

Public minutes of the meeting of the UKPHR Board held on Thursday 22 April 2026 via Teams at 14:00 hours

Present: Linda Smith (LS) (UKPHR Chair)
Jessica Lichtenstein (JL) (Chief Executive)
James Sandy (JS)
Marianne Coward (MC)
David Evans (DE)
Duncan Vernon (DV)
Ranjit Khutan (RK)
Rachel Flowers (RF)
Joanna Dowd (JD)
Chris Emmerson (CE)
Lynn Butler (LB)
Pavenpreet Johal (PJ) (Secretariat)

Apologies: Benjamin Humphrey (BH)
Helen Featherstone (HF)
Gill Jones (GJ)

In attendance for item 5: Kate Lees (KL)
Anisah Ali (AA)

1. Welcome, apologies for absence and new declarations of interest

The Chair welcomed everyone to the meeting. Apologies were noted as above. There were no new declarations made.

2. Minutes of public Board meeting held on 5 March 2026

The public minutes of the meeting held on 5 March 2026 were agreed as a true and accurate record.

ACTION	WHO	WHAT	BY WHEN
	JL	Update and publish the 5 March 2026 public Board minutes on website	ASAP

3. Actions and matters arising

JL provided an update, advising that the team was generally on track and that the main outstanding points related to the practitioner conference budget and the EDI data workstream. The EDI data collection exercise, begun last year to capture comprehensive protected-characteristics information, still had gaps and completeness issues, so limited use had been made of the data to date. The upcoming renewal season would be used to make a more concerted effort to fill those gaps, with reporting expected once renewals had closed.

4. Governance forward planner – 2026

JL advised that the practitioner standards date had been incorrectly entered in the governance planner and confirmed that the item due for discussion was practitioner standards on the current date. She added that the planner would be updated to include further items, including the fitness to practise discussion scheduled for June, and emphasised that the document remained a working draft subject to change.

5. For decision

Practitioner standards refresh

The Board considered the paper on the review of the public health practitioner standards, introduced by KL, practitioner moderator. The Chair explained that the item had been brought directly to the Board because of timing, as it had not yet been considered by the Education and Standards Committee and the next committee meeting was not until July.

KL outlined that the work was a light-touch review approved by the Board the previous June, with the scope and purpose agreed at that time. The review was timed to align with the Department of Health and Social Care's review of the Public Health Knowledge and Skills Framework (PHSKF) to avoid overlapping consultation and burden on the public health system.

A steering group was established with representation across the public health system, including the four nations, and the review included an evidence review and a communications and engagement plan. Draft standards were developed before Christmas and then consulted on in January through an online consultation open for 62 days. The consultation received 79 responses, which were described as fewer in number than expected but high in quality. The standards were then revised following consultation and discussion by the steering group.

KL advised that the revised standards were not significantly different overall, with one additional standard relating to managing resources, two standards combined, and some minor wording changes to improve clarity and include elements of public health practice that had not previously been explicit. Supporting information was also updated to improve interpretation and consistency.

The implementation plan included a communications plan, a clear launch date, instructions for practitioners already in the portfolio process, inclusion of the revised standards in the next annual update of the guidance for public health practitioner registration, and updates to assessor, verifier and refresher training materials. The new standards would not come into force until two months before the e-portfolio change date was confirmed.

RF welcomed the work but raised concern that the supporting information should more clearly address health protection, noting its importance and the absence of standalone health protection standards for practitioners. KL responded that health protection had been the main area of debate during consultation and that the steering group had sought to balance the need to include health protection principles while ensuring the standards remained applicable across different public health settings. She explained that the supporting information defines resources broadly, including finance, staffing, materials and volunteers, as well as practitioners' time.

JS queried the wording of standard 1.7, suggesting it was lengthy and potentially unclear. KL acknowledged that the relevant standard may need further review for clarity.

RK noted that the paper had been circulated to the Education and Standards committee, with no further comments. He suggested that the Board could agree the paper now, with any exceptional points to be followed up through Chair's action if needed. JL confirmed that waiting for the next committee and Board cycles would delay implementation unnecessarily, and that the key voices on the committee had already been involved through the steering group.

