

<b>Title of Meeting</b>	59 <sup>th</sup> Confidential Meeting of the Public Health Agency Board
<b>Date</b>	17 September 2020 at 3.15pm
<b>Venue</b>	Fifth Floor Meeting Room, 12/22 Linenhall Street

**Present**

Mr Joseph Stewart	- Non-Executive Director ( <i>Chair</i> )
Mrs Olive MacLeod	- Interim Chief Executive
Mr Edmond McClean	- Interim Deputy Chief Executive / Director of Operations
Mr Rodney Morton	- Director of Nursing and Allied Health Professionals
Professor Hugo van Woerden	- Director of Public Health ( <i>via video link</i> )
Alderman William Ashe	- Non-Executive Director
Mr John-Patrick Clayton	- Non-Executive Director ( <i>via video link</i> )
Ms Deepa Mann-Kler	- Non-Executive Director
Alderman Paul Porter	- Non-Executive Director
Professor Nichola Rooney	- Non-Executive Director

**In Attendance**

Mr Paul Cummings	- Director of Finance, HSCB
Dr Aideen Keaney	- Director of Quality Improvement ( <i>via video link</i> )
Ms Marie Roulston	- Director of Social Care and Children, HSCB ( <i>via video link</i> )
Mr <span style="border: 1px dashed black; padding: 0 5px;">Name Redacted</span>	- Secretariat

**Apologies**

Mr <span style="border: 1px dashed black; padding: 0 5px;">Name Redacted</span>	- Chair
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**C23/20 Item 1 – Welcome and Apologies**

C23/20.1	The Chair welcomed everyone to the meeting. Apologies were noted from <span style="border: 1px dashed black; padding: 0 5px;">Name Redacted</span>
C23/20.2	The Chair proposed that Item 7 be carried out in advance of Items 5 and 6 as the Interim Chief Executive had to leave the meeting at 3.30pm.

**C24/20 Item 2 – Declaration of Interests**

C24/20.1	The Chair asked if anyone had interests to declare relevant to any
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items on the agenda. No interests were declared.

**C25/20 Item 3 – Minutes of Previous Meeting held on 20 August 2020**

- C25/20.1 The minutes of the meeting held on 20 August 2020 were approved as an accurate record of that meeting, subject to an amendment in paragraph C20/20.4.

**C26/20 Item 4 – Matters Arising**

*Data Breach*

- C26/20.1 Mr McClean advised that the data breach issue has been resolved to the satisfaction of the Information Commissioner's Office (ICO). The Chair still remained concerned that this was a PHA issue given that the report was published by the Department of Health. Mr McClean assured members that the fact that the Department of Health was the publisher had been made known to the ICO.

**C27/20 Item 7 – Workforce Issues**

- C27/20.1 The Interim Chief Executive advised that there will be an "expression of interest" exercise conducted in the short term to fill Mr McClean's role following his retirement. With regard to Mr Cummings she said that she would need to speak to the new Chief Executive regarding this. She noted that there is a suggestion that this role may move to the Department of Health which would be an issue for PHA so the replacement for Mr McClean's post may need to be an individual with a finance background.
- C27/20.2 The Interim Chief Executive reported that the Director of Public Health, Professor Hugo van Woerden, will be retiring at the end of December, and that his post has been offered to the candidate who was on the waiting list following the last recruitment exercise. She said that to date she has not yet received a response from this individual, but she had given a deadline of Friday 21 September. She considered that the scope of the post of Director of Public Health was so wide that the appointment of a Deputy Director was required.
- C27/20.3 The Interim Chief Executive said that Mr Brendan Bonner had retired from his role as Assistant Director of Health and Social Wellbeing Improvement at the end of July, and that an "expression of interest" exercise will also be conducted for that role. She added that 3 of the 3 Head of Health Improvement roles in that directorate will also now be permanently recruited as PHA has obtained permission to commence this. She said that stability is required in that team as many staff are in temporary acting up roles.
- C27/20.4 The Interim Chief Executive advised that PHA has submitted a bid for additional resources to strengthen areas such as information

