



**Confirmed Minutes of the Board Meeting
held on 29 October 2020,
(held electronically via Microsoft Teams and livestreamed via the
web)**

Present:		
Jan Williams	(JW)	Chair
Tracey Cooper	(TC)	Chief Executive
Jyoti Atri	(JA)	Interim Executive Director of Health and Wellbeing
Rhiannon Beaumont-Wood	(RB-W)	Executive Director of Quality, Nursing and Allied Health Professionals
Diane Crone	(DC)	Non-Executive Director (University)
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
Sian Griffiths	(SG)	Non-Executive Director
Mohammed Mehmet	(MM)	Non-Executive Director (Local Authority)
Judi Rhys	(JR)	Non-Executive Director (Third Sector) and Chair of the People and Organisational Development Committee
Quentin Sandifer	(QS)	Executive Director of Public Health Services/Medical Director
In Attendance:		
Mark Bellis	(MB)	Director of Policy and International Health, WHO Collaborating Centre on Investment for Health & Well-being (WHO CC)

Public Health Wales	Confirmed Minutes 29 October 2020
---------------------	--------------------------------------

Sian Bolton	(SB)	Interim Transition Director, Knowledge Directorate
Helen Bushell	(HB)	Board Secretary and Head of Board Business Unit
Liz Blayney	(LB)	Deputy Board Secretary and Head of Board Business Unit
Eleri Davies	(ED)	Head of HCAI & AMR Programme and Interim Medical Director from 1 Dec 2020
Andrew Jones	(AJ)	Deputy Director of Public Health Services and Interim Executive Director of Public Health Services from 1 Dec 2020
Neil Lewis	(NL)	Acting Director of People and Organisational Development
Jamie Topp	(JT)	Digital Editor
Stephanie Wilkins (from 10.45am)	(SW)	Representative of Staff Partnership Forum
Observers:		
Sarah Evans	(SE)	Health Inspectorate Wales
Richard Hayward	(RH)	Health Inspectorate Wales
Verity Winn (item 167/2020)	(VW)	Audit Wales
Apologies:		
John Boulton	(JB)	NHS Head of Quality Improvement and Improvement Cymru
Paul Dalton	(PD)	Head of Internal Audit
Eleri Davies	(ED)	Head of HCAI and AMR Programme
Leah Morantz	(LM)	Head of Communications
Alison Ward	(AW)	Non-Executive Director (Local Authority)

The meeting commenced at 10:30

PHW 164/2020 Welcome
JW welcomed everyone to the meeting, noting the need to continue with virtual meetings based on a COVID-19 related agenda. The meeting was open to the public and to staff via a livestream link on the website. JW summarised the role of the Board as the Governing Body of the organisation, with specific responsibilities for: strategy development and direction; strategic partnerships; setting risk appetite and overseeing strategic risks; scrutinising in-year performance against plans and setting the organisational tone and culture.

JW noted that the Board was meeting at the gravest of times, with COVID-19 case numbers increasing together with an increase in the numbers admitted to Hospital and sadly, in the number of deaths. The Board faced a second watershed moment, following from the first in February 2020, when the whole organisation had mobilised in response to the pandemic. The agenda centred on the need to review the in-year Operational Plan, given the increasing intensity of the COVID-19 related workload and its organisational impact.

PHW 164/2020 Apologies

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

PHW 165/2020 Declarations of Interest

Board members made no additional declarations of interest in addition to those already on the declarations of interest register.

PHW 166/2020 Minutes, Action Log and matters arising from Board Meeting on 24 September 2020

The Board **approved** the minutes of the meeting held on 24 September 2020 as a true and accurate record

The Board **considered** the Action Log. HB noted the inclusion of two new actions, for further updates at the November Board, as follows:

- **Action 24/03/2020 PHW146/2020 (Chief Executives Report)**
- **Action 24/09/2020 PHW 148/2020 (Strategic Risk)**

The Board **approved** the closure of the remaining actions marked as complete.

Matters arising

Minute reference 153/2020 (Annual Quality Statement)

RB-W reported on the identification of an inaccuracy in the Annual Quality Statement in respect of the reporting of Lessons Learned. 74% of the actions were complete, with the remaining 24% all related to Diabetic Eye Screening Wales. The DESW team would include completion against these in its ongoing improvement programme.

Minute reference 151/2020 (Update on the Impact of leaving the EU)

QS updated the Board on preparations for the UK exit from the EU on 31st December 2020. Work continued with the other 3 UK countries and their Health Departments on a non-legislative Framework; the Board would receive an update on this at its November 2020 meeting.

Action: QS

PHW 167/2020 Board and Committee Governance

JW summarised the Board and Committee level changes introduced earlier in the year, to ensure good governance during the pandemic. The time was right to consider further changes, to reflect the Board's contribution to the intensification of COVID-19-related workload and subsequent impact across the organisation.

HB explained the rationale underpinning the proposals, based on the concept of Right Touch Governance, designed to support ongoing good governance whilst not being overly bureaucratic.

JW welcomed VW to the meeting and invited her views on the proposals, in the context of Audit Wales' Structured Assessment process. VW outlined that process and noted the positive Public Health Wales report in 2019; this had made no recommendations and that remained the case for the 2020 report, a remarkable achievement, given the operating environment.

VW congratulated the Board on its strong governance focus and commented favourably on the proposed changes; these were in line with Public Health Wales' commitment to continuous improvement and she commended the Board on its approach.

DE commented on the discussions at the Audit and Corporate Governance Committee meeting on 13th August 2020. He noted particularly the constructive working relationships with both Audit Wales and Internal Audit, the learning culture that came through strongly and the work of the chair, vice-chair, chief executive and deputy chief executive to embed good governance across the organisation, with support from the Board Secretary. The 2020 Structured Assessment Report reflected the high priority given to good governance.

The Board **resolved** to:

- **Receive** the 2020 Structured Assessment and Internal Audit Advisory Review of Governance Arrangements During COVID-19 and take assurance from the findings on the quality of PHW governance arrangements;
- **Adopt** the 'Right Touch Governance' approach as set out in the report;
- **Approve** the variations to the Board and Committee schedule as outlined;
- **Approve** the Terms of Reference for the People Advisory Group.

PHW 168/2020 Chief Executive's Report

In taking the Board through her report, TC drew attention to the following points

- The mobilisation of staff across the organisation in support of the Test, Trace and Protect response; she extended her grateful thanks to them all, commenting on the importance of supporting staff as the pandemic intensified once again. She noted the arrangements in place to do this;
- Her attendance, together with QS and Giri Shankar, before a September session of the Health Social Care and Sport Committee Inquiry. This followed from a Committee report issued in July 2020; recommendations 19 and 22 in that report related to Public Health Wales. TC also noted the Welsh Government response to the Recommendations of the Inquiry, available on the Welsh Parliament website;
- The significant progress made to introduce 24/7 working in regional labs and the development of local hot labs. The regional labs in Swansea, Rhyl and Cardiff would begin 24/7 working by the end of October, with the smaller labs on target for the end of November;
- A meeting with the Minister for Health and Social Services on 21st October 2020.

TC concluded by extending her congratulations to those colleagues recognised in the Queen's Birthday Honours. Their awards were well deserved and TC noted that they had all acknowledged their colleagues' role in delivering their services. JW joined TC in extending the Board's congratulations.

JR added her congratulations, also highlighting the recent BMJ Award to the blood-borne virus team for its role in eliminating Hepatitis C in HMP Swansea. This was a significant achievement.

DE reflected on Public Health Wales' engagement with the Health, Social Care and Sport Committee.

The Board **resolved** to **receive** the information contained in with the report.

PHW 169/2020 COVID-19 Update

QS updated the Board on the Global, UK and Wales' positions, noting the significant increase in case numbers and, sadly, deaths, as the second wave intensified. He noted the current position in Wales on the test positivity rate, at 15%, the overall Wales case incidence rate of 223:100,000 population and the slight increase in the doubling time to 19 days.

QS then commented on the role that the Public Health Wales' team played in providing policy advice to Welsh ministers and officials, in conjunction with others.

QS concluded by drawing the Board's attention to the impact of COVID-19-related pressures on staff and the focus on strengthening resilience.

JW thanked QS for his update, noting that it set the context for the next agenda item. The People Advisory Group, approved earlier in the meeting, had resilience as one of its areas of focus, given the need to support staff and build resilience in these grave times.

The Board **noted** the update and the intention to provide a further update at the November 2020 Board meeting; the Board also took **assurance** from the information provided

Action: QS

PHW 170/2020 Operational Plan 2020-2022

JW emphasised the importance of this agenda item, reflecting as it did the impact of the second wave of the pandemic on the organisation, in common with other public bodies across the whole system. The time was right to review the current plans, and she and TC had drawn the proposed review to the Minister's attention during their recent meeting.

JW also expressed the Board's appreciation of the significant work involved in assessing the in-year revision and for the quality of the documentation presented to the meeting.

TC emphasised the need for flexibility in these uncertain times, to sustain the public protection response whilst still meeting broader public health responsibilities. The Executive Team had to move resources across the organisation at pace, to meet ever-changing needs.

HG introduced the Operational Plan (the Plan), setting out the proposed structure for discussion, with the key focus on:

- Health protection response
- Population health
- Reactivating our essential public health services and functions.

Before turning to these three specific areas, HG invited any overarching comments or questions.

MM commended the Plan as an easy to read document that allowed for the necessary flexibility. He asked about the extent to which delivery against aspects of the Plan depended on the successful outcome of the health protection business case.

SG also commended the clarity of the Plan and emphasised the importance of focussing on outcomes as well as processes. She also referenced the need to track the impact of policy decisions on those communities most adversely affected.

JW confirmed with HG that the Board would return to these issues at the end of the discussion, should they remain outstanding.

HG then asked each lead Executive Director to summarise the issues set out in the three sections highlighted above.

1. Health Protection Response

QS reminded the Board of the advice submitted to Welsh Government in May, to support the development of Test, Trace and Protect. He also referred to the implications arising from the Local COVID-19 Response Plans and the Welsh Government's Coronavirus Action Plan for Wales. Since May, Public Health Wales had delivered a range of services, products and advice, as set out in the Stage 1 and 2 of the Public Health Protection and Response Implementation Plan. The learning to date had informed the proposed health protection response and QS then summarised the key components:

- Repurposing and refocusing the generic public health workforce to become a focused COVID-19 response workforce. Seven consultants had stepped out of their usual roles to become health protection COVID-19 response single disease specialists, working alongside the usual staff establishment. Health Boards had welcomed this move;
- Restructuring the health protection response team work patterns, to ensure a more robust and sustainable response. This included adjustments to the national contact centre model;
- Proposed structural changes to set up functional cells to manage specific and immediate response requirements, for example, in response to the fact that Wales was now predominantly reliant on its own guidance, rather than that from England

The proposed response had two stages: embedding the changes during the current calendar year, followed by, and subject to Welsh Government approval of a Business Case, the implementation of a new model starting in early 2021.

In response to MMs question, QS confirmed the availability of internal non recurrent funding for 2020. Plans into 2021 and beyond did depend in part on the outcome of the Business Case submission.

SG noted that the Observatory already produced reports on the health status of the population; she sought assurance on the model capturing outcomes relating to the impact of COVID-19 on physical and mental health. JA explained the work underway to identify the impact of COVID-19 on those with pre-existing inequalities.

2. Population Health

In introducing this section, MB welcomed the £1m made available through refocused budgetary decisions to support the work. He then took the Board through the key points:

- The utilisation of the funding to develop a commissioning model that covered both internal and external activity;
- The inclusion in the work of: a broader dashboard; a range of health impact assessments; a prime focus on the impact of COVID-19 on employment, mental health and well-being and vulnerable groups;
- Noting SGs earlier comments, MB confirmed the focus on outcomes, seeking to maximise gain and minimise harm. The immediate priority areas included: the consequences of unemployment on health; vulnerabilities in the population related to pre-existing inequalities and those exposed by COVID-19; mental health consequences with a particular initial focus on younger people. The work also fed into the Welsh Government technical advisory cells to form part of the wider evidence and knowledge base.
- The work underway on the impact of other key issues, including Brexit; how this overlaid COVID-19 in its impact on geographical areas and their populations.

MB also made some broader comments:

- Information sharing was a key issue to support public understanding of COVID-19 and the actions being taken in response. Messages had to be visible and widely accessible;
- The population health plan set out to balance the public protection imperative during the pandemic against broader health responsibilities and consequences of the restrictions brought in to control COVID-19.

DE thanked MB and his team for their inspiring work; as the long term effects of COVID-19 remained unknown, DE reflected on the importance of ongoing partnership working with Welsh Government and others.

SG noted that she was strongly supportive of work undertaken to date. She sought assurance on the assessment of the impact of the fire-break, and the sharing of findings both at a UK level and internationally. MB confirmed the links in place with technical advisory groups across Wales to capture and share the benefits and consequences of the fire-break.

JA agreed with DE on the longer term impacts of COVID-19 and noted that these could be far reaching, for example on smoking cessation programmes.

3. Reactivating our essential and priority public health services and functions

In introducing this section, RB-W noted the dependence of delivery of some actions on available resource and, therefore, increasing the available

workforce capacity. Approval of the Business Case referred to earlier was relevant.

RB-W then identified the key issues:

- The detailed work undertaken to identify essential and priority services and proposed levels of reactivation assigned to each of the services listed in the Plan, including the methodology’;
- The pace and scale of reactivation; this would need constant review, with consideration of the impacts and risks, should services/functions need to operate minimally or to pause.

JR asked about approaching other partners to take on work not included in current reactivation plans. RB-W agreed to include this consideration in ongoing work.

MM noted the inclusion in the priority list of non-statutory services and asked whether the focus should, in fact, be solely on statutory obligations. RB-W noted all the issues highlighted for ongoing consideration.

TC added detail on those non-COVID related services that had to continue. DE noted the capacity challenges facing PHW, in line with all other NHS organisations; he queried the potential impact of reactivation on the wider NHS system. RB-W outlined the arrangements in place to engage with partners.

KE asked what impact reactivating services would have on staff, recognising the current demands on their time. RB-W confirmed that this was the key factor for reactivation, and would be kept under constant review. JW confirmed that the people advisory group would have an oversight role in this respect.

JW noted the submission of the documentation to Welsh Government the previous week; she and TC had discussed the need to review the Plan with the Minister at their recent meeting.

JW thanked Board colleagues for their contributions and summarised the key themes from the discussion:

- The dynamic nature of the Plan;
- The links with other work underway on impact and outcomes;
- The need to monitor the resource implications and liaise with Welsh Government on the Business Case; the Audit Committee would continue to oversee COVID-19 related expenditure on behalf of the Board;
- The need to update the governance and oversight arrangements;

- The primacy of the health protection response, whilst not losing sight of broader health responsibilities.

The Board also noted the inclusion of the Enablers and Organisational Learning sections of the Plan.

JW concluded the item by thanking HG, QS, MB and RB-W for steering the discussions and all colleagues for their rich, and constructive comments. She also thanked NJ, in attendance at the meeting; he and Sally Attwood were expert planners and Public Health Wales benefitted greatly from their expertise.

The Board resolved to **approve** the Operational Plan, recognising:

- minor amendments would be made prior to publication;
- the dynamic nature of the Plan, and the intent to engage the Board fully in any subsequent changes;
- the parallel work on impact and outcomes that would feed into the Plan;
- ongoing liaison with Welsh Government colleagues;
- working with strategic partners as appropriate and the wider NHS system;
- the need for further work on governance and oversight arrangements.

Action: HG

Date of Next Formal Meeting of the Board

JW closed the meeting, reiterating her thanks to all those involved in the production of the Plan and for all contributions.

The meeting closed at 12.25pm, with the next meeting scheduled for the 26 November 2020