

# Minutes

**MEETING:** Agency Board

**DATE:** Thursday 15 September 2011

**TIME:** 2.30 pm

**VENUE:** Specialty Schools Room, Beechill House, NIMDTA

## Present

### Members

Mr A Joynes (Chairman)

Mrs J Eve

Dr RJ Atkinson

Dr J Marley

Mr D Morrice

### Officers

Mr T Hutchinson (Finance Manager)

Dr D Hussey (Postgraduate Dental Dean)

Dr G Bonnar (Deputy Director for Postgraduate GP Education)

Ms R Campbell (Human Resources Manager)

Ms M Roberts (Administrative Director)

### In Attendance

Mrs P Dardis

## 1 APOLOGIES

Dr T McMurray (Chief Executive/Postgraduate Medical Dean)

Dr C Loughrey (Director for Postgraduate GP Education)

*(Dr G Bonnar to Deputise)*

## 2 DECLARATION OF MEMBERS INTERESTS

None declared.

## 3 ANNOUNCEMENTS

A pre-meeting of the Chairman and Non Executive Members had taken place prior to the commencement of the formal business of

Non Executive  
Members

the Board. Members agreed to continue with this arrangement for future meetings.

The Chairman, Mr Joynes, formally welcomed Mr Deane Morrice to his first meeting of the Board. His appointment as a non-executive (financial) member to the Board of the Agency had been approved by the Minister for a two-year term with effect from 25 July 2011. The Chairman stated that Mr Morrice, who had a strong financial background, would be invaluable to the business of the Board and Audit Sub Committee.

The Board wished to formally record their regret at the sad loss of their non-executive member, Mrs Anna Eggert, who had passed away on 2 August 2011 after a prolonged illness. Her considerable contribution to the work of the Agency was acknowledged. The Chairman, Chief Executive and several members of the Board and staff had attended her memorial service. She would be missed.

The Chairman, further informed members that he had been contacted by the Public Appointments Unit and they would be advertising for a new non-executive lay member in the near future. They would also be advertising for a non-executive medical member to replace Dr Atkinson whose second term is due to expire in January 2012.

#### **4 MINUTES OF LAST BOARD MEETING (Paper B11/16)**

Minutes of the last meeting held on 23 June 2011, copies of which had been circulated prior to the meeting, were approved.

The Chairman informed the members that Internal Audit, KPMG and the NIAO had also been circulated with the unconfirmed minute of the Business of the Audit Sub Committee. No comments had been received prior to the Board meeting.

#### **5 MATTERS ARISING**

Dealt with under the agenda.

#### **6 COMMITTEE STRUCTURES**

##### **6.1 Membership of the Board (Paper B11/17)**

Members received and discussed the updated Board membership. It was noted that both Dr Atkinson and Mrs Eve would finish their second terms as non-executive members of the Board in 2012.

## 6.2 Structure of the Audit and Remuneration Sub- Committees of the Board

### Remuneration Sub-Committee

The Chairman confirmed that the membership of the Remuneration Sub-Committee would remain unchanged. In keeping with the standing orders it was noted that a meeting should be organised before the end of the current financial year.

Chairman

### Audit Sub-Committee

Composition of the Audit Sub-Committee had been discussed at the pre-meeting. Mr Joynes confirmed that Mrs Eve had agreed to continue as Chair until the end of the current financial year at which time it was hoped Mr Morrice would exchange roles.

To ensure that future meetings of the Audit Sub-Committee were quorate, it was agreed on the advice of the Chairman, that the Standing Orders (Schedule 1) Audit Committee should be amended to reflect a composition of at least three non-executive members with a quorate of two non-executive members. Current membership was confirmed as Mrs Eve (Chair), Mr Morrice, Dr Atkinson and Dr Marley.

Chairman/  
Corporate  
Governance  
Manager

Servicing of the committee was discussed and it was suggested that Mr McCarey (Corporate Governance Manager) with the continued support of Mrs Dardis (Corporate Services), would take over this role currently held by Ms Roberts (Administrative Director).

