

Unconfirmed Minutes of the Board Meeting on 25 January 2024
Held in 3.7, CQ2 and electronically via Microsoft Teams
Livestreamed on the Internet

Present:		
Jan Williams	(JW)	Chair
Huw George	(TC)	Acting Chief Executive
Sumina Azam	(SA)	National Director of Policy, and International Health, World Health Organisation Collaborating Centre
Iain Bell	(IB)	National Director for Public Health Knowledge and Research
Claire Birchall	(CB)	Interim Executive Director of Quality, Nursing and Allied Health Professionals
Diane Crone	(DC)	Non-Executive Director (University) and Chair of Quality, Safety and Improvement Committee
Kate Eden	(KE)	Non-Executive Director and Vice Chair
Nick Elliott	(NE)	Non-Executive Director (Data and Digital) and Chair of Audit and Corporate Governance Committee
Sian Griffiths	(SG)	Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee
Meng Khaw	(MK)	National Director Health Protection and Screening Services, Executive Medical Director
Neil Lewis	(NL)	Acting Deputy Chief Executive and Director of People and Organisational Development
Mohammed Mehmet	(MM)	Non-Executive Director (Local Authority) and Chair of the People and Organisational Development Committee
Tamsin Ramasut	(TR)	Non-Executive Director (Equality and Diversity)
Kate Young	(KY)	Non-Executive Director (Third Sector)
In Attendance:		
Liz Blayney	(LB)	Deputy Board Secretary and Board Governance Manager
Sarah Brewer	(SB)	Employee Engagement Manager (for Agenda item 5 and 6.2)
Marie Brousseau-Navarro	(MBN)	Deputy Commissioner and Director for Health, Future Generations Commission for Wales (for item 4)

Jordan Everitt	(JE)	Co-Chair of Ymlaen Staff Network (for item 5)
Jim McManus	(JM)	National Director of Health and Wellbeing
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Derek Walker	(DW)	Future Generations Commissioner for Wales (for item 4)
Gruff Weston	(GW)	Co-Chair of Ymlaen Staff Network (for item 5)
Apologies:		
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru
Tracey Cooper	(TC)	Chief Executive
Claire Sullivan	(CS)	Staff Side Representative
Angela Williams	(AW)	Deputy Director of Operations and Finance

The meeting commenced at 11:00

PHW 2024.01.25/1	Welcome and Apologies
<p>JW welcomed everyone to the meeting, extending a warm welcome to those observing the proceedings online. She noted that the Board was the Governing Body of the organisation, with specific responsibilities for: strategic direction-setting; building and sustaining strategic partnerships; setting strategic risk appetite and overseeing strategic risks; scrutinising in-year delivery against plans; maintaining good governance and setting organisational tone and culture.</p> <p>On tone and culture, the Board promoted a learning culture, one in which, if something did not go to plan, Public Health Wales apologised, set about putting things right and making improvements for the future. The Board wanted everyone to come to work and be their authentic, best selves, without fear of disadvantage or discrimination of any kind, including from any form of phobic behaviour. The Board found this unacceptable and JW encouraged anyone subject to such discrimination to use the processes available to call it out. She also asked anyone who saw/heard of any such discrimination to report it, as no-one should put up with any injustice. The Board also wanted staff to thrive and develop, reaching their full potential, with a real sense of belonging to the organisation.</p> <p>The Board conducted its business in line with a formal Board Etiquette; this referenced the reading of all papers before the meeting, optimising the time available for debate on the day. The Board also adhered to Public Health Wales' Values: Working Together, With Trust and Respect, to Make a Difference.</p>	

JW then summarised the items on the Agenda.

The Board **noted apologies** from Tracey Cooper, John Boulton, Claire Sullivan, and Angela Williams.

PHW 2024.01.25/2	Declarations of Interest
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JW sought Declarations of Interest other than those recorded already on the Declarations of Interest Register. There were none.

PHW 2024.01.25/3	Board Assurance Framework
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PHW 2024.01.25/3.1	Chief Executive's Report
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Introducing the Chief Executive's Report, HG drew attention to:

- The quarterly meetings of the UK Public Health Agencies; the meetings were constructive and drove collaborative discussions between the four nations with a clear commitment to work together on key issues.
- The mid-year Joint Executive Team (JET) meeting on 6 December, 2023, with the Executive Team of the Health and Social Services Group in Welsh Government. This constructive meeting had covered a range of key issues and HG extended his thanks to the staff who had helped prepare a set of comprehensive and informative papers to support discussions. Welsh Government was still to issue its written summary of the JET meeting.
- The recent letter from the Chief Executive of NHS Wales, confirming that Public Health Wales continued at the lowest possible level of escalation monitoring and would remain on routine monitoring arrangements for 2024/25.
- The COVID-19 Public Inquiry; HG noted TC was now fully focused on preparation for Module 2B of the Inquiry. He then invited PV to provide further detail:
 - Public Health Wales had Core Participant status for Module 2B; work was underway to provide a comprehensive and effective organisational response to the requests for evidence. PV expected the Inquiry Team to seek oral evidence from a number of Public Health Wales staff; all witnesses would have support throughout the process.
 - Module 4, initially scheduled for the summer of 2024, was now subject to deferment with no rescheduled date at this point.
 - PV also provided an update on the planned Senedd Committee session on COVID-19. This would take place following the issue of the Public Inquiry Module 1 Report later in 2024 and would focus on any gaps in the Inquiry's work.

- The recent visit by Efa Gruffudd Jones, the Welsh Language Commissioner. KE provided an update on the visit and positive discussions; she noted the opportunity to share good practice across the organisation, further embedding and nurturing the Welsh language.
- The visit of the newly appointed Anti-Slavery Commissioner for England and Wales.

JW thanked KE for leading on the visit and discussions, noting this as an example of the way Public Health Wales sought to engage effectively with all Commissioners.

JW also congratulated TC on her appointment to the Executive Board of the International Association of National Public Health Institutes (IANPHI).

The Board **noted** the Chief Executive’s Report and **took assurance** from the Report and the discussions at the Board meeting.

PHW 2024.01.25/3.2	Latest Public Health Overview
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Referring to the Public Health Rapid Overview Dashboard, IB drew attention to the following:

- On the *system ability to respond* the position remained reasonably consistent on referral pathways; the trend lines were reasonably consistent across health boards (HBs). Analysis by specialty demonstrated a reduction in trauma and orthopaedic and general surgery waiting times, but an increase in delays for other specialties, including ophthalmology; this level of granularity demonstrated the need for focused, speciality-based actions.
- The position regarding *all cause excess mortality* was at, or in some cases lower, than the five-year average.
- On *healthy behaviours*, IB referenced a reduction in smoking behaviours; this called for caution as the trend tended to be volatile. There were no changes in other health behaviour data.
- On the *wider determinants of health*, the cost-of-living crisis continued to affect people particularly in respect of rent, mortgage and energy bill levels. Levels of unemployment and inactivity remained generally unchanged.
- Chronic conditions monitoring, with a focus on diabetes, continued and helped to inform all Wales diabetes prevention and the clinical management of diabetes at health board level. IB went on to summarise discussions at the NHS Wales Leadership Board and the proposals under development, including a national focus on the bundle of eight indicators.

JW then invited JM to comment on his and Zoe Wallace' attendance at the Senedd Health and Social Care Committee (HSCC) on 24 January. JM noted that:

- Their attendance at the Committee centred on briefing HSCC Members as part of their Inquiry into *Supporting people with chronic conditions*; this followed on from the supply of a detailed briefing paper in advance of the session.
- Data indicated that the number of people with chronic conditions in need of support was increasing to the point that, without action, the level of health and social care support required could become unsustainable within the next decade.
- They had set out two key priorities for the HSCC (i) to provide optimum care to those people living with a chronic condition, and (ii) to drive a strategic shift towards prevention.
- Both JW and JM noted the strong engagement of the HSCC members and the commitment to action.
- JW also noted the work underway to engage with health boards, with a joint Board session with Cwm Taf Morgannwg University Health Board planned for April.

JW then invited questions:

KE referred to the recent announcement of major job losses at Tata Steel in Port Talbot. Given the evidence base on the impacts of mass unemployment set out in the Public Health Wales Report *Mass Unemployment Events – Prevention and Response from a Public Health Perspective*, she asked about the support available for those experiencing job losses. IB confirmed that Swansea Bay University Health Board (UHB) had the information available on the impacts of mass unemployment events and Public Health Wales would continue to provide all available evidence to support the health board and its partners.

JW asked IB to circulate the Report referring to the evidence base on mass unemployment to all Board members.

Action: IB

JW invited MK to provide an update on the *Clostridium difficile* (C.diff) outbreak in Swansea Bay UHB. MK noted that:

- The Dashboard indicated that Swansea Bay UHB had reported high levels of C.diff for some time, with a rate of 68 cases per 1000 compared with a target rate of 25 per 1000.
- In its role as system supporters, the Healthcare Associated Infection, Antimicrobial Resistance and Prescribing Programme (HARP) team had engaged with the HB over a period of time, to assist and encourage focused action on infection prevention and control, including the embedding of effective governance processes to track and manage infection rates. Planned Genome sequencing would indicate whether there were C.diff clusters related to hospital-based spread.
- Any concerns regarding the management of HCAIs could be subject to Chief Executive Officer level escalation, should the level of concern call for that.
- The five-year Health Care Associated Infections Action Plan set out drivers for change and improvement across Wales; this strategic approach supplemented the focused support work underway with Swansea Bay UHB.

JW thanked MK for the helpful synopsis.

The Board **discussed** and **scrutinised** the Rapid Overview Dashboard Report and **took assurance** from the feedback and comments.

PHW 2024.01.25/3.3

**Integrated Performance Report (Month 9),
Finance Report and Strategic Risk Register**

Introducing the Integrated Performance Report, JW invited HG to provide a synopsis. HG drew attention to:

- The work undertaken, and discussed in detail at the last Board meeting, to reformat the report and include 'In Focus' sections. Work would continue for the remainder of 2023/24 to refine the report further, in time for 2024/25.
- The Table, on page 4 of the Report, provided a response to the issues raised in previous discussions. This provided the Board with assurance on the action taken against all feedback and comments. It included confirmation of engagement and involvement with external stakeholders, including Welsh Government.
- HG acknowledged the comments made towards the end of previous years in respect of the number of milestones scheduled for delivery in Quarter 4; he confirmed that 92% of all 2023/24 milestones were on track for delivery in year. Milestones would move into 2024/25 only appropriate and acceptable due to unforeseen factors. As in previous years, the organisation would deliver over 90%, a significant achievement given the work involved. HG

also gave an update on the % spend against the capital allocation, noting two areas of spend pencilled in against Quarter 4, the subject of late notification from Welsh government. In 2024/25 there would be a further focus on spearing the spend across the financial quarters.

HG then took the Board through the main sections of the report:

People and Governance

NL reviewed the 'In Focus' section on Appraisal and Development Reviews. He outlined the challenges and the improvement work underway/planned.

JW invited MM to comment; he confirmed that the People and Organisational Development Committee (PODCOM) actively sought to identify and respond to matters raised at Board level; the next PODCOM meeting would include a 'deep dive' against compliance and look at appraisal systems, both generally and those for specific professional groups. He and NL would report back at the next Board meeting.

Action: MM/NL

Financial Governance

- HG drew attention to the detailed financial position set out within the report and confirmed that the organisation was on track to achieve all targets and report a break-even position for the 2023/24 year end. HG went on to note that Welsh Government had yet to issue the 2024/25 allocation; he and the Finance Team were progressing with financial planning as far as was possible without the allocation letter.
- The monitoring of budgets and spending plans on a line-by-line basis continued, working with teams to ensure robust financial management.
- On capital spend, HG commented on the outcome of the bid for cyber security funding, and approval for the new DESW cameras.

HG then invited questions:

NE welcomed the confirmation of funding for replacement technical equipment and sought assurance this would happen in year. HG confirmed this was the position; he also recognised the significant pressure on the small procurement team and recognised their hard work and significant contribution in driving change.

On procurement, JW recognised the need, for commercially sensitive information, to consider procurement contracts in private Board sessions; she confirmed though that information on the final award could and would be shared in the public Board sessions. HG confirmed this information would be included within the Integrated Performance Report in early 2024/25, possibly as an addendum to the papers.

Information Governance

CB drew attention to the six reported data breaches; she confirmed that none required reporting to the Information Commissioner.

Clinical Governance

CB noted that incident monitoring remained robust, with system resilience; a number of incidents had proved difficult to resolve and this impacted adversely on timely incident closure. She confirmed that those incidents were moving towards resolution.

JW asked about the training available on use of the DATIX system. CB advised that this did not form part of mandatory training requirements, despite efforts to include it. Work continued to offer such training across the organisation and included targeting new starters. The introduction of a revised DATIX system in the Summer of 2024 would require an additional focus on training.

Integrated Medium Term Plan (IMTP)

HG noted the reference to the key IMTP issues earlier in the meeting; he then invited any questions:

NE welcomed the revised approach and format of the report; this would assist in 2024/25 planning of scrutiny processes.

MM welcomed the expected delivery of 92% of milestones and the assurance this provided. He reflected on the inter-relationship between the actions and milestones set out in the Plan and the Public Health Wales' strategic objectives; these required alignment. HG confirmed the intention to set the 2024/25 milestones in the broader context of the organisation's values and strategic objectives to ensure full alignment. JW noted that the March Board meeting would give the Board the opportunity to consider this point, during the debate on the 2024/27 IMTP.

Climate Change

HG drew attention to the breadth of work underway as part of the climate change strategic priority. JW confirmed that, from 2024/25, the Board would receive reports centred on Board level climate governance. She, KE and HG had met to consider what good Board level governance looked like and had concluded that the key indicators were already available. HG would incorporate this report in the IPR for the coming year.

Action: HG

Screening, Vaccinations and Immunisations, Health Care Associated Infections

MK drew attention to the two screening programmes yet to recover fully: Breast Test Wales and Diabetic Eye Screening Wales.

For Breast Test Wales the main issue lay in the south east of Wales where system issues were affecting timelines for women who had undergone a mammogram and required follow on symptomatic services. He confirmed the actions in place to address waiting times for both assessment and symptomatic treatment; this had led to a significantly improved position, with waits of over 36 months down from 70,000 to 5,323 and plans in place to secure further reductions. The Screening Team aimed to recover in south east Wales by Quarter 2 of 2024/25, with recovery in the rest of Wales before the end of this financial year.

On Diabetic Eye Screening, whilst activity was increasing, so was demand, with the consequent impact on the delivery trajectory. The use of TENOVUS mobile vans had contributed to the improved position; the Team aimed to recommission TENOVUS vans to support further progress in 2024/25.

JW joined KE in thanking MK, Sharon Hillier and the whole Screening Team for their remarkable work in recovering the BTW screening programme within the timelines set out.

On vaccinations, MK provided an update on two preventable diseases:

- The recent UKHSA notice regarding Measles primarily linked to an outbreak in the west Midlands region. He noted the highly transmissible nature of measles and the impact in communities where vaccination rates were low;

these were often in more deprived areas, and exacerbated underlying inequalities.

Vaccination rates for combined measles, mumps and rubella (MMR) were below the target of 95%, with the lowest vaccination rates within the most deprived communities. Public Health Wales continued to support health board vaccination services in providing strategic support and in targeting those communities most at risk.

- Low levels of uptake amongst pregnant women for the pertussis vaccination. Whilst there was a high rate of uptake for the 6 in 1 vaccination offered to children, the uptake amongst pregnant women was low, reducing from 70% to 60% for this group; vaccination offered increased immunity for newborns until they received their vaccinations at 8 weeks. Routine surveillance programmes had identified the increase in the number of whooping cough cases.

JW thanks MK for the update and extended the Board's thanks to Chris Johnson for leading on an informative and effective media campaign on measles.

On Healthcare Associated Infections (HAIs) MK referred to the earlier discussion; he also drew attention to the current tracking of various organisms as part of the Dashboard, with regular sharing of surveillance information with health boards to support local management.

The Board **considered** the financial position of Public Health Wales as of 31st December 2023, and **took assurance** from the discussions and actions.

PHW 2024.01.25/3.4

Committees of the Board: Report from Committee Chairs

Introducing this item, JW noted that Board Committees discharged significant role, enabling discussions at full Board level to focus on key strategic issues and risks. She then invited Committee chairs to highlight any issues that they wanted to bring to the attention of the full Board.

Knowledge Research and Information Committee (KRIC)

SG confirmed that work was progressing on the research, data and digital and academic partnership working agendas. In addition, KRIC had undertaken two 'deep dives', one on climate change and the second on addiction (specifically gambling and drug addiction).

Quality Safety and Improvement Committee (QSIC)

DC drew attention to work exploring the optimum means of reporting on screening programmes. A workshop had identified options and CB indicated that there was a preferred approach; this was subject to testing currently.

Neither the PODCOM nor the Audit and Corporate Governance Committee had met since the last Board meeting.

The Board **noted** the report and **took assurance** from the content and the updates provided at the meeting.

PHW 2024.01.25/3.5	Summary of Corporate Policies Annual Update
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Introducing the item, PV drew attention to:

- The data included in the Integrated Performance Report.
- The Corporate Policies paper: this set out the approach taken to reviewing and maintaining corporate policies; he noted that the Board should conduct an annual review of the approach.
- There were 150 policies across the organisation, some of which were all Wales policies and not subject to change at organisational level.
- Of the 150 policies: 103 were up to date and 47 were out of date; 15 of the latter were all Wales policies.
- Improvement work continued year on year; in 2022/3, 45% of the organisation's policies were in date; this had now increased to 69% with 63 policies reviewed in the past year.
- Maintaining and reviewing policies was a whole organisation issue.
- LB referred to the appendices and the breakdown provided on policies, together with the backlog management plan.

JW thanked PV and his team for their significant work in co-ordinating the policy review programme. Whilst the Board Business Unit had that role, ownership of the work to reduce the backlog and secure a sustainable rolling programme was vested in the Executive Team.

The Board considered the annual summary of corporate policies and **took assurance** on the prioritisation plan and the in-year progress to increase the number of policies in date.

PHW 2024.01.25/4	Future Generations Commissioner for Wales
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JW extended a warm welcome to Derek Walker, the Future Generations Commissioner for Wales and Marie Brousseau-Navarro, the Deputy Commissioner and Director for Health. She invited them to present to the Board, before a wider discussion.

Using a slide presentation, DW drew attention to:

- Earlier meetings with JW and TC which had helped to shape the *Cymru Can* Strategy; DW commented on the valuable and constructive engagement with Public Health Wales and the shared areas of interest and focus. This shared agenda included a drive to promote a strategic prevention agenda and a reduction in health inequalities.
- An engagement exercise had provided clear messages and themes for the Commission:
 - improving awareness of its role and functions and driving change;
 - offering practical support to organisations in applying the Future Generations Act;
 - recognising the significant financial challenges facing all sectors, risking a focus on immediate cost-based decisions rather than on driving a longer-term change;
 - limited progress against the Commission's 50 Indicators, indicating a need to focus more on delivery;
- *Cymru Can* set out the Commission's strategy for 2023 – 2030; it recognised the gap between ambition and implementation and DW urged a proactive approach towards implementing the Future Generations Act.
- The Strategy identified five 'missions':
 - Culture and the Welsh language;
 - Health and wellbeing;
 - A wellbeing economy;
 - Climate and nature;
 - Implementation and impact.
- There would be a bespoke approach to delivering on each mission, utilising the Commission's strengths; systematic issues would require a cross cutting approach. DW used the food agenda as an example of this, as it required a strategic approach to all aspects of food production, access and security. Food poverty was a significant issue in Wales.

DW then invited MBN to provide an update on health and wellbeing; she drew attention to:

- The need to set health and wellbeing outcomes within the social model for health, with a shift towards prevention that included access to sufficient resourcing and forward planning.
- Encouraging collaboration across health, social care and other relevant actors, seeking to ensure diverse inputs into strategy design and development.
- The strong relationship between the Commissioner's responsibilities and those of Public Health Wales; she recognised the ongoing collaboration and engagement between the two bodies;
- Health and social care related issues that formed the key issues raised during the engagement events.

JW thanked DW and MBN for their informative and inspiring presentation. She then invited comments:

MK reflected on the importance of Public Health Wales and the Commissioner's Office working in a complementary, rather than duplicatory way.

Acknowledging the synergy between *Cymru Can* objectives and those of Public Health Wales, JW invited SA to comment further.

SA reiterated the close working relationship between both organisations, with many years of collaboration; this had laid firm foundations from which to accelerate progress. She also welcomed the broader definition of health and wellbeing as one that Public Health Wales considered to be fundamental. The priorities set out in the 'missions' aligned well with those of Public Health Wales and would enable further work on the structural drivers for health.

SA also noted the work underway within Public Health Wales to review indicators and how they could best contribute to improvement; this work also aligned closely with that of the Commission.

Building on SAs comments, HG also noted that the requirements of the Future Generations Act were fundamental to Public Health Wales; he asked what more the organisation could do to help drive the Commission's work. HG also noted that the presentation had referred to funding constraints within the context of Culture and the Welsh language; it was a constraint that had wider application. DW agreed that financial constraints impacted adversely across all the 'missions'; reductions in prevention budgets would be a cause for concern.

DW advised the Board that he viewed Public Health Wales as the organisation that led the way on implementing a number of aspects of the Future Generations Act. The Commission would issue a Maturity Matrix shortly; this was a self-assessment tool that would allow organisations to test their proposed actions against the Commission’s 50 Indicators. SA advised that Public Health Wales would introduce the Matrix.

JM indicated that he would welcome working with the Commissioner on two areas, firstly on *The First Thousand Days: A Public Health Approach to Supporting Parents* and secondly on mental health, seeking to shift the model from longer term care to a preventative approach.

MM asked about the role of the private sector, particularly those companies engaged in natural resources, for example water. DW noted that the Future Generations Act did not cover the private sector, but he welcomed engagement on a voluntary basis.

IB asked whether there were opportunities to collaborate on artificial intelligence and digital opportunities. DW agreed that there were and welcomed the prospect.

In closing the discussion, JW thanked DW and MBN again for their presentation; it had generated a significant discussion on the areas of common purpose and interest and the Board looked forward to working with DW, MBM and the Commission Team in the months and years ahead. She confirmed that, at its March 2024 meeting, the Board would receive the 2024/27 IMTP for approval; Board members’ deliberations would include compliance with the provisions of the Future Generations Act. SA would act as the point of contact for progressing the actions discussed.

Action: SA

PHW 2024.01.25/5

Staff Networks – Ymlaen

Following on from previous Network presentations to the Board, JW extended a warm welcome to JE and GW, the co-chairs of the Ymlaen Network(the Network)

JE provided some background on the rationale for establishing the Network; he and GW were passionate about the Welsh language, from both a cultural and health and wellbeing perspective, and as a means of addressing inequalities in health. They welcomed the opportunity to present to the Board using the medium of welsh; they were keen to create more opportunities to use the welsh language

in the workplace and were committed to supporting Welsh Government aim of 1 million welsh speakers.

JE found that the biggest challenge concerned encouraging people to use the language wherever possible and to provide helpful support. GW also commented on the need to respect the language, part of which was promoting its usage.

JE and GW used a slide presentation to:

- share their mission of bringing people together to encourage the use of the welsh language;
emphasise the importance of the use of the welsh language in healthcare;
they shared media coverage of an example from a hospital in Birmingham.
- the Welsh Government initiative to enable health care staff to communicate in basic welsh by 2027;
- comment on the number of Welsh speaking staff in Public Health Wales was in the region of 40%, with variable fluency. There are over 1000 Public Health Wales staff at level zero – unable to speak any Welsh;
- Achievements in 2023, including: an executive sponsor; an opening event to mark Dydd Gwyl Dewi Sant; three Network sessions that had included practical issues but also celebrated Welsh language and culture; and a very positive meeting with the Welsh Language Commissioner;
- the value of a community led Network that could act as a catalyst to encourage others.

- The aims for 2024 included:
 - The creation of a sub network focused on learners;
 - Moving away over time from translators and moving towards bilingual sessions;
 - Celebrating Welsh Language Week;
 - Fun events including 'taste of Wales' and identifying Welsh people who had contributed to the field of public health and medicine;
 - Guest speakers, including the Enfys Network and the Future Generations Commissioner.

- The 'asks' of the Board for 2024/25 were:
 - to offer support and lead by example including using Welsh phrases and greetings;
 - to promote the meetings and events and attend two meetings per year.
 - to encourage staff to improve their welsh language skills;
 - to enjoy and celebrate the language rather than it being seen as an obstacle.

JW expressed the Board’s thanks for an impassioned and insightful presentation. She invited MK, as executive sponsor, to comment. MK emphasised the level of commitment that JE and GW brought to their co-chair roles; they had inspired the Network members and he thanked them both for their vision and enthusiasm.

In closing, JW confirmed that the Board would support the ‘asks’ and that PODCOM would monitor them.

Action: MM/NL/SB

PHW 2024.01.25/6	Items for Approval
PHW 2024.01.25/6.1	Strategic Risk

Opening this discussion, CB took members through the strategic risk plan and expressed her thanks to all involved for their assistance. This had involved reviewing a range of documents that the Board needed to consider when assessing and managing risk.

CB noted the progress made in refreshing the Corporate Risk Register and in the departmental risk management and capture processes; the papers set out the relationships between these risk processes and methods of escalation and de-escalation. The work undertaken had reflected discussions at the November 2023 Board meeting, including the move away from a Red/Amber/Green (RAG) rating towards a more detailed narrative descriptor of the position. CB noted the dynamic nature of the work, with further changes expected over time, around: clarity on timescales; risk descriptors; and the relationship with the IMTP.

CB then took the Board through each strategic risk; Board members made the following comments:

- The need to build in clarity on timescales, especially when risks extended into the future, with the consequent need to map progress over time;
- the need to overhaul directorate risk registers and processes;
- A pilot process underway to test out the reverse planning model;
- The need to identify the approaches and actions that had the most impact on the risk and progress over time;
- The position of Public Health Wales in identifying and managing risks that affected the whole population, through a whole systems approach – Public Health Wales would be only one contributor to management of the overall risk. Risk descriptors had to be clear on the role and extent of impact;

- The need to ensure regular review of the risk itself – MK used COVID-19 as an example of changing risk and impact, with consequences for the risk descriptor.

CB thanked Board members for their constructive views and comments, reiterating that the Strategic Risk Register was a dynamic document that would continue to evolve. HG confirmed that the February Board development session would include the mapping of the strategic risks against the IMTP2024/27.

JW thanked CB for the significant work that underpinned the papers, noting the ongoing consideration of the risks at executive level.

The Board **noted** the range of papers provided; **took assurance** from the ongoing work on strategic risk; **received assurance** on the progress made and **noted** the additional work underway at executive level.

PHW 2024.01.25/6.2	Strategic Equality Objectives
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NL introduced the Strategic Equality Plan (the Plan), expressing his thanks to Sarah Brewer for her significant contribution to developing the Plan. He noted that the Plan replaced that of 2020–2024 and spanned the 2024-2028 period.

The Plan had been subject to extensive engagement across Staff Networks, Trades Union representatives and external stakeholders, including the Future Generations Commissioner. Feedback from the Staff Survey had also informed the content.

SB confirmed that the Plan aligned with the Welsh Government Anti-racism Action Plan, LGBTQ Action Plan and the pending Disability Plan.

MM congratulated NL and SB on a clear and comprehensive report; he also commended the clear links between proposed actions and success measures. He asked about Committee level oversight and JW confirmed that both PODCOM and QSIC would have oversight of specific aspects. JW added the Board’s congratulations to NL, SB and all those involved in developing the Plan, noting the significant progress made since an earlier Board development session, when the Board had worked through an early draft.

Action: MM/NL/DC/CB/MK

The Board **approved** the Strategic Equality Plan and **took assurance** from its contents and the discussions.

PHW 2024.01.25/6.3	Board Minutes and Action Log from the 30 November 2023 meeting
<p>The Board confirmed the Minutes as an accurate record of the meeting.</p> <p>PV provided an update on the Action Log.</p> <p>The Board approved the Minutes and noted the position in respect of the Action Log.</p>	
PHW 2024.01.25/7	Items for Noting
PHW 2024.01.25/7.1	Private Chair's Report (30 November 2023)
<p>JW explained the purpose of placing this report in the public domain, in line with the Board's <i>Protocol for Reserving Matters to a Private Board (and Committee) Meeting</i>, updated in July 2023.</p> <p>The Board noted the Private Chair's Report.</p>	
PHW 2024.01.25/7.2	Board Forward Plan
<p>The Board noted the Forward Plan</p>	
PHW 2024.01.25/7.3	Date of Next Formal Meeting of the Board
<p>In closing the meeting JW paid tribute to KE who was leaving Public Health Wales after eight years as a Board member. JW expressed her debt of gratitude to KE for the exemplary way in which she had discharged her NED and Vice Chair roles, making the latter her own and working tirelessly to promote the work of Public Health Wales at meetings of the vice chairs' peer group.</p> <p>KE was a consummate public servant, always being fully prepared for meetings, making insightful contributions and skilfully balancing constructive challenge and support. KE would be missed greatly and JW extended the Board's thanks, together with all best wishes for the future.</p> <p>The next meeting would be held on 28 March 2024</p>	
<p>The meeting closed at 14:50</p>	