

Title of Meeting	Extraordinary Meeting of the Public Health Agency Board
Date	9 July 2020 at 3.00pm
Venue	Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast

Present

- Mr [NR] - Chair
- Mrs Olive MacLeod - Interim Chief Executive
- Mr Edmond McClean - Interim Deputy Chief Executive / Director of Operations
- Mrs [NR] - Assistant Director of Nursing (*on behalf of Mr Morton*)
- Professor Hugo van Woerden - Director of Public Health (*via video link*)
- Alderman [NR] - Non-Executive Director (*via video link*)
- Mr [NR] - Non-Executive Director (*via video link*)
- Ms [NR] - Non-Executive Director
- Alderman [NR] - Non-Executive Director (*via video link*)
- Professor [NR] - Non-Executive Director
- Mr [NR] - Non-Executive Director (*via video link*)

In Attendance

- Dr Aideen Keaney - Director of Quality Improvement
- Mr Paul Cummings - Director of Finance, HSCB
- Ms Marie Roulston - Director of Social Care and Children, HSCB
- Mr [Name Redacted] - Secretariat

Apologies

- Mr Rodney Morton - Director of Nursing and Allied Health Professionals

1 Item 1 – Welcome and Apologies

- 1.1 The Chair welcomed everyone to the meeting. Apologies were noted from Mr Rodney Morton.

2 Item 2 – Update on Review of Epidemiology

- 2.1 The Interim Chief Executive said that following concerns she had about PHA’s capacity to deal with the myriad of information requests and demands coming from the Department, she commissioned a rapid review to look at current resources and capacity. She added that following some interim feedback from the reviewer Mr Bradley, she and the Chair thought it would be useful to share these initial findings with the Board as a matter of urgency.

- 2.2 Mr Bradley gave members an overview of his background and advised that as part of his rapid review he had studied a range of documentation, and had spoken to staff in the Department of Health and BSO. He noted that many of the PHA staff are tired and that this situation is not sustainable, and that if they take leave it will be difficult for them to pick up at the same level on their return. In terms of structure, he said that there are a lot of staff working in similar areas which increases the risk of duplication. He said that this is understandable given the complexity of dealing with this pandemic. He felt that the Department was more involved in the management of the pandemic that he would have envisaged and he suggested that this due to a lack of confidence.
- 2.3 Mr Bradley advised that he had seen 2 reports prepared internally describing some work that the PHA has been doing during this pandemic, but that PHA staff feel that they are being micro-managed by the Department and that the Department is taking away key PHA staff creating more pressure on those left behind. He added that the staff in PHA feel they are perceived negatively by the Department so they need to be supported and be involved in how PHA shapes itself going forward.
- 2.4 Mr Bradley noted that PHA had a high level of confidence in how it has handled the situation relating to outbreaks in care homes, but he asked whether this would match the perception of the Department, of care homes, of care home managers and of families of residents. He said that there is lot of pressure on officials at the Department.
- 2.5 Mr Bradley said that there is a high level of confidence in the track and trace system, but he noted that if the information management is not right then there is the potential that it is negatively perceived. From the information available from Professor Ian Young's modelling group, he said that PHA need to anticipate what information the Minister will want, the Chief Medical Officer will want, or the PHA Board will want. He said that there is a lot of staff involved in looking at information, but not there is not one single individual who is leading this work and so there needs to be an appropriate structure put in place.
- 2.6 Mr Bradley reiterated that PHA needs to take more control over the parts it can control, and to manage them and shape them. So instead of responding to demands, he said it can control the ask. He explained that PHA can support the Department with the information which it needs and how best PHA can obtain that information for the Department.
- 2.7 Mr Bradley observed that PHA does not have control over the requests for information it receives from the Department. He said that these requests can come in from a range of people in the Department. He added that there is potential for inconsistency in the information being provided. He added that if the PHA is being asked to undertake nugatory work it should speak up. He said that if PHA can manage the expectation it can also manage the ask, but there is a need for a central point for all of these requests and that PHA needs to get its structure organised and that the PHA Board should have oversight of this process. He added that in the event of a cluster outbreak, PHA should be

- providing the information that the Department actually needs instead of what the Department requests.
- 2.8 Mr Bradley noted that within epidemiology there are up to about 20 different projects taking place, but he questioned if they are all doing the right thing as they are undertaken by many different people. He said that there is a need for PHA to control what its staff are doing as well as managing the relationship with the Department.
- 2.9 Mr Bradley suggested that there should be a central office to manage the requests coming in with an identified resource overseeing this. He noted that this stage of the pandemic may be the best opportunity to review the situation. He said that PHA needed to place itself in the position of the Minister and consider why certain information is being requested. He added that when that information is submitted to the Minister, it should be in a format that is easy to understand. The Chair asked how Department staff could be questioned about the information they are seeking. Mr Bradley said that PHA should clarify why information is being requested, but then explain what information PHA can provide to help. Mr Clayton suggested that the PHA is being used as a repository of information.
- 2.10 Professor **NR** asked if the Department has a similar view of any other HSC organisations. Mr Bradley said that all PHA can do is to take control of the parts it has control of in order to put itself in the driving seat, and so support its staff. Mr Bradley said that that PHA should maintain its focus about doing the work it can do to the best of its ability. He said that over the next two months there will be many questions asked about nursing homes and track and trace.
- 2.11 Mr **NR** sought clarity as to what elements within the Department there is a perception that PHA is not doing a good job. He suggested that perhaps officials in the Department are coming under pressure and because of that are shifting the burden on to the PHA. Mr Bradley said that he would be surprised if PHA officials have not had challenging communications from the Department. He suggested that the Board needs to look at what resources the PHA has and how these are being used.
- 2.12 The Interim Chief Executive asked Mr Bradley what his recommendations are following the review he has carried out to date. Mr Bradley reiterated that the PHA needs a dedicated resource to handle all of the queries coming from the Department and that this individual can deal confidently with the Departmental officials when handling these queries.
- 2.13 Mr McClean said that PHA is using information in a generic way, but it is the scale which needs to be looked at. In terms of the relationship between the Department and the PHA, he felt that there were issues before the onset of COVID-19. Mr Bradley said that he is highlighting two issues, the first of which is that PHA staff who have the skillset to do the work that is required, but it needs to be managed, and secondly there is a need to manage the process for Assembly Questions (AQs) and Press Office queries and to have people in PHA who can confidently deal with Department officials regarding these.

- 2.14 Alderman **NR** said that he would not agree with the perception that the PHA is not performing well. He noted that PHA has dealt well with previously public health crises, but he appreciated that staff are under pressure. He added that while he felt PHA has done well in handling the crisis, it needs to improve its communication so that all staff are aware of the work that is being done and are aware of the challenges facing senior colleagues.
- 2.15 Mr **NR** noted that while he appreciated what was being said at the meeting, he felt that the PHA could do very little about the demands and expectations of the Department. However, he agreed that there is a need for PHA to have control of the messages that it sends out, and also to look at the mix of skills and resources at its disposal.
- 2.16 The Chair said that he was not surprised by the key messages coming out of this review in terms of resources, but he was disturbed by the Department's view of the PHA. He said that PHA has to live with that, but it can ensure that it maintains as positive a relationship as possible with its Sponsor Branch.
- 2.17 Ms **NR** said that what was being discussed will be useful in the context of a "lesson learnt" piece, but she asked about the extent to which the Executive Directors were involved in the development of the terms of review and whether they have discussed the initial findings. The Interim Chief Executive explained that this review was carried out because of Department of Health demands in terms of being able to produce epidemiological information at a fast rate. She explained that she felt personally responsible for the situation and for being able to advise the Minister. She added that following a conversation with Professor van Woerden, they agreed that there was a need to address these issues but as she did not know what exactly PHA needed, she felt that the best course of action would be to have a short review completed. She said that when it came to dealing with epidemiological queries, staff were being placed under immense pressure. She acknowledged that under normal circumstances it would have been best practice to have discussed this with other Executive Directors but this review needed to be completed as a matter of great urgency.
- 2.18 Ms **NR** noted that recommendations are being made relating to three areas and she sought clarity that this was the first occasion in which Executive and Non-Executive Directors were hearing about the recommendations. The Interim Chief Executive said that she felt that all Directors needed to hear these initial findings as she appreciated that staff are currently overstretched and overworked. Mr **NR** asked if this review was solely focusing on epidemiology. Mr Bradley said that he was also looking at information across the organisation.
- 2.19 Alderman **NR** asked if the Executive Directors were fully aware of the review before it was commissioned. The Interim Chief Executive said that it was not a collective decision and pointed out that demands on the PHA from the Department have been increasing. Therefore she felt that there was a need to undertake this review, and that it was a decision that she made.

- 2.20 Ms **NR** said that she was struggling to understand the process by which the review was commissioned and how the terms of reference were developed. She asked the Interim Chief Executive for her thoughts on the impact of this review across the organisation. The Interim Chief Executive reiterated that she has been informed by the Department that it is frustrated at PHA's pace in compiling the information that it requires. She added that she did not want to see the PHA being placed under special measure. The Interim Chief Executive said that the commissioning of the review was her call.
- 2.21 Mr Bradley advised that to date he has spoken to Professor van Woerden as the epidemiology aspects falls under his directorship and Mr McClean's, but he has not yet had the opportunity to speak to Mr Morton.
- 2.22 Professor **NR** expressed concern about the use of the term "special measure" and said there needs to be a further unpicking of the key issues.
- 2.23 Mr Bradley said that it is not only about getting people together, but the right people together. He added that it should be possible to get someone to come in to provide a brief on how to respond to questions. He said that the current approach is too dispersed, and that position is unsustainable as it is difficult to know if the right response is being provided. Mr McClean asked whether these individuals who are being proposed to be brought in are care professionals or epidemiologists. He added that while he could understand the issues from an epidemiological perspective, he did not feel that the creation of a Chief Executive's office will help act as an effective buffer. Mr Bradley suggested that if such an office were in place it could act as a central point and take responsibility for managing all information requests.
- 2.24 Mr **NR** noted that PHA previously published statistical bulletins and information on COVID-19, but that this responsibility then passed to the Department. He asked whether the demands have evolved or changed and if this is the case, why there has been no discussion on this.
- 2.25 Mrs Roulston said that she understood the issues relating to epidemiology and she asked if the point being made is that PHA has the staff, but the issue is how they are structured so that different people from different departments should be brought together. Mr Bradley said that within epidemiology, there are people with the right skillset, but they are involved in different types of work. So it is not that more people are needed, he said it is about having better oversight of the work to be able to function more effectively.
- 2.26 Professor van Woerden said that he broadly agreed with the thrust of Mr Bradley's review and acknowledged that PHA could do better. He noted that he took up post in PHA at the beginning of the COVID-19 pandemic and he did not feel that there were enough analytical skills in the organisation. At the outset, he advised that the Permanent Secretary was seeking information on the number of deaths on a daily basis, but Northern Ireland did not have the infrastructure to deal with getting this information, so the demands on PHA were over and above anything the organisation had to deal with previously. He

said that he proposed that the epidemiology team reported directly to him, but he was cognisant there were health intelligence staff within the Director of Operations' team. He advised that he had compiled a short paper with a proposal and had also put together a job description for an Assistant Director in Epidemiology which went to the PHA's Scrutiny Committee, but it was not approved as there needed to be discussion with Mr Stephen Wilson, the Assistant Director of Communication and Knowledge Management. He said that he and Mr Wilson had a conversation and felt that there was no overlap. He added that it would be his personal view that the appointment of an Assistant Director would be a very positive step.

- 2.27 Professor van Woerden agreed with the Interim Chief Executive's assessment that the demands on the organisation have been increasing, but he believes that Northern Ireland has dealt with the pandemic better than other parts of the UK. He commended the work undertaken by Mr Morton and Mrs Roulston in relation to care homes. He felt that the requests which are coming into the organisation need to be dealt with in a tighter way.
- 2.28 Alderman **NR** said that while he understood that staff were tired, it would have been better if the Executive Directors had had an opportunity to consider these findings first, but he understood why the everything was done so quickly.
- 2.29 Dr Keaney suggested setting up a pilot team to focus on epidemiology. She said that there is no need for a complex structure and that from a QI perspective, the first consideration is always about simplifying. She added that there should be a conversation with the Department about its views so as to get to the root of the matter. She noted that she herself is unclear as to some of the functions with the different departments within PHA. She said that during this pandemic the PHA has been doing a lot of work, but now it is time to review the learning and if there is a confidence issue then clarity should be sought about the issues. Mr **NR** advised that work has commenced on looking at the learning and that the Knowledge Management cell which was established has been undertaking survey across 52 teams within HSCB, PHA and BSO. She said that this pandemic has forced teams to work differently and that it would be important to feed that into this discussion. She added that under the 10,000 Voices staff stories, there could be useful information that could be pulled together.
- 2.30 Professor **NR** said that PHA needs to take stock and learn. The Interim Chief Executive said that PHA needs to be able to deal with COVID-19, but also to respond to the information demands. She noted that never before in public health has there been such demand. Professor **NR** asked if the staff are split among different teams. The Interim Chief Executive said that there are pockets of staff undertaking different work. She said that the question from the Department is whether PHA needs additional resource and in particular, an individual at a senior level who can deal with Department information requests. Professor Rooney suggested that perhaps one new person would not be sufficient.
- 2.31 Mr **NR** noted that for all of the demands being placed on the PHA by the

