

# Minutes

**MEETING:** Agency Board  
**DATE:** Thursday 18 June 2009  
**TIME:** 12.30 pm  
**VENUE:** Boardroom, Beechill House

## **Present**

### **Members**

Dr H McGuigan (Chairman)  
Dr RJ Atkinson  
Mr A Baird  
Mrs J Eve  
Dr J Marley  
Mrs A Eggert

### **Officers**

Dr T McMurray (Chief Executive/Postgraduate Medical Dean)  
Ms M Roberts (Administrative Director)  
Mr T Hutchinson (Finance Manager)  
Dr C Loughrey (Director for Postgraduate GP Education)  
Dr D Hussey (Postgraduate Dental Dean)  
Ms R Campbell (Human Resources Manager)

### **In Attendance**

Mrs P Dardis

## **1 APOLOGIES**

There was a full attendance

## **2 REVISED MEMBERSHIP (Paper B09/21)**

It was noted that Dr H McGuigan had been reappointed as Chairman to the Board for a further period of three years.

## **3 ANNOUNCEMENTS**

### **3.1 Good Governance Refresher Seminar 8 June 2009**

The Chairman mentioned the Good Governance Seminar held in

June and conducted by Mr Brian Whalley, and members agreed that it had been a very successful and useful event.

### **3.2 Risk Register Workshop**

Ms Roberts informed the meeting that the date for the one day Risk Register Workshop had been confirmed as 17 September 2009. The workshop would be facilitated by Amberwing and further information would be forwarded in due course.

**Admin  
Director**

## **4 MINUTES OF LAST MEETING (Paper B09/22)**

Minutes of the last meeting held on 25 February 2009, copies of which had been circulated prior to the meeting were approved.

## **5 MATTERS ARISING**

The Board discussed future dates for 2009/10. It was agreed to cancel the meetings previously confirmed for 1 October and 3 December 2009. Four further dates were agreed (see agenda item 17).

All other items would be dealt with in the Agenda.

## **6 REPORT FROM THE AUDIT SUB COMMITTEE**

The Chairman of the Audit Sub Committee, Mrs Judith Eve, reported that there had been four meetings of the Committee since the February 2009 Board meeting.

### **6.1 Meetings held on 26 March 2009 and 28 May 2009**

The meeting of 26 March which included representation from Internal, External Audit and the NI Audit Office and meeting of 28 May (Board members and Officers only), met to finalise last years business and take forward business for the forthcoming year.

### **6.2 Meeting held on 16 June 2009**

The meeting held on 16 June (Board members and Officers only), had also been attended, by Ms Jenny McCaw of Internal Audit specifically to discuss the internal audit reports. Mrs Eve informed the Board that her input had been helpful and positive. It had been suggested at the meeting that it may be beneficial to organise awareness training for staff other than members of Senior Management, who had management responsibilities.

**Admin  
Director**

### **6.3 Meeting held on 18 June 2009**

Mrs Eve informed the Board that the prime object of the meeting held prior to the Board meeting that morning had been to look at the summary of the reports from Internal Audit and the draft Management Letter for the year ended March 2009.

#### **6.3.1 Financial Statements for the year ended 31 March 2009**

External Audit had received the Financial Statements by the required deadline. These had been accepted subject to a few minor revisions highlighted by Audit.

#### **6.3.2 Draft Management Letter for year ended 31 March 2009**

Mr Pitt had presented the draft report to the Audit Sub Committee and had highlighted three areas of concern; these were Agenda for Change, Procurement and Risk Management.

#### **6.3.3 Agenda for Change Assimilation**

*The Finance Manager and Human Resources Manager were asked to withdraw from the meeting for the Agenda for Change discussion.*

Mrs Eve informed the Board that members of the Audit Committee had been advised by the auditors that the Agency was the only organisation that had not actively sought to recover overpayments. The Audit Committee was advised to obtain a conclusive position from the Department as to whether the overpayments should be recouped. It was also advised that, regardless of whether the money, already overpaid, should be recouped, all employees who had been placed on the wrong pay point should be moved without delay down to the correct point and paid the correct salary for that point.

The auditors were also concerned that the legal advice received by the Agency was specific to the Northern Trust and therefore not relevant to the Agency. The Administrative Director was of the opinion that the advice was still pertinent in that, regardless of how the overpayments came about, the principles remained the same ie even if mistakes had been made and the calculations were incorrect, to undo what had already been done would probably be deemed unlawful. This of course would have to be tested in an Industrial Tribunal.

The Board sought further clarification in relation to the nature of the overpayments. The Administrative Director explained that, according to internal audit, the cause of the overpayments was due

to staff being assimilated onto the incorrect point within the AFC band (staff should either have been assimilated onto a transitional point or the first point of the AFC scale) or the incremental date being wrongly applied.

The Board agreed that it had no choice but to act on the recommendation of the Northern Ireland Audit Office. The Chief Executive should write to relevant members of staff advising them of steps being taken with immediate effect.

