corporate Governance Committee (ACGC), DE welcomed this as a significant achievement, given the complexities and uncertainties in the operating environment this year; he confirmed the ACGC role in scrutinising the year-end position, on behalf of the Board.

JW extended her thanks to the finance team for their role in ensuring that Public Health Wales would be reporting a balanced year-end position. This gave the organisation significant operating flexibility that would not otherwise be available

Corporate Risk and Quality

RBW highlighted the following issues:

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- The identification of a serious incident relating to cervical screening in November 2020; it came to light following a focused programme on Cervical Screening Failsafe, which identified a potential issue that some women should have been referred for a colposcopy in April 2017.
- She confirmed this incident was reported to Welsh Government in February 2021.
- She assured the Board that all women involved had received letters and that appropriate clinical action had been taken. KE confirmed that QSIC would consider the matter at its next meeting.

Action: RBW/KE

 RB-W noted the need to correct a high score for Corporate Risk 18 as it was shown as an error.

Key Performance Indicators

HW advised that, in AJs absence, he would respond to any queries, along with ED and RH.

JR noted the variation across health boards (HBs) in respect of bowel screening and asked what could be done in respect of this. HG agreed to explore this and feedback to JR outside the meeting.

Action: HG/JR

ED noted the significantly increased uptake of flu vaccination for 2020/21; COVID-19 restrictions had resulted in a reduced number of respiratory viruses, including influenza. Despite the high flu vaccination rate, the coming flu season could be a significant one, following on from reduced levels of immunity across the population.

The Board **noted** all the issues raised and **took assurance** from the wealth of data now available through the PAD; this was invaluable in framing questions and discussions and scrutinising performance.

PHW 235.4/2021 Novel Coronavirus (COVID-19) General Update

ED provided the following update:

Public Health Wales continued to support the system-wide COVID-19
response across a range of services. There was room for cautious
optimism in the positive picture emerging of lower numbers of positive
test reports across Wales, although local variations persisted. Media
reports in the last week had identified outbreaks in both Anglesey and
Merthyr Tydfil and Public Health Wales continued to work with partners
in these areas, to support the testing and investigation processes.

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 Public Health Wales continued to provide advice and support to the vaccination programme; rollout was proceeding well. RH confirmed 100% genomic analysis coverage in support of variant monitoring. Variants continued at a low level in Wales and were subject to containment.

MM noted the reassuring overall position across Wales; he referenced the staff vaccination programme, noting the take-up rate of 85% for frontline Public Health Wales staff and he asked about the remaining 15%. MM also raised the issue of vaccine hesitancy and requested any data on that across Wales.

On the staff vaccination rate, RB-W outlined the contraindications that would preclude vaccination; staff who declined the offer were followed up with subsequent offers. There were also data quality issues associated with the NWIS system that could also impact on the take-up rates registered. RB-W confirmed that the organisation was on target to vaccinate those staff members over 50 by mid-April.

Regarding vaccination hesitancy, ED advised that there were no specific figures at this point; a regular survey was in place to explore the factors affecting uptake rates, JW added detail on the work of the Vaccination Delivery Board on vaccination hesitancy and agreed to follow up on the latest position.

Action: JW

DE complimented ED on her media interviews through the medium of the welsh language. Her updates gave confidence and helped maintain public trust in Public health Wales.

The Board **noted** the content of the update and **took assurance** from the discussions.

PHW 235.5/2021 Committees of the Board: Report from Committee Chairs

In introducing this Agenda item, JW noted the role of the Committees in undertaking detailed oversight and assurance on behalf of the full Board. The Committee chairs provided regular reports to the full Board, noting any relevant issues. She then asked the Chairs of the Committees in place currently to highlight any specific issues:

Quality, Safety and Improvement Committee (QSIC)

KE noted that, at its last meeting, QSIC had undertaken a 'deep dive' into microbiology services, involving: quality and clinical governance; UCAS accreditation; professional leadership; the transformational approach to the workforce, including exploring innovative new roles to make Public Health Wales an employer of choice; testing; turnaround times. Collectively, this work demonstrated the pace and scale of service transformation, all the more

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remarkable, given the pandemic. The learning to support further development was clear and the Committee had found it a positive and informative exercise.

<u>Audit and Corporate Governance Committee</u> (ACGC)

DE drew attention to the assurance provided by three substantial audit reports; the ACGC had considered these at its March meeting. Work in 2021/22 included reviewing the application of the Pad to Committee business, alongside further consideration of 'right touch 'governance.

The Board **noted** the updates and **took assurance** for the breadth and depth of work underway at Committee level.

PHW 235.7/2021 Items for Approval

PHW 235.7.1/2021 Operational Plan and Budget Strategy 2021/22

JW commented on the importance of both documents, setting out as they did the organisational direction of travel in 2021/22. She advised that, because of a number of current uncertainties, the Board would consider the items as being in draft form.

HG noted the integrated approach to the development of both the Operational Plan (the Plan) and the Budget Strategy. Turning first to the Plan, he advised that this had been subject an inclusive development process, involving and engaging Public Health Wales staff. He referenced Board-level consideration of the Plan in October 2020; this version represented a refresh of that, to reflect the reintroduction of non COVID-19 related responsibilities. Welsh Government had prescribed the Plan format and there were a number of detailed appendices.

JW welcomed Sally Attwood, Angela Fisher and Nathan Jones, and congratulated them and their colleagues on the production of a high quality plan in what was a most challenging planning environment. She then invited questions and comments:

- JR welcomed the Plan and its recognition of the challenges facing detailed planning at this time, given the need to continually consider and reflect the impact of COVID-19. She supported the focus on staff wellbeing; she also welcomed the intention to accelerate work on the Digital Strategy, as this was much needed;
- DE commended the Plan; he noted the significant challenges in delivering on all requirements and asked about prioritisation, should this be required; he also sought further detail on the monitoring arrangements;
- MM also commended the Plan and its ambition. He asked about the management of the current backlog, particularly in respect of screening services.