The Board agreed the amended standards for public health practitioner registration and agreed the implementation plan. The Board also noted the work undertaken, including the consultation, and thanked the steering group, consultees and staff involved in the project. It was further agreed that any remaining detailed issues, including any wording or explanatory points arising after the meeting, would be followed up by the Chair and RK outside the meeting if required.

ACTION	WHO	WHAT	BY WHEN
	JL, AA & KL	Amend the revised standards in line with Board discussion and any subsequent comments from Education and Standards Committee if received and requiring Chairs action	ASAP

AA and KL left the meeting.

6. To be taken together:

The Board considered the budget paper alongside proposals on staff pay and the health cash plan, noting the three items were linked and should be considered together.

a. 2026-2027 Budget

JL explained that the organisation was budgeting in a more constrained position than in previous years because reserves had been affected by the unexpected costs of the office move. The Board noted that income was forecasted to increase by around £26,000 and that expenditure would begin to reduce over time because of savings linked to the move, including rent, utilities and insurance.

The Board noted that the organisation was still a few thousand pounds short of its minimum reserves target at some points during the financial year. It was also noted that further adjustments had been made to the spreadsheet after the paper had been issued to the Audit, Risk and Remuneration Committee, and that the working budget remained under review as updated quotes became available.

The Board considered options for the annual practitioner conference expenditure as part of the wider budget position. It was noted that the conference was valuable, but not core to regulation, and that there was a strong case for protecting reserves by deferring the event by five months into the next financial year. The Board also discussed the possibility of working with the Belonging in Public Health initiative, while also maintaining flexibility to explore the conference as a broader collaborative event. The Board agreed that delaying the conference would provide greater financial flexibility and would also allow time to consider whether it could be delivered in person or virtually or potentially aligned with other relevant conferences and events.

After discussing all items under 6 and item 7, the reserves policy, the Board then continued to consider the overall budget for 2026-27. Having considered the budget in the context of the reserves policy, the Board approved the budget for 2026-27.

ACTION	WHO	WHAT	BY WHEN
	JL	Delay the practitioner conference into the next financial year and explore opportunities to collaborate	ASAP

JL and PJ left the meeting for the following item to be discussed.

b. 2026-2027 staff pay

The Board considered the proposed staff salary increase, noting that the Audit and Risk Committee had recommended a 3% pay rise. It was explained that the increase was intended to reflect the external pay environment while remaining within the organisation's financial parameters. The Board supported the recommendation, noting both the value of the staff team and the need to retain a fair and consistent approach across the organisation. The Board agreed that a 3% increase should apply across the team, including the Chief Executive, and accepted that this was affordable within the budget.

JL and PJ returned to the meeting.

ACTION	WHO	WHAT	BY WHEN
	JL	Implement 2026-2027 staff pay	ASAP

c. Health cash plan for staff

The Board also considered the proposal to introduce a staff health cash plan. It was noted that the plan was inexpensive, offered good value for money, and included an employee assistance element that the organisation did not currently provide. The Board welcomed the proposal and felt it would be a positive addition to the employee benefits package. It was noted that the costs were expected to sit comfortably within the profit and loss account and would not have a material impact on reserves

ACTION	WHO	WHAT	BY WHEN
	JL	Sign up to the staff health cash plan	ASAP

7.

Reserves policy

The Board considered the reserves policy before it gave final approval for the 2026-27 budget.

JL explained that the reserves policy had been revised following further research into the actual costs associated with worst-case scenarios, including winding up the organisation, cyber-attack and fraud risks. The the upper limits of reserves should be set with realistic recognition that reserves are there to be used for the benefit of the charity.

The revised policy introduced more specific financial thresholds. The minimum operational reserve was set at £35,000, which the Board noted was the minimum level and not a target to be relied upon. The target reserves level was set at £65,000, though it was acknowledged that the organisation should ordinarily aim to hold more than this where possible.