**Chief Executive**

*The Finance Manager and Human Resources Manager rejoined the meeting.*

#### 6.3.4 Manpower Resources

The Board noted that the increasing pressures arising from a range of initiatives in the area of Controls Assurance were placing unacceptable burdens on senior staff, in particular on the Administrative Director. The Board agreed that the appointment of a senior officer responsible to the Administrative Director should be taken forward as quickly as possible by the Chief Executive and Administrative Director.

**Chief Executive/  
Admin Director**

### **7 Financial Update**

The Finance Manager gave the Board an overview of the Financial Statements for the year ended 31 March 2009.

#### **7.1 Financial Statements for the year ended 31 March 2009 (Paper B09/23)**

The Committee received and considered the Financial Statements for the year ended 31 March 2009. The Finance Manager explained that the break-even target had not been met due to a small surplus which had exceeded 0.5% of the Agency's turnover. Although the original statements submitted to the Auditors had achieved breakeven, however, a required adjustment of £40K for a under-spend for GP professional indemnity insurance costs, paid in advance, had exceeded the allowed surplus.

The Board duly adopted the Accounts subject to the minor revisions highlighted by Audit.

The Chairman wished to record his thanks and congratulate Mr Hutchinson and his Finance Team for all their efforts.

## **8 Draft Annual Report 2008/09 (Paper B09/24)**

The Board noted and discussed the draft Annual Report, a copy which had been circulated prior to the meeting.

The Administrative Director informed the Board that the Auditors had requested revisions to the report to reflect the new format. The revisions included a management commentary, director's report and remuneration report. The revised Report would be forwarded to the Auditors and Department for approval and reissued to the Board at the next meeting. The final version would be available via the website.

The Board approved the Annual Report subject to the required revisions.

The Chairman thanked the Administrative Director, Finance Manager and Human Resource's Manager for their hard work in preparing the Report.

## **9 Report from the Chief Executive/Postgraduate Medical Dean (Paper B09/25)**

The Board received and noted a report from the Chief Executive which included an update on:

- PMETB – Annual Deanery Report
- Specialty and Foundation Recruitment 2009

### **9.1 PMETB – Annual Deanery Report**

Dr McMurray informed the Board that further to his report to the Board at the February meeting, the Deanery had now received full approval without conditions from PMETB for the 2007/08 Annual Deanery Report. The cycle of approval was already underway for next year's report which was required to be submitted to PMETB by the end of November.

He further informed the meeting that the Agency was scheduled for another Deanery visit in January 2010. PMETB would produce a list of those they wished to meet with during the visit and this was likely to include representation from the Board.

### **9.2 Specialty and Foundation Recruitment 2009**

Dr McMurray gave the Board an update on Specialty and Foundation recruitment.

## Foundation

He informed the meeting that as of yesterday the Agency had achieved a 100% fill rate for F1 and there were currently nine gaps for F2.

## Specialty Recruitment

He further informed the Board that the fill rate for Specialty Recruitment which included General Practice was 98.1% with approximately twenty-six posts remaining unfilled.

He continued that he had led a successful visit to India at the beginning of June to establish a pool of potential candidates to fill future vacancies in Anaesthetics and Paediatrics. Trusts had been kept fully informed.

## **10 Report from Administrative Director (Paper B09/26)**

The Board received and noted a report from the Administrative Director which covered the following:

- Risk Management
- Records Management
- Equality

Ms Roberts informed the Board that Risk and Records Management would be standing agenda items for all future Board meetings.

An updated spreadsheet of policies was tabled at the meeting for the Board's information.

The Board received and noted the following documents and policy papers:

- Risk Management Strategy
- Business Continuity Plan
- Policy for the Reporting and Management of Serious Adverse Incidents
- Complaints Policy
- Business Risk Register 2009/10
- An Assurance Framework: A Practical Guide for Boards of DHSSPS Arm's Length Bodies (March 2009)
- Records Management Strategy (incorporating Records Management Policy and Disposal Schedule)
- Data Protection Policy
- Equality – Annual Review of Progress 2008/09

## **10.1 Risk Management**

### **10.1.1 Risk Management Strategy**

Ms Roberts informed the Board that the strategy would be reviewed annually and had been rewritten to incorporate the Risk Management Policy and take account of the Assurance Framework for Arm's Length Bodies.

The Board discussed the categorised risks and major/minor financial loss thresholds and agreed that the major financial loss threshold should be capped at £500,000 and the catastrophic threshold at losses over £500,000.

It was agreed that an additional risk category relating to reputational risk should be added.

The Board enquired as to how the Strategy would be brought to the attention of Agency staff. Ms Campbell (Human Resources Manager) explained that all policies had been incorporated into the Agency's network (CETIS) which required each member of staff to record that the policy had been read and signed off.

Ms Roberts informed