Corporate  
Governance  
Manager

Mr Joynes also felt that the Board Chairman and Chief Executive should be briefed post meeting of any relevant issues by the Chairman of the Audit Sub-Committee and attend meetings only if required. He undertook to seek the agreement of the Chief Executive for this arrangement. It was confirmed that the Administrative Director and Finance Manager would continue to attend.

Chairman

Mr Joynes stated he would rely on the committee to clear as many outstanding matters off the agenda as possible before the end of the financial year. He appreciated it might not be possible to deal with all the outstanding issues.

Audit Sub-  
Committee

## 6.3 Establishment of the Governance Committee

It was the view of the Chairman and agreed by the non-executive Board members that the Board did not currently have enough

oversight and input into the governance framework of the Agency. It was agreed to establish a new sub-committee to advise the Board. The Governance Committee would absorb the work of the current Risk Management Team and would be chaired by the Chairman of the Board.

The Board discussed but decided it was not necessary to establish a separate Finance Committee.

#### Draft Terms of Reference (Paper B11/18)

Members received and discussed the draft terms of reference for the proposed Governance Committee.

The committee would consist of the Chairman, two Board members, Chief Executive, Administrative Director, Corporate Governance Manager and IT and Records Management Officer. It was agreed that it would also be appropriate to include the Finance Manager in the core membership. Mr Morrice and Dr Atkinson had agreed to sit on the committee.

It was agreed the terms of reference required further revision and would be forwarded to the next meeting of Board for approval. The Chairman agreed to liaise with the Corporate Governance Manager to take this forward.

Chairman/  
Corporate  
Governance  
Manager

## **7 REPORT FROM AUDIT SUB-COMMITTEE**

### **7.1 Dates for 2011/12**

It was agreed that Mrs Eve (Chair of the Audit Sub Committee) would check her schedule and liaise with Mrs Dardis about possible dates.

Chair of Audit

### **7.2 ALB Audit Committee Chairs' Event (Paper B11/19)**

Members received and noted the correspondence from the Department. Dr Atkinson had represented the Audit Sub-Committee at the last event held on 22 February 2011 and had kindly agreed to attend the next meeting scheduled for 20 September 2011.

## **8 FINANCIAL UPDATE**

### **Budget Report (Paper 11/20)**

Members received and discussed the report from the Finance Manager which gave an update on the 2011/12 budget. He also

gave a presentation which looked at the possible impact of variables over a three year period up to 2015.

Mr Hutchinson reminded the members that the definition of the key performance target of breakeven is a surplus or deficit of +/- 0.25%. The Agency was currently on target to breakeven with a projected surplus of £1k (0.002%).

The Agency had received an additional non-recurrent allocation of £1m of which £350k would be used to fund existing activities and non-recurrent support for joint appointment posts. The balance of £650k would be returned to the Department in the October monitoring round.

He reported that prompt payment compliance for the period 1 April to 31 July stood at 96.33%. He felt confident that the Agency would meet the required target of at least 95%.

Mr Hutchinson also updated members on budgetary performance for the GP Vocational Training, Salaries, Specialty Training, GP Appraisal, Study Leave, and Junior Doctor Salaries. The Less-Than Full-Time budget currently projected a surplus. Savings had been made due to the policy of endeavouring to place trainees in slot-shares as opposed to supernumerary posts.

## **9 REPORT FROM CHIEF EXECUTIVE (Paper B11/21)**

Members received and discussed the report from the Chief Executive which was presented by the Administrative Director on his behalf and included an update on the following:

- Quality Management
- Progress of the Hospital key performance indicators set against objectives for 2011/12
- Training Vacancies update

### **9.1 Quality Management Update**

Members received and noted the quality management update which included an overview of the Deanery Visits, GMC National Training Surveys and Annual Deanery Report (ADR) to the GMC. Dr McMurray had also included a list of quality management workshops which included topics such as Patient Safety and Doctors in Difficulty.

Members also received and noted the copy of the appended template for Deanery Visit to Trust Report. An in depth discussion took place on the draft protocol which outlined the cycle process

for the approval and release of deanery visit reports which had been tabled at the meeting by the Administrative Director. Ms Roberts answered the relevant questions posed by the members. A copy of the draft document had been forwarded to the Department for comment.

A re-visit to Emergency Medicine in the Belfast Trust was scheduled to take place on 28 October and an update would be given to the Board at the November meeting.

## **9.2 Foundation and Specialty Recruitment and Selection**

Members received and noted the training vacancies spreadsheet which accompanied the Chief Executive's report.

The current vacancies and possible solutions were discussed and Ms Roberts also updated the members on work being undertaken by the Trust led Human Resources Working Group. The group were working with the 'Locomotion' agency to help fill vacancies. There had also been a recruitment visit to Romania recently.

## **10 REPORT FROM ADMINISTRATIVE DIRECTOR (Paper B11/22)**

The Board received and discussed a report from the Administrative Director, attention was drawn to the following and the accompanying documents received and noted.

- Senior Management Minutes – 17.5.11, 21.6.11. 3.8.11
- Performance Management Framework
- NIMDTA Accountability Meeting – 22.6.11
- Corporate Risk Register
- Report on Complaints/Incidents/Accidents
- Audit Recommendations 2010/11 – NIMDTA Action Plan
- Equality Annual Review of Progress 2010/11
- Complaints Policy
- Data Protection Policy
- Policy on the Provision and Acceptance of Gifts and Hospitality
- Reimbursement of Expenses for Doctors and Dentists in Training
- Reimbursement of Expenses for Staff and those acting on behalf of NIMDTA
- Quality Management Group Minutes – 11.4.11, 13.6.11, 27.6.11
- Health and Safety Report

## **10.1 Senior Management**

Members received and discussed the content of the minutes of the Senior Management meetings. The September minutes would be available for the November Board meeting.

### **10.1.1 Performance Management**

#### **10.1.1.1 Performance Management Framework**

Members received and discussed the framework which had been further developed since first being presented at the June Board meeting by the Corporate Governance Manager.

The framework which would continue to evolve received the approval of the Board. The Members wished to congratulate Mr McCarey on an excellent document.

#### **10.1.1.2 Accountability Meetings**

Members received and discussed the minutes of the end of year accountability meeting which had taken place on 22 June. It was noted that both Mr Joynes and Mrs Eve as outgoing Chairman, had attended. In line with the new arrangements the Department's Deputy Director of Human Resources had also met with the Administrative Director at the end of August.

Both Mr Joynes and Mrs Eve raised the issue of value for money when considering the use of venues for training purposes etc. It was noted that Departmental guidance with regard to the use of hotels for training is still applicable although discretion may be applied.

The Administrative Director informed the members that staff were adhering to the guidance when seeking accommodation for conferences, training etc. If suitable public sector venues were not available the justification for the use of a private venue was documented in compliance with the mini-code.

#### **10.1.1.3 Assurance Framework**

In line with the audit recommendations, the Assurance Framework had been amended to include the roles of Internal and External Audit. Further revisions to the governance arrangements would be made and the revised framework would be forwarded for consideration at the November meeting of the Board.

Corporate  
Governance  
Manager

## **10.1.2 Risk Management**

### **10.1.2.1 Risk Registers**

The Risk Management committee had met on one occasion since the June meeting of the Board. The Committee had reviewed the key risks in relation to Health and Safety and the risk register had been up-dated accordingly. Members noted the Corporate Risk Register which had also been revised to take into account any completed actions, new actions required and any re-grading of the risks.

### **10.1.2.2 Complaints/Incidents/Accidents and Information Requests**

Members received and discussed the updated report which included the Agency response to a recent FOI request.

Senior Management updated the Board on the action being taken in relation to the complaints received.

### **10.1.2.3 Audit Reports**

Members noted the summary of all audit recommendations which included the actions taken or required.

At the request of Mrs Eve it was agreed to defer consideration of the summary to the next meeting of the Audit Sub Committee.

Audit Sub-  
Committee

### **10.1.2.4 Review of Procurement**

The Administrative Director updated the members on the review of procurement practices across health and social care which had commenced in July 2011. As a consequence organisations will have to produce clear documented evidence for the approval of and accountability for single tender actions (STAs). The Chairman enquired as to whether the staff procedures were rigorously audited. Ms Roberts confirmed that all staff had been re-issued with the procurement guidance.

### **10.1.2.5 Review of the Working Environment**

The Review had been considered by Senior Management and awaited the consideration of the Board.

## **10.1.3 Statutory Equality Duties**

Members received, noted and approved the Annual Review of Progress Report which had been approved by Senior Management

and signed off by the Chief Executive and Chairman before being forwarded to the Equality Commission in line with the deadline of 31 August.

#### **10.1.4 Business Services Transformation Project (BSTP)**

Ms Roberts informed the members that the contracts had been awarded for the new HRPTS (Human Resources, Payroll, Travel & Subsistence) and FPL (Finance, Procurement and Logistics) systems. The BSTP Project Manager had met with NIMDTA staff on 6 September to discuss the implementation of the new systems and the implications for staff. A Human Resources strategy had been developed in consultation with the Unions to set guiding principles and ensure that staff are supported through the change processes. The final decision regarding shared services rests with the Minister for Health and would be subject to public consultation.

#### **10.1.5 Policies for Review**

The following corporate policies were submitted to the Board for review and approval.

- Complaints Policy
- Data Protection Policy
- Policy on the Provision and Acceptance of Gifts and Hospitality
- Reimbursement of Expenses for Doctors and Dentists in Training
- Reimbursement of Expenses for Staff and those acting on behalf of NIMDTA

##### Complaints Policy

Upon discussion, members decided to defer review of the policy to enable further revisions. The Chairman would liaise with the Corporate Governance Manager and the amended policy would be considered by the Governance Committee before being forwarded for approval to the next meeting of the Board.

Chairman/  
Corporate  
Governance  
Manager

##### Date Protection Policy

Members received and discussed the policy which had been redrafted to reflect new guidance received. Information had been included on the role of the Personal Data Guardian, Senior Information Risk Owner and Information Asset Owner within the Agency.

IT/Records  
Management  
Officer

The Policy was approved subject to a minor revision, in relation to

staff responsibilities.

#### Policy on the Provision and Acceptance of Gifts and Hospitality

Members received, noted and discussed the revisions to the policy. Mrs Eve enquired as to whether consideration should be given to incorporating a section on the Bribery Act 2010. It was agreed that the Chairman would liaise with the Corporate Governance Manager and the amended policy would be considered by the Governance Committee before being forwarded for approval to the next meeting of the Board.

Chairman/  
Corporate  
Governance  
Manager

#### Reimbursement of Expenses for Doctors and Dentists in Training

Members received, noted and discussed the policy which was approved subject to a minor revision, in relation to study leave.

Administrative  
Director

#### Reimbursement of Expenses for Staff and those acting on behalf of NIMDTA

Members received, discussed and approved the revised policy. Ms Roberts highlighted the amendments to the Board.

### **10.1.6 Health and Safety**

Members received and discussed the Health and Safety Report which reviewed the key performance indicators which had been considered at the meeting of the Health and Safety Committee which met in July 2011.

### **10.2 Quality Management Group**

Members received and discussed the minutes of the Quality Management Group which continued to meet on a regular basis. Ms Roberts highlighted the continuing volume of work that the group were tasked with.

### **11 REPORT FROM POSTGRADUATE DENTAL DEAN (Paper B11/23)**

Members received and discussed the report from the Postgraduate Dental Dean which included an update on the progress of the Dental key performance indicators set against objectives for 2011/12. Attention was drawn to the following:

## **11.1 Vocational Training/General Professional Training**

### General Professional Training

Four places had been recruited to and the successful candidates had commenced training. Dr Hussey informed the members that in future years it was hoped the scheme would change to a 'block' programme with the first year placing the trainees in General Dental Practice and the second being spent in hospital and community placements. This would make significant savings to the dental budget. Dentistry were in negotiations with the relevant partners to take this forward.

### Vocational Training

Twenty-seven places out of the available funding for thirty-six had been filled.

Recruitment for 2012 would take place in November 2011 prior to the commencement of national recruitment by the England and Wales deaneries. It was hoped to join the national scheme for 2013 if the other deaneries agreed to a selection base in Northern Ireland.