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JW summarised the issues, along with additional points made by Board members who were not able to attend the meeting:

- How the prime focus on tackling health inequalities, and the WHESRi findings, would underpin the whole Plan;
- The need to reflect staff wellbeing and to build in recuperation and recovery time;
- The mechanisms in place to deliver the Plan;
- The prioritisation methodology, should circumstances militate against delivery of the full Plan;
- The management of the backlog, as it related to Public Health Wales' own services;
- The weaving in of the equality, diversion and inclusion agenda;
- The key risks that the Board should have uppermost in its mind.

In responding, TC extended her thanks to the team for developing such a wide ranging, but incisive, Plan during the pandemic period. She recognised the point about the ambition set out in the Plan and noted the intention to: review the actions and milestones constantly, to mitigate against any further COVID-19 impacts; ensure the appropriate support for staff as they return to their core roles and reactivate core functions; and put in place robust arrangements to recruit, induct and support new staff. She also noted that additional investment into population health priorities would enable some external commissioning of work, should that prove necessary.

On screening services' reactivation, RB-W advised of the provisions in place to support the recovery agenda; TC suggested sharing with the Board a report to the Business Executive Team, setting out the proposals in more detail. This would provide additional assurance in respect of the diversity and inclusions plans in place.

Action: HB

HG updated the Board on the work in hand to finalise the Digital Strategy by September 2021; this would engage both the Board and wider stakeholders.

JW noted that the PAD would provide the Board and its Committees with a rich data set to use in tracking in-year delivery against the milestones set out in the Plan.

As there were no further questions on the Plan, HG then introduced the Budget Strategy, the companion document to the Plan. Its draft format reflected the fact that final confirmation of the financial allocation from Welsh Government was still outstanding. The Budget Strategy had three main themes:

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- <u>Allocation</u>: the increased size of the allocation was significant, reflecting the changing shape of the organisation in response to COVID-19. The impact of the 2021/22 NHS Pay Award was as yet unknown;
- <u>Savings</u>: the usual approach involved seeking efficiency savings across the organisation; instead, 2021/22 would see a corporate approach reflecting the changing nature of work and resultant patterns of working.
- <u>Investment</u>: the Budget Strategy and the Plan had been designed to operate across the organisation in a way that allowed investment, with new commitments to increased investment in: population health; knowledge; and enabling and supporting functions.

JW commended HG for the comprehensive Budget Strategy, paid tribute to all staff involved in its development and sought comments and questions

MM welcomed the Strategy report and the clear, convincing and reassuring approach adopted. He asked about the full funding of the 2021/22 NHS Pay Award. HG confirmed the Pay Review Body had yet to reach a recommendation, but that Welsh Government had factored in a 1% uplift; the NHS worked on the assumption of full funding of any subsequent uplifts.

The Board agreed to **approve** the draft 2021/22 Operational Plan and the draft 2021/22 Budget Strategy, noting the intent to bring a further report on both to the May 2021 Board meeting.

Action: HG

PHW 235.7.2/2021 Declarations of Interest Policy

HB introduced the item, explaining the background to the proposed changes.

SW noted the intention to bring the Policy to the attention of newly appointed staff; she suggested also highlighting its provisions for existing staff. HB agreed to reflect this in the Procedure.

The Board agreed to **approve** the revised Policy and Procedure with the agreed amendment.

Action: HB

PHW 235.7.3/2021 Standing Order Variations

HB reminded the Board of the revision to Standing Orders in March 2020, at the start of the pandemic, with temporary Standing Orders agreed to ensure timely and appropriate responses to the constantly developing course of COVID-19. These temporary Standing Orders now needed further consideration, renewal or amendment.

The Board **considered** the proposed revisions; **noted** a further review during 2021/22, and **approved** the proposed changes, effective from 1 April 2021.

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PHW 235.7.4/2021 Minutes and Action Log from the Board Meeting on 25.02.21

JW confirmed that, as Board members had the opportunity to consider the Minutes in draft form before the meeting, and to make any changes, she did not repeat the process at the Board meeting itself.

The Board **approved** the minutes of the meeting held on 25 February 2021 as a true and correct record. The Board **considered** the action log and **approved** the actions recommended for closure.

PHW 236/2021 Items for Noting

No items for noting were identified.

In closing the meeting, JW paid tribute to two Board members, who were leaving their roles shortly.

Alison Ward was stepping down from the Board after serving two separate terms as a Non-Executive Director. JW described AW as a consummate public sector leader whose wise counsel had enriched Board discussions and who had been such an effective ambassador for the organisation. Her extensive Local Government networks and connections had done so much to facilitate effective partnership working, never more so than during the pandemic. All Board members joined with JW in wishing AW well for the future and in thanking her for her significant contribution to the work of the Board and its Committees.

Sian Bolton would be retiring shortly and JW reflected on the valuable role that she had played in Public Health Wales over the last 9 years. SB was very well respected, both for her subject matter expertise and for her transferable skill set that she deployed across the organisation. SB stepped up and stepped in to whatever was asked of her, delivering with a commitment and enthusiasm that was motivating to all involved. All Board members joined with JW in wishing SB a long and happy retirement.

PHW 237/2021 Date of Next Formal Meeting of the Board

The next meeting was scheduled for 27 May 2021.

PHW 238/2021 Close of Public Meeting

The meeting closed at 12.20pm

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