The Board noted that the cash flow forecast in the budget spreadsheet related to cash reserves, being the closing balance / money in the bank position. It was explained that the organisation would fall slightly below the minimum threshold at certain points, including in December 2026, largely because of timing issues and the dilapidations cost due in April 2026, but that every effort had been made to mitigate this position.

The Board discussed the monitoring and reporting section of the reserves policy, with concern expressed that the wording could imply too much delay before action was taken if a significant financial issue arose. JL agreed that the policy should make clearer that an urgent response may be required, including a Chair's action or an extraordinary Board meeting where necessary.

Following this discussion, the Board approved the reserves policy, noting that the Audit and Risk Committee had recommended it for approval and that the revised wording would include the additional clarification discussed.

ACTION	WHO	WHAT	BY WHEN
	JL	Update the reserves policy to make it clearer that an urgent response may be required, including a Chair's action or an extraordinary Board meeting if necessary	ASAP

8. Fitness to Practise policy and process updates

The Chair noted that item 8 would be deferred to the next Board meeting in June. She observed that the paper was an important and necessary piece of work, providing assurance both for the Board and for staff, as well as for the Registrar.

The Chair invited brief comments or points requiring follow-up ahead of the June meeting. It was suggested that the Board would benefit from a more detailed discussion at the next meeting, with the Registrar to attend and, if possible, to provide a presentation.

JL explained that the key stakeholders in the process were registrants and employers, and that individuals from these groups would be asked to informally review the new documentation for clarity. She noted that engagement would include lead employers involved in fitness to practise and revalidation, together with contacts in organisations such as UK Health Security Agency, OHID, Public Health Wales and Public Health Scotland. These stakeholders were likely to be particularly interested in the employer guidance, although local authorities would present a further challenge where the guidance applied to people who were not public health professionals.

JL also added that the Faculty of Public Health would also be a useful source of insight, particularly in relation to how similar issues were handled for doctors in local authorities. She also explained that registrant input would be actively sought, so that the voices of those directly affected by the process could be heard.

RF supported this approach, noting that experience within the Faculty of Public Health workforce team could be drawn upon; they are also represented on the Education and Standards Committee and had already been presented an opportunity to comment on the documents.

The Board noted that the next meeting would provide the opportunity for a more detailed and comprehensive discussion of the paper.

9. Registration reports

The Board acknowledged work of the RP and RAC in previous agenda items and acknowledged the minutes of the RAC.

10. Audit, Risk and Remuneration Committee report – including Risk Register

The Board received the minutes of the Audit, Risk and Remuneration Committee meeting held on 26 March and noted them for information. The Chair advised that DV was present should any Board Director wish to raise points arising from the minutes. No questions were raised.

The Board also noted the risk register. It was explained that the next Audit and Risk Committee meeting would include the annual deep dive into the risk register, in line with the usual committee cycle where two committee meetings fall between Board meetings. It was anticipated that there may therefore be further feedback to report to the next Board meeting. DV confirmed that this arrangement was deliberate and that one of the committee meetings each year is used for the deep dive on the risk register.

11. Education and Standards Committee report

The Board acknowledged that there had not been a meeting since the last Board meeting.

12. Minutes from private meeting of the Board on 5 March 2026

Discussed in private meeting

13. Chief Executive's report & diary

Discussed in private meeting

14. Any other business

Discussed in private meeting

15. **Date, time and venue of next meeting**
Wednesday 24th June 2026 at 14.00 via Teams

Action points from this meeting

ACTIONS	WHO	WHAT	BY WHEN
	JL	Update and publish the 5 March 2026 public Board minutes on website	ASAP
	JL, AA & KL	Amend the revised standards in line with Board discussion and any subsequent comments from Education and Standards Committee if received and requiring Chairs action	ASAP
	JL	Delay the practitioner conference by 5 months and explore opportunities to collaborate	ASAP
	JL	Implement 2026-2027 staff pay	ASAP
	JL	Sign up to the staff health cash plan	ASAP
	JL	Update the reserves policy to make it clearer that an urgent response may be required, including a Chair's action or an extraordinary Board meeting if necessary	ASAP

The Chair closed the meeting at 16.00 hours.