## **11.2 Continuing Education**

The programme for this term had been circulated widely across the province to dentists and dental care professionals and was also available via the NIMDTA website. Dr Hussey informed the members, that he was generally pleased with the uptake for the courses. There had been a marked increase in the income generated due to the significant reduction in the cost of running the courses.

## **11.3 Hospital Dentistry**

The trainee in Paediatric Dentistry, who had been seconded to Manchester, had completed training and been appointed to a Consultant post.

Dr Hussey informed the members that the three main training units, Altnagelvin, Ulster and Royal Hospitals had been unable to fill the allocated number of dental Foundation 2 posts, but the Trusts were currently trying to recruit to locum appointments. The reduced number of Consultant posts continues to restrict the ability to offer training posts.

**12**

**REPORT FROM DIRECTOR FOR POSTGRADUATE GENERAL PRACTICE EDUCATION (Paper B11/24)**

Members received and discussed the progress of the General Practice key performance indicators set against objectives for 2011/12 which was presented to the Board by Dr Bonnar the Deputy Director for Postgraduate General Practice Education. Attention was drawn to the following:

Less Than Full-Time Training

Members were informed that if all the current requests are met the percentage of LTFT trainees would be 8.5%.

Personal and Public Involvement (PPI)

Dr Loughrey, the Director for Postgraduate General Practice Education, was leading the initiative on behalf of the Agency. A progress report had been forwarded to the Public Health Agency. A paper had been published in the British Journal of General Practice and a second article had been published in Education for Primary Care.

GP Appraisal

It was noted that in Northern Ireland ST3 trainees experience a GP appraisal to prepare them for appraisal following completion of training.

GP Trainees in Difficulty

This was an ongoing issue across both Hospital and General Practice. A trainer practice network had been established and identified practices were willing to take trainees in difficulty for their placement.

Continuing Professional Development

It was hoped that the provision of CPD would be self financing by the end of March 2013.

**13**

**REPORT FROM HUMAN RESOURCES MANAGER (Paper B11/25)**

Members agreed to defer the report from the Human Resources Manager.

The Chairman asked members to reflect on the accompanying

policies and papers which would be considered at the November meeting of the Board. It was agreed the first Non-Executive Board Workshop would lead with issues around Human Resources including the findings from the Staff Satisfaction Survey and the Review of the Working Environment..

**14 CORRESPONDENCE/REPORTS/PAPERS RECEIVED**

None received.

**15 ANY OTHER BUSINESS**

It was agreed to rotate the order of business on future agendas.

Members also agreed that it would be helpful if all departmental reports included a short summary of the key areas to be considered and should clearly indicate if they were for information, noting or approval.

The terminology of the departmental reports updating the key performance indicators set against objectives for 2011/12 were also discussed. The Chairman asked the Administrative Director if it would be possible to take a coordinated approach to ensure more consistency with the terminology used in the reports.

Administrative  
Director

**16 DATE OF NEXT MEETING**

- Thursday 17 November 2011 @ 2.00 pm, Boardroom

**DATES FOR 2011/2012**

Formal Meetings

Discussion took place on the frequency of the formal meetings. It was agreed to circulate the following dates:

- Thursday 23 February 2012, Specialty Schools Room
- Thursday 26 April 2012, Specialty Schools Room
- Thursday 21 June 2012, Boardroom
- Thursday 27 September 2012, Boardroom
- Thursday 29 November 2012, Boardroom

It was agreed that all formal meetings would commence at 2.00 pm with a pre-lunch meeting of the non-executive Board Members commencing at 1.00 pm.

## Non-Executive Members Workshops

It had been agreed to organise a series of issue-led workshops which would commence at 2.30 pm. The Chairman would identify issues to be discussed and members of staff may be invited to attend identified items on the agenda. The following dates would be circulated to the Non-Executive Members:

- Thursday 29 September 2011
- Thursday 26 January 2012
- Thursday 29 March 2012
- Thursday 31 May 2012
- Thursday 30 August 2012
- Thursday 25 October 2012