Minister and the Permanent Secretary, PHA's remit is to serve the people of Northern Ireland. He said that while there is a process issue here, PHA needs to take advantage of the current lull in the pandemic and deal with the issues. The Chair said that it must be borne in mind that it will be impossible for staff to return to work at the levels at which they have worked previously.

- 2.32 Mr McClean said that there are clearly areas in PHA which are under-resourced. He added that has such a wide remit, but that if there is a need to develop areas such as intelligence and information by using statisticians from NISRA, he would support that approach. Mr Bradley said that PHA should look at how it will get through the next couple of months. He said that there are staff who are analysts across different parts of the organisation and it is about making best use of those staff. He felt that PHA has been overwhelmed, but in order to avoid a similar experience in the future, it needs to take control and manage the expectations.
- 2.33 Mr **NR** said that action needs to be agreed and a permanent solution put in place. He noted the discussion around the need for additional capacity. He felt that the key issue is that PHA's information should be accurate and reliable. Mr Bradley said that PHA needs to look at the number of staff who are involved in the information function, but Mr Clayton said that his perception was that the issue is why there is a lack of confidence. The Interim Chief Executive said that this needs to be addressed. Mr Bradley said that he had spoken to staff who feel that they are undermined and that there is a need for additional resources and that these staff need to be supported, the management and communication must be got right. Mr McClean agreed that staff perception is an issue. Mr **NR** said that the staff need to be defended and be shown that they are valued.
- 2.34 Ms **NR** said that the key issue now is the process going forward. She said as this review will have implications across the whole organisation, the Executive Team needs to work together and come back with a proposal. She added that PHA exists to meet the needs of the population and that if there is a second wave of COVID then the Executive Directors need to be working together as a unit.
- 2.35 Professor van Woerden advised that three posts have been advertised and PHA is exploring seconding staff from NISRA. He added that the Chief Medical Officer has sent an e-mail detailing the six areas of focus in terms of preparation for the second wave, and that a new Programme Board is being set up to take this work forward.
- 2.36 The Chair said that in his view the Interim Chief Executive needs the additional support. Professor Rooney asked whether the staff who were spoken to as part of the review had any suggestions. Mr Bradley advised that the staff feel like they were not being communicated with and their solution was to bring in more resources for their particular area. He added that from his initial work, he noted that, in his opinion, PHA does not have an analytics or information function which consists of staff working together, and that the staff are focused solely on their own team. Going forward, he suggested that PHA needs to

consider whether the staff that it has in epidemiology, who are experts in their field, are spending their time appropriately on that type of work and not other work e.g. line management.

- 2.37 Alderman **NR** agreed that the Executive Directors need to discuss this and come back with an agreed position. Professor **NR** also agreed with this but added that it is encouraging that PHA is being asked to consider putting together a business case for additional resources. She added that there is an issue in Northern Ireland generally about being able to get good information.
- 2.38 The Chair said that PHA needs to act and to act quickly. He said that there is a need to differentiate between what resources are required now and the overall organisational development strategy.
- 2.39 The Chair thanked members for their participation in the meeting.

3 Item 3 – Any Other Business

- 3.1 There was no other business.

4 Item 4 – Details of Next Meeting

Thursday 20 August 2020 at 1:30pm

Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast, BT2 8BS

Signed by Chair:

Date: