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Iechyd Cyhoeddus
Cymru
Public Health
Wales

**Confirmed Minutes of the Board Meeting
held on 30th September 2021
(held electronically via Microsoft Teams and livestreamed via the
web)**

Present:		
Kate Eden	(KE)	Non-Executive Director, Vice Chair and Chair of Quality, Safety and Improvement Committee
Tracey Cooper	(TC)	Chief Executive
Diane Crone	(DC)	Non-Executive Director (University) (from 10.20)
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 (Public Health)
Fu-Meng Khaw	(MK)	National Director Health Protection and Screening Services, Executive Medical Director
Mohammed Mehmet	(MM)	Non-Executive Director (Local Authority)
Judi Rhys	(JR)	Non-Executive Director (Third Sector)
Rhiannon Beaumont-Wood	(RB-W)	Executive Director of Quality, Nursing and Allied Health Professionals
In Attendance:		
Sally Attwood	(SA)	Transition Director Health and Wellbeing
Iain Bell	(IB)	National Director Knowledge, Research and Information
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru
Liz Blayney	(LB)	Deputy Board Secretary and Head of Board Business Unit
Helen Bushell	(HB)	Board Secretary and Head of the Board Business Unit
Alisha Davies	(AD)	Head of Research and Evaluation (item 4.1)

Lucy Jugusseur	(LJ)	Audit Manager (on behalf of the Head of Internal Audit)
Gillian Knight	(GK)	Nursing Officer, Welsh Government (item 3.1)
Neil Lewis	(NL)	Director of People and Organisational Development
Leah Morantz	(LM)	Head of Communications
Jamie Topp	(JT)	Digital Editor
Apologies:		
Mark Bellis	(MB)	Executive Director of Policy and International Health, WHO Collaborating Centre on Investment for Health & Well-being (WHO CC)
Paul Daulton	(PD)	Head of Internal Audit
Stephanie Wilkins	(SW)	Representative of Staff Partnership Forum
Jan Williams	(JW)	Chair
Verity Winn	(VW)	Audit Wales

The meeting commenced at 10am

PHW 283/2021	Welcome and Apologies
<p>KE welcomed everyone to the meeting and extended a warm welcome to those observing the meeting online. She summarised the role of the Board as being the Governing Body of the organisation, with specific responsibilities for: strategic direction-setting; building and sustaining strategic partnerships; setting risk appetite and overseeing strategic risks; scrutinising in-year delivery against plans and setting the organisational tone and culture.</p> <p>KE advised that the Board conducted its meetings in line with a formal Board Etiquette; this could be found on the web-site and provided for the reading of all papers before the meeting. This optimised the time available for debate on the day.</p> <p>The Board noted apologies for absence from: Jan Williams; Professor Mark Bellis; Paul Daulton; Stephanie Wilkins and Verity Winn.</p>	
PHW 284/2021	Declarations of Interest
<p>Board members declared no interests in addition to those recorded already on the Declarations of Interest Register.</p>	
PHW 285/2021	Strategic Partnerships
PHW 285.1/2021	Nursing Now Cymru Wales
<p>RB-W introduced the Report of the 'Nursing Now Cymru Wales Steering Group'. She noted that the <i>Nursing Now</i> campaign arose initially from a cross Parliamentary Group and became a global initiative endorsed by both the World Health Organisation (WHO) and the International Council of Nursing. The aim of</p>	

Nursing Now was to raise the profile of nursing and midwifery, highlighting their impact in improving health and promoting wellbeing.

RB-W referenced the establishment of the *Nursing Now* Steering Group in Wales in March 2019, with cross sector representation including academia, the Royal College of Nursing (RCN), the Royal College of Midwifery (RCM), NHS Wales and the independent and third sectors. Public Health Wales had published the Report on behalf of the Steering Group.

RB-W then invited Gillian Knight, Nursing Officer, Welsh Government, to provide further detail. Ms Knight welcomed Public Health Wales' role in leading and co-ordinating the development of the Report and outlined how the work had helped to drive professional development across Wales: influencing education, research and leadership at a strategic level whilst also influencing the application of good practice at scale and pace and promoting diversity. She also commented on the *Nursing Now* campaign strengthening the links with Africa.

