



Minutes

Title of meeting Public Health England Advisory Board
Date Wednesday 29 November 2017

Present	<p>Sir Derek Myers Paul Cosford Yvonne Doyle Richard Gleave Sian Griffiths Poppy Jaman Richard Parish Duncan Selbie</p>	<p>Interim Chair Director of Health Protection and Medical Director Director, London Deputy Chief Executive and Chief Operating Officer Interim Deputy Chair Non-executive Associate Non-executive Chief Executive</p>
In attendance	<p>Heather Ashford Lee Bailey Viv Bennett Simon Capewell Emma Carragher Derrick Crook Martin Hindle Paul Lincoln Deborah McKenzie Adrian Masters Cathy Morgan Vasanthini Nagarajah John Newton Louise Park Quentin Sandifer</p> <p>Rachel Scott Alex Sienkiewicz Alan Stapley</p>	<p>Ipsos MORI (from min ref 17/126-129) Director of Communications Chief Nurse Faculty of Public Health (observer) Ipsos MORI (from min ref 17/126-129) Director, National Infection Service Independent member, PHE Audit and Risk Committee Chief Executive, UK Health Forum (observer) Chief People Officer Director of Strategy Deputy Director, Strategy Secretariat Assistant Director of Health Improvement Ipsos MORI (from min ref 17/126-129) Director of Health Protection and Medical Director, Public Health Wales (observer) Board Secretary Director of Corporate Affairs Deputy Director, Finance and Commercial</p>
Apologies	<p>Michael Brodie George Griffin Michael Hearty</p>	<p>Finance and Commercial Director Non-executive Associate Non-executive</p>

There were five members of the public present.

Announcements, apologies, declarations of interest

17/126 Apologies were noted and no interests were declared in relation to the agenda.

PHE Public Opinion Survey

17/127 The results of PHE's recent public opinion survey results were presented (enclosure PHE/17/29). This was the fourth public opinion survey and demonstrated an ongoing and growing understanding of the work of PHE:

- a) awareness of PHE was at its highest ever level, and this was associated with trust and confidence in PHE;
- b) increased awareness of PHE did not, however, always translate to a clear idea of PHE's functions;
- c) the public was increasingly concerned about mental health, particularly so in younger age groups. There was also variation in key public health concerns depending on age, ethnicity and social grade; and
- d) the results of survey suggested that the public thought there was a role for both individuals and the government in public health but there was less recognition on the role that employers could play.

17/128 A discussion of the Advisory Board followed and the following points were raised:

- a) PHE could choose to increasingly focus on the role that employers had to play in promoting and improving health and wellbeing; and
- b) it was important to be clear on what concern meant to individual members of the public. It was recognised that this could arise from a number of factors including reporting in the media as well as personal experience.

17/129 The Advisory Board thanked Ipsos MORI for the presentation and noted the survey results for 2017.

Minutes of the meeting held on 27 September 2017

17/130 The minutes (enclosure PHE/17/30) were agreed as an accurate record of the previous meeting.

International Association of National Public Health Institutes (IANPHI) Peer to Peer Review

17/131 The Director for Health Protection and Medical Director introduced the recently published peer review of PHE by an expert panel of the International Association of National Public Health Institutes (IANPHI).

17/132 The recommendations as set out in the report were positive and provided several valuable suggestions to support PHE's future development. One of the key recommendations related to the importance of the NHS and the need for PHE, at all levels, to embed constructive relationships with the NHS. There were already specific examples of close working related to immunisation and highly specialised commissioning but there was a recognition that broader activity was required.

17/133 The Advisory Board also noted the recommendation for PHE to support the development of public health science and evidence base globally.

17/144 It was confirmed that the implementation of the recommendations would be taken forward through the development of the annual business plan and through the Remit Letter agreed with Ministers.

17/145 The Advisory Board thanked Professor Cosford and the team for their work in preparing and supporting the review. The Advisory Board also agreed that the peer review had been a valuable process for PHE and recommended that a further review of PHE take place in 5 years' time.