	management and epidemiology. She advised that four new staff have been recruited to support the epidemiological function.
C27/20.5	<p>The Chair advised that the Board will be bringing forward wording for a new risk to be added to the PHA Corporate Risk Register with respect to the gaps in staff at senior level. He added that there will be a range of mitigations but the risk will be rated as "high". Professor Rooney agreed that there is a risk, both in terms of a gap at senior level, and in having staff in acting up roles.</p> <p><i>At this point the Interim Chief Executive left the meeting.</i></p>
<b>C28/20</b>	<b>Item 5 - Muckamore Abbey Hospital Leadership and Governance Review Report</b>
C28/20.1	Ms Roulston gave members an overview of the Report. She began by explaining that the review team was independent of both HSCB and PHA and that she and Mrs Briege Quinn had commissioned the review at the request of the Department. She advised that the terms of reference were based on the "Way to Go" report.
C28/20.2	Ms Roulston reported that the review team carried out a range of interviews but COVID-19 had placed restrictions in terms of being able to speak to family members. She outlined the key findings, saying that vulnerable people were failed and that opportunities were missed. She added that there had been delays in implementing CCTV and said how the review came about following a complaint made by the father of one of the patients.
C28/20.3	Ms Roulston advised that the report made 12 recommendations, three of which relate to HSCB/PHA. She said that HSCB/PHA should ensure that any breaches of requirements are reported to the Board of the Belfast Trust. She said that HSCB must ensure that where there are areas of non-compliance in relation to the Delegated Statutory Function report, these should be escalated to the Belfast Trust as soon as possible, and finally, the PHA should develop specific indicators for learning disability inpatient services. She informed members that Mrs Quinn is already leading on this work.
C28/20.4	Ms Roulston said that she and Mr Sean Holland had met with the families to share the findings of the Report. She noted that there will now be a public inquiry. In terms of the recommendations, she reported that HSCB and the Department are already looking at the Delegated Statutory Function reporting. She said that members may be aware that Adult Safeguarding legislation has now been passed. She also reported that a review of the Serious Adverse Incident (SAI) process, which had been paused due to COVID-19, has now recommenced.
C28/20.5	Mr Clayton declared an interest in that some of the staff involved may be members of his trade union organisation. He commented that it will

be important that the Board is updated regularly on the work that Mrs Quinn is doing. He added that the PHA should also ensure that its internal safeguarding policies are in place and lined up with those of any external provides that it works with. Ms Roulston advised that an “Adult Safeguarding Transformation Board” which will be multi-agency and multi-disciplinary, had been established, and that its first meeting is due to be held in October. Mr Morton noted that the Permanent Secretary has written to Chairs about the role of Boards in ensuring that they are provide the relevant scrutiny and making it clear that the learning from this Report should be applied across the whole HSC system. Ms Roulston agreed to provide a copy of this letter for members **[Action – Ms Roulston]**.

- C28/20.6 Ms Mann-Kler noted that the Report had outlined how adequate arrangements were in place, but these had not been implemented. She noted how there was also commentary around leadership and she felt that there were similar issues for PHA in terms of continuity. She added that the Belfast Trust appeared to be more focused on acute care than care at Muckamore, and she asked whether COVID-19 has blindsided PHA in terms of altering focus and if there are any areas where there could be unknown issues. She said that she welcomed clarity on SAls and what PHA’s responsibility is in terms of oversight of SAls and who enforces the trigger point of what is an SAI. She sought clarity on the timelines for following up and going forward, suggested that SAls should be on the PHA Board agenda. She also felt that this issue should be discussed in open session to reinforce PHA’s commitment to openness and transparency. The Chair noted Ms Mann-Kler’s comment but pointed out that it may have been difficult to predict the content or sensitivity of the report at the time of creating the meeting agenda.
- C28/20.7 Mr Cummings explained that the HSCB leads the SAI process and that each week, the senior management team of HSCB received a report on SAls and the learning of SAls is reported to the HSCB Board. The Chair said there should be clarity in terms of what organisation is responsible for. Mr Morton said that from a safety and quality perspective, there are discussions ongoing about a safety and quality framework and that when HSCB closes, the role of PHA may change in this regard. He added that there has already been an extensive review of the SAI process and that RQIA has carried out a review which may lead to further changes and greater clarification in terms of responsibilities. Ms Mann-Kler asked which organisation would be responsible for an SAI occurring today, and Mr Morton advised that it would be HSCB.
- C28/20.8 Professor van Woerden commented that he found the SAI and Early Alert system complex, and that he and Mr Morton have a role where they are working for both PHA and HSCB. He said that there are challenges in terms of the capacity to be able to undertake SAI investigations and suggested that additional resource may need to be

- brought in to support that. Professor Rooney commented that she has attended SAI meetings and it is not clear between HSCB and PHA in terms of where responsibilities lie. Mr Morton explained that between HSCB and PHA there are DROs (Designated Responsible Officers) for the SAI process and that they work together depending on whether there is a clinical context or a care context. He advised that there is a Committee that looks at SAIs and he suggested that it may be useful to bring a paper for the Board that outlines the current arrangements, albeit that they may change. The Chair felt that this is what the Non-Executive Directors are seeking.
- C28/20.9 Mr Cummings said that he disagreed that Non-Executive Directors are not playing a role in terms of SAIs. He said that the Governance Committee in HSCB takes its role very seriously in terms of reviewing SAIs, and that HSCB could not fulfil its role without the support of PHA as it does not have specialist doctors or nurses. Ms Roulston agreed that it would be useful to bring a paper to the PHA Board on this.
- C28/20.10 Ms Mann-Kler asked about the timelines for the development of the care indicators. Mr Morton agreed to report back on this **[Action – Mr Morton]**. He advised that there is a Muckamore group set up which is chaired by Professor Charlotte McArdle and Mr Sean Holland which will be monitoring the implementation of the recommendations as part of its action plan. Dr Keaney said that one of the reasons HSCQI was established was to look at learning from SAIs. She commented that when she was a DRO she found the process unclear. The Chair said that a paper on this should be brought to the public session of the next meeting **[Action – Executive Directors]**.
- C28/20.11 The Board noted the update on the Muckamore Abbey Hospital Leadership and Governance Review Report
- At this point Ms Roulston left the meeting.*
- C28/20.12 The Chair asked about the situation at Craigavon Area Hospital. Professor van Woerden advised that there situation is serious with four deaths having now occurred. He said that the microbiology and infection control teams in the hospital are leading a review and they would have data on patient flows and staff movement and are best placed to investigate. He said that PHA will have an advisory role as the Chief Medical Officer had asked PHA to be involved. He added that there is a public health consultant who is spending a significant amount of time on this. He clarified that the formal accountability in this matter lies with the Southern Trust Chief Executive up to the Permanent Secretary. Mr Morton added that the Trust will carry out an SAI and that a PHA officer has been nominated as DRO.
- C28/20.13 Mr Morton advised members that he and Professor van Woerden are planning to hold a learning event on the back of the review to ensure that any lessons learnt are picked up early. The Chair noted that SAIs

were initially about learning, but are now more focused on being investigations. Mr Morton said that there is now a commitment to look at getting advocacy support for families to help clarify and manage their expectations regarding the SAI process, but does not seek in any way to replace any legal process.

**C29/20 Item 6 – Epidemiology / Bradley Report**

- C29/20.1 The Chair expressed concern on behalf of all of the Non-Executives about the accuracy of some of the content of this Report, and that a Report has been received and the Board needs to agree how it should be responded to.
- C29/20.2 Ms Mann-Kler referred to paragraph 9.4 of the Report and said that she felt strongly about the statement made regarding the PHA Board. She asked whether the Report has been circulated outside of PHA. She said that the statement in the Report at this section was based on the meeting which had taken place on 9 July and that the PHA Board should have been aware that this meeting was being used as a form of consultation. She added that the statement was misleading and a misrepresentation of the facts. The Chair added that the Report suggested that the PHA Board was aware of the reasons why the Department took the responsibility of publishing daily death data from the PHA when this was not the case.
- C29/20.3 Mr Clayton said that his overarching concern is that from the Report it is not clear what the author was asked to review as the terms of reference are not included. He felt that a number of the recommendations are not based on evidence in the Report. He said that if the focus of the review was on epidemiology, it should have outlined what PHA has, what PHA needs and how PHA can reach that position. He felt that the references to the Department taking control of specific matters have been taken out of context and with no clear rationale as to why this happened. He said he found the report troubling. He added that in terms of the Agency Management Team (AMT) response, he noted that it was stated as being unanimous but added that it does not appear that all of the recommendations will be implemented, and some may be taken forward by other mechanisms.
- C29/20.4 Mr Morton said that AMT has not signed off on all of the recommendations. He said that there was a discussion, and some issues have yet to be agreed upon.
- C29/20.5 The Chair felt that the discussion could not be progressed further in the absence of the Interim Chief Executive. He asked what the outputs of the report were and how implementation could be assessed. Ms Mann-Kler asked how the Report links with the review of the PHA that the Chief Medical Officer has commissioned.
- C29/20.6 Mr McClean said that while the remit of the review and the process for carrying it out were not fully shaped by AMT, efforts have been to take

	<p>some of the findings that are related to PHA's COVID journey in relation to epidemiology and progress them. He said that some of the recommendations went beyond the remit of the review and are not well-founded. He said that recommendation 8 was inappropriate as these teams work in different ways. He felt that recommendation 6 was incorrect as the Business Continuity Plan is always kept under review and there is a separate process for reviewing the Joint Emergency Response Plan, and that the PHA element of that will be brought to the PHA Board for approval. In terms of the Chief Medical Officer's review, he said that some of the recommendations will be informed by it, when that review is complete.</p>
C29/20.7	<p>Mr Cummings said that his main concern about the Report was the neutrality of the author and he took great exception to some of the findings.</p>
C29/20.8	<p>Professor van Woerden said that there is no connection between this Report and the Chief Medical Officer's review. He said that this Report was to look at additional capacity in the area of data and he agreed it had exceeded its remit, whereas the review of PHA will look at PHA's needs going forward.</p>
C29/20.9	<p>Professor Rooney expressed concern at paragraph 5.3 which she said was clearly based on a judgement made at the meeting on 9 July and she wished to see this removed. She noted that this Report was written on the back of a suggestion of special measures being placed on PHA.</p>
C29/20.10	<p>Alderman Porter said that he was unhappy with the way the review was carried out, and he expressed concern that any future discussion will take place in the absence of two officers who have more experience and knowledge of PHA than anyone else. He asked how their feedback will be reported in. He also asked about the status of the Report and who it has been circulated to. The Chair advised that in the absence of any other vehicle for complaint he has considered making his own written response to it.</p>
C29/20.11	<p>Alderman Ashe asked if PHA has paid for this Report. Mr Cummings explained that the author was engaged through the HSC Leadership Centre so they will have been paid for their work.</p>
C29/20.12	<p>The Chair said that the Report should be brought back to the next meeting for further discussion. Professor Rooney asked it would be possible to request that the Report is not shared outside the PHA. Alderman Porter said would welcome feedback from Mr McClean and Mr Cummings on the Report.</p>

**C30/20** | **Item 8 – Any Other Business**

C30/20.1 | There was no other business.

**C31/20** | **Item 9 – Details of Next Meeting**

*To be confirmed.*

Signed by Chair:

Date: