

Iechyd Cyhoeddus Cymru Public Health Wales

Confirmed Notes of the Board Briefing. Held on 10 August 2023, 13:15pm

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Present:Jan Williams(JW)ChairTracey Cooper(TC)Chief ExecutiveSumina Azam(SA)National Director of Policy Research and Development, Policy, Research and International DevelopmentSamantha Morgan(SM)Assistant Director of People Strategy, Insights and ServiceAngela Cook(AC)Acting Executive Director of Quality, Nursing and Alied Health ProfessionalsIain Bell(IB)National Director for Public Health (Knowledge and ResearchKate Eden(KE)Vice ChairNick Elliott(NE)Chair of the Audit and Corporate Governance Committee and Non- Executive DirectorHuw George(HG)Deputy Chief Executive and Executive Director of Finance and OperationsSian Griffiths(SG)Chair of the Knowledge, Research and Information Committee and Non Executive DirectorNathan Jones(NJ)Head of Strategy and PlanningMeng Khaw(MK)National Director of Health Protection and Screening Services, Executive Medical DirectorMohammed Mehmet(MM)Chair of the People and Organisational Development Committee and Non-Executive DirectorAngela Williams(AW)Deputy Director Operations and Finance Governance ManagerApologies:Diane Crone(DC)Diane Crone(DC)Non-Executive Director (University)				
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John Bolton	(JB)	National Director for NHS Quality Improvement and Patient Safety/ Director Improvement Cymru
Kate Young	(KY)	Non-Executive Director
Neil Lewis	(NL)	Director People and Organisational Development
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit

1. Welcome and Apologies

JW welcomed everyone to the Board Briefing and noted the apologies listed above.

2. NHS Financial Position

JW began by reminding members of the discussions at the earlier Board Briefing on 27 July,2023, captured in a separate Note.

TC advised that the Executive Team had worked with finance colleagues and developed a set of proposals, based on the principles shared with the Board at the 27 July Briefing.

HG then presented the proposals, based on:

- What savings Public Health Wales could offer to Welsh Government in respect of spend not yet committed / allocated.
- What costs Public Health Wales could absorb, in terms of service delivery / recovery.
- Any costs that Public Health Wales could reduce around charging Health Boards for services.
- The proposals focussed on three areas: Organisation / Corporate Savings, Directorate level savings, and Health Protection and Screening Services savings.
- The proposals totalled £3.4 million, equating to 2.5% of Public Health Wales' core allocation (Health Boards had to propose savings against their planned deficits)
- £1.5 million related to corporate savings, including: slippage of investment funding; lower than anticipated inflationary costs; non- pay cost pressure funding not needed for 23/24; and savings associated with interest rates rise.
- Directorate level savings of £0.463 million.
- Health Protection savings amounted to £1.427 million, gained from forecast underspends and unallocated funds from the Health Protection transformation fund.
- Welsh Government had still to decide whether to fund a number of proposed developments and business cases, including for Screening

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Recovery, Lung Cancer Screening and Newport Physical examination programmes. These totalled £2.099 million.

- Covid Spend: Welsh Government had earmarked up to£16.93million for 2023/24, and Public Health Wales was unlikely to draw down £2.159million of this.

JW thanked HG and all those involved in the intensive work of drawing up a set of proposals in a very short timeline; she then invited comments /questions.

In a wide-ranging discussion, Board members raised the following points:

- The importance of not compromising the prevention and population health agenda, with the added urgency around demonstrating the impact of the spend on this;
- The need to emphasise the non-recurrent nature of the proposals;
- The urgent need to maintain focus on Screening Recovery;
- The importance of engaging staff and providing clear guidelines;
- The need for a clear distinction against savings that Public Health could offer itself and those that required health board support;
- The need to avoid compromising on delivery against the IMTP milestones.

On the last point, the Executive Directors confirmed that proposals resulted from: holding vacancies, delaying recruitment, slippage following a failure to recruit, directorate funding as yet unallocated and revising the mode of service delivery. The proposals should not compromise IMTP delivery.

Non Executive Directors thanked their Executive Colleagues for their commentaries, taking assurance from the explanations provided.

TC confirmed that the letter to Welsh Government would emphasise the point about the spend on prevention and population health in the strongest terms; she also outlined the proposed guidelines for staff, with the emphasis on avoiding unnecessary expenditure, limiting face to face events and restricting international travel to that committed already, or funded externally.

JW thanked all Board members for their valuable comments, confirming that the letter would reflect the important issues raised; TC would submit this, together with the schedule of proposals, the following day, with a copy to the Board. The matter remained confidential at this time, as the submissions from all health bodies reflected proposals for Welsh Government consideration and did not constitute Board-level decisions.

JW then brought the Briefing to a close, reiterating the Board's appreciation of the intensive work involved in producing the proposals.

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The Meeting closed at 14:10