Directors' Updates

17/146 The Director, London advised that:

- a) the Devolution agreement for Health and Social Care in London had been

signed, and the overarching narrative had been shared with members of the Advisory Board;

- b) the Mayor's consultation on the revised London Plan was open. This included a focus on public health and a reduction of health inequalities;
- c) she had participated in a Thrive session to improve BAME community resilience in mental health and increasing confidence; and
- d) she continued to work with NHS England to support improvements to population health, in particular, working with local populations to best understand their needs.

17/147 The Director, Health Protection advised that:

- a) PHE had been commissioned by the Department of Health to prepare an evidence review into air quality. This work would be informing the Government's Air Quality Strategy as it continued to develop;
- b) the UK 5 year antimicrobial resistance (AMR) strategy annual progress report had been published and showed a 5% reduction in the use of antibiotics, mainly in primary care; and
- c) the UK Rapid Support Team had already responded to a number of incidents, including support in Ethiopia, Nigeria, Sierra Leone following the mudslide and Madagascar following the outbreak of plague. Whilst in country, staff provided not only immediate support but also sought to facilitate long term strategic development and health protection capability.

17/148 The Chief Nurse advised that:

- a) the WHO Collaborating Centre for Public Health Nursing and Midwifery had completed its first year of work focusing on maternal care and health;
- b) PHE was contributing to the Nursing Now campaign, led by the APPG for Global Health. This included supporting developmental work in Africa with both a focus on economic growth and public health outcomes; and
- c) PHE's Chief Nurse Directorate continued to provide valuable support to the NHS, including the *All Our Health* resource and the Maternity Transformation Programme.

14/149 The Director, Health Improvement advised that:

- a) the Public Health Dashboard had been launched for local authorities and work would take place to include CIPFA analysis as part of the dashboard;
- b) the Parliamentary Science and Technology Committee was holding an inquiry examining the impact of electronic cigarettes on human health (including their effectiveness as a stop-smoking tool). PHE would contribute to this;
- c) good progress had been made reviewing PHE's healthy people, mental health and health equity functions. The review had allowed the opportunity to focus on the delivery of high quality public health advice and ensure that the life course approach was embedded throughout the work of the teams; and
- d) work was underway within PHE to ensure readiness to comply with the

requirements of the General Data Protection Regulation, which would come into effect in May 2018.

Chief Executive's Update

17/150 The Chief Executive advised that:

- a) the latest annual PHE Staff Survey results were now available, with an increase in the overall Engagement Index to 59%. There were several areas for further action, for example, pay and benefits, and an action plan would be developed by all Directors for their teams;
- b) The Annual Accountability Review of PHE with the Minister had taken place in November, with DH confirming that PHE had delivered its core functions as set out in the remit letter for 2016/17; met its statutory duties; maintained financial balance and delivered with a reduced operating budget; and was managing strategic risks effectively. The Minister had thanked PHE's staff for all that been delivered over the period.
- c) The Tailored Review implementation process had now concluded with continued implementation as part of 'business as usual'.
- d) PHE had been successful at the Civil Service Awards for the second year running, with "Stay Well This Winter Campaign" winning the Communications Award.

Finance Report

17/151 The Advisory Board noted the monthly report (enclosure PHE/17/32)

Global Health update

17/152 Professor Griffiths, Chair of the PHE Global Health Committee, advised that the next meeting of the Global Health Committee would take place in early December. The agenda focused on aspects from across the domains of public health, including a discussion on mental health, violence prevention, the nursing workforce and health improvement.

17/153 The Advisory Board **NOTED** the update.

PHE Harlow update

17/154 Martin Hindle, independent member of the Audit and Risk Committee and PHE Harlow Programme Board advised the Board that the PHE Harlow programme continued to progress well.

Information items

17/155 The Board noted the following information updates:

- a) Minutes of the Audit and Risk Committee meeting held on 6 June 2017 (enclosure PHE/17/33)
- b) Minutes of the Audit and Risk Committee meeting held on 26 September 2017 (enclosure PHE/17/34)
- c) Board forward calendar (enclosure PHE/17/35)

Any other business

17/156 Minimum Unit Pricing in Scotland: On 15 November 2017 the UK Supreme Court confirmed that the legislation which allowed Minimum Unit Pricing to be introduced in Scotland was lawful. A copy of the judgment would be shared with Advisory Board members for information.

17/157 There being no further business the meeting closed at 12.00pm.