KE thanked GK and RB-W for their introduction and synopsis and invited questions:

- SG welcomed the report and noted the potential to expand on global dissemination of the work. RB-W advised that Cardiff University had begun work on developing and maintaining global links, which would continue despite the impact of funding constraints. GK confirmed that Welsh Government would continue to promote opportunities to volunteer overseas with renewed focus as Wales moved out of the pandemic.
- TC thanked RB-W and GK for their role in this work and welcomed the confirmation that this campaign would be an ongoing movement rather than one with a specified time - limited approach. She asked how the challenges of the COVID-19 pandemic would influence the work and the themes, as the movement progressed. RBW confirmed that a recent workshop had tested the need to update the intentions and themes, following the impacts of the pandemic but had concluded that they remained relevant; promoting resilience was a fundamental component. RB-W also advised that, at its recent meeting, the World Health Assembly had recognised and endorsed the *Nursing Now* campaign; this was the first nursing-related endorsement in a decade.

KE reiterated the Board's thanks to RB-W and GK for their roles in progressing the campaign in Wales.

The Board **endorsed** the Nursing Now Cymru Wales Steering Group Report 2021.

PHW 286/2021 Board Assurance Framework

PHW 286.1/2021 Research and Evaluation Update

KE noted that, in March 2021, the Board had received an update on research and evaluation; this had included a commitment to provide a further update in six

months. This update on the agenda provided the Board with an opportunity to consider progress in advance of the re-establishment of the Knowledge, Research and Information Committee (KRIC). She welcomed IB and AD to the meeting and invited them to provide an update.

In introducing the update, IB noted that it focussed on the research activity specific to the Research and Evaluation Division, rather than on the totality of research activity underway across the organisation; he confirmed that the ultimate ambition centred on the development and implementation of an organisation-wide approach to capturing and considering knowledge and research. This work was underway and KRIC would receive progress reports ahead of it coming to Board.

AD provided a summary of progress to date relating to population health and the COVID-19 response. She confirmed that the monitoring mechanisms developed and established would continue. Work was also in hand to track engagement with research through post publication surveys, capturing how research had been used to support change. This future systematic approach would include tracking research funding and outcomes.

IB invited comments and questions:

- TC congratulated the team on the progress maintained, even though staff had been mobilised in support of COVID-19 related roles.
- SG also welcomed the efforts made to maintain and progress the evaluation of Research and Evaluation during the pandemic. She welcomed the intention to develop an organisational level strategic approach which KRIC would oversee.
- MM welcomed the organisation-wide approach and sought further detail on the delivery model and timescales. He also sought timescales for completion of two pieces of work still in progress. These were: 4.31 regarding COVID-19 inequalities in cancer screening and 4.32 regarding Children and Young People's Mental Health. IB confirmed the scoping work underway on the organisation-wide strategic approach, with a 'one stop shop' model being the preferred option. This would reflect research happening across the organisation with co-ordination and prioritisation in place to assist the Board in making strategic decisions. Regarding the specific queries AD confirmed the completion of 4.31 by Christmas 2021, with completion of 4.32 expected early in 2022. She confirmed that KRIC would consider both pieces of work.
- DE noted that the report identified the amount of research underway and asked about the level of confidence in capturing outcomes and use of these to support strategic decision making. IB advised that a key challenge concerned ensuring that research analysis and evidence was available and presented in a way that would support its application; this would allow a systematic approach to the use of research to inform decision-making.

- DC welcomed the collaboration with the Higher Education sector and other strategic bodies. She asked whether COVID-19 would continue to influence organisational priorities and the work taking place across Higher Education. IB noted the processes in place to scan outputs and the work to systemise research; this would include that undertaken by HEIs.

The Board **considered** and **took assurance** from the work underway relating to research and **noted** that the re-established KRIC would seek assurance on this area of work.

PHW 286.2/2021 Chief Executive's Report

In introducing the Report, TC highlighted the following points:

- The work undertaken by JB and team to develop the Improvement Cymru Strategy; actions to review the ways of working commenced in 2019, although the pandemic had slowed progress, with staff mobilisation into other roles. JB noted the opportunities that this had presented to observe service and delivery models across the sector, capturing both frontline and strategic views. The revised Strategy moved to a nationally co-ordinated but regionally focused model, designed to support specific regional profiles.
- A recent meeting with Public Health Scotland that had focused on broader harms and also the Wellbeing of Future Generations Act. TC noted that she was due to attend a Four National Public Health CEOs meeting the following week. She indicated that representation for England was likely to reflect the revised structures now in place.
- TC had sought to further develop close working relationships with Local Authority (LA) colleagues over recent months, driven in part by COVID-19. It had been particularly relevant to environmental health functions. A recent Workshop had explored how Public Health Wales could help LAs to build healthy and sustainable communities.
- The organisation had participated in the Black, Asian and Minority Ethnic (BAME) Cultural Competence Certification Scheme, run by Diverse Cymru, and had achieved the second highest level of 'competence'. TC noted that this was an excellent acknowledgement of the work undertaken to date and extended her thanks to those involved.
- IB had been awarded a Fellowship from the Academy of Social Sciences.

TC then invited questions:

MM welcomed the developing partnership with Local Government and supported the commitment to work together on key issues. He thanked TC for her leadership in driving strategic partnerships both in Wales and across the UK.

The Board **received** the report and **took assurance** from the updates provided

PHW 286.3/2021 BREAK

PHW 286.4/2021 Integrated Performance Report

In introducing the Integrated Performance Report, HG reflected on the continuous improvement approach adopted by the organisation, and outlined the

work undertaken to further develop the report, providing a more succinct format that focused on delivery and areas of concerns. This involved an increased emphasis on the Dashboard, to provide greater insight on performance and to promote strategic discussions at Board. The amendments included four key themes that reflected both *A Healthier Wales* and the Delivery Framework. HG invited the lead for each Theme to take Board members through the key issues.

Theme 1: Maintaining a healthy and sustainable workforce

NL highlighted the key issues, reinforcing that this was work in progress and subject to further refinement. He noted:

- An increase in turnover but with no specific areas of concern. The increase related to the completion of some fixed term contracts and retirements.
- That statutory and mandatory training requirements required further attention.
- That appraisal compliance remained below expectations, targeted work in identified departments working with managers and lead Directors would look to address this.
- No major concerns regarding sickness and absence. Numbers were low when compared with other NHS Wales organisations.

NL advised that the People and Organisational Development Committee would, at its 15th October meeting, focus on these issues. He then invited questions:

- SG sought confirmation on the monitoring of the annual flu vaccination process, to ensure as high a level of compliance as possible. RB-W confirmed the flu campaign launch was imminent and would, as always, include rigorous monitoring.
- MM welcomed the revised format and suggested the inclusion of equality indicators in the future.

Action: NL

Theme 2: Achieving Value and Impact

HG noted that this was not a 'normal' year, with the need to build COVID-19 recovery into the forecast. He confirmed that the aim was to ensure the appropriate profiling and prioritisation of budget allocation and spend, drawing attention to the large capital programme this year, linked to replacement digital systems in support of screening.

Theme 3 Organisational Quality and Access to High Quality Services

MK considered this theme in two segments:

3(a) Organisational quality focused on screening services for breast, bowel and diabetic eye screening. MK noted that the position was disappointing for a number of reasons including: unplanned absences due to sickness coinciding with

planned peak summer leave; sessional limitations for colonoscopies; and appropriate venues for eye screening. He noted the 100% eye screening position in August, the aim being to maintain this. MM queried what was meant by planned leave and if there was a need to review planning; MK confirmed it was the unplanned absences that had contributed more so than planned leave.

KE asked why August data had not been available for inclusion. MK undertook to examine any data lag and seek to resolve this where possible.

Action: MK

3(b) Access to High Quality Services RB-W noted the high number of incidents remaining open - these related mainly to screening. She confirmed the availability of additional resources to enable timely closure of these incidents. Compliance with complaints requirements had reached 100% and this was positive. RB-W drew attention to one nationally reportable incident relating to diabetic eye screening; she confirmed contact with all participants to offer appointments and monitoring.

Theme 4: Improved population health and wellbeing

MK advised of further development work this year to ensure an appropriate range of indicators. The report for this theme was, therefore, work in progress.

KE thanked HG for the refreshed approach which would allow the Board to focus in on key issues using data that was easily navigable.

The Board **considered** the report, **welcomed** the refreshed approach and **took assurance** from the discussions.

PHW 286.5/2021 Novel Coronavirus (COVID-19) General Update

MK provided the following update:

- The number of COVID-19 cases daily remained around 3000 cases, with a seven day rate of over 650 per 100k population.
- Case numbers were rising as the virus reached those age groups more susceptible.
- The impact of infection on those vaccinated was generally positive in that they were less likely to require hospital admission.
- Wales had been at Alert Level 0 since early August; social interaction had increased as a result. Data demonstrated that numbers for the 0-19 year old age group had increased sharply. This was linked to school attendance.
- The numbers attending hospital were not as high as previously but there had been a steady increase in the last 4-6 weeks.
- There had been a small rise in mortality indicators but this was variable from day to day and the numbers were small numbers compared with earlier in the pandemic.

- 85% of the population had now received both doses of the vaccine; booster vaccination programmes were now underway, as was vaccination for the under 16s.
- Vaccination teams were optimising opportunities to provide the booster vaccination along with the annual flu vaccination.
- The expansion of testing, ready for the winter months, to monitor both influenza and Respiratory Syncytial Virus (RSV) levels to ensure early identification and to support timely public health actions.
- The position regarding returning travellers into Wales would depend on the testing policy in place. Increased international travel could also risk introducing new variants and testing strategies were in place to seek to capture this.
- Public Health Wales continued to respond and provide advice to Welsh Government and other strategic partners.

The Board **took assurance** from the verbal update provided.

PHW 286.6/2021 Committees of the Board: Report from Committee Chairs

KE invited the Chairs of ACGC and QSIC to provide an update:

Audit and Corporate Governance Committee (ACGC)

DE referred Board members to his written report for a detailed update on the work of the ACGC. In addition, he noted that, reflecting the commitment of Public Health Wales to continuous improvement, the ACGC had sought the input and advice of internal audit to consider the Operational Plan and the Staff Wellbeing Report and had taken assurance from these processes.

Quality, Safety and Improvement Committee (QSIC)

KE also referred members to the report and the range of assurances that QSIC had taken as result of their work.

The Board **took assurance** from the reports provided.

PHW 287/2021 Items for Approval

PHW 287.1/2021 Minutes and Action Log from the Board Meeting (meeting date)

The Board **noted** the Action Log and the updates included for the meeting.

PHW 287.2/2021 Strategic Risk Update

In introducing this agenda item, KE noted all the work to date to identify the new strategic risks, for which the descriptors had been agreed by the Board in June 2021, and how Public Health Wales intended to manage and mitigate these.

Strategic Risks

RB-W reminded the Board of its agreement to the risk structure approach, recognising that risk was a dynamic concept and, in working through governance processes, may need adjustment. She directed members to the five new strategic risks, along with their controls and mitigating actions and noted also the changes made to the style and format of risk capture.

KE thanked RB-W and sought comments and questions:

- MM welcomed the approach and considered that the changed approach represented further improvement and progress in the identification and presentation of strategic risk. He proposed an adjustment to the format, to indicate the direction of travel of the risk – whether the risk was becoming greater over time or improving.
- KE sought clarity on the discussions held by executives leading to the proposal to move Risk 2 to the Corporate Risk Register. RB-W summarised these discussions and gave assurance that this risk would be actively monitored and could be returned to the Strategic Risk Register should Board decide this was warranted.

Following discussions the Board agreed that Risk 2 was now more appropriately located within the Corporate Risk Register but should remain under active consideration. Members noted that Risk 4 was confidential in nature and subject to consideration in private Board session.

Action: RB-W

Corporate Risk Register

RB-W summarised the work undertaken to refresh and review the Corporate Risk Register, with the transfer of some risks to Departmental Risk Registers where appropriate. RB-W confirmed this would be an ongoing process with regular review of the Corporate Risk Register to reflect its relationship with both Departmental and Strategic Risks. She asked the Board to consider and approve changes made to the Corporate Risk Register.

DE asked about the level of engagement with the wider Public Health Wales workforce regarding their view and perspective on risks. RB-W confirmed that each divisional lead should ensure full staff engagement in the risk identification and mitigation process; this enabled the reflection in practice of the principle that risk was 'everybody's business'.

MM welcomed the work undertaken. He queried the degree of risk attached to preparedness for a Public Inquiry. HB confirmed that the basis of the current assessment reflected lack of detail or clarity at this point around how the Inquiry process would operate, rather than a lack of preparedness; although there was a need to confirm future internal resourcing requirements.

The Board **considered** the proposed Strategic Risks and mitigation actions. The Board **approved** the proposal to transfer risk 2 to the Corporate Risk Register; and **approved** risks 1, 3, 4 and 5 as Strategic Risks with risk 4 subject to consideration in private session.

PHW 287.3/2021 Report: Tuberculosis Outbreak (Llwynhendy)

MK provided an update on the outbreak of Tuberculosis (TB) centred on Llwynhendy, Carmarthenshire and the commissioning, jointly with Hywel Dda University Health Board (HDUHB), of an external review of the management of the outbreak. He confirmed the external review process followed on from a Public Health Wales review in 2019; work had been subject to a temporary pause due to the COVID-19 pandemic. MK asked for Board support for the Terms of Reference which set out the detailed requirements for the review process.

SG proposed that, instead of national best practice, the Terms of Reference should refer to international best practice. MK agreed that this would be helpful and agreed to amend the Terms of Reference.

Action: MK

The Board **noted** the progress in establishing the external review and **took assurance** from this. The Board also **approved** the Terms of Reference, subject to the amendment to reflect international best practice.

PHW 288/2021 Items for Noting

PHW 288.1/2021 Improvement Cymru Strategy

The Strategy was **noted**.

PHW 289/2021 Date of Next Formal Meeting of the Board

The next scheduled meeting was 25th November 2021.

PHW 290/2021 Close of Public Meeting

The meeting closed at 12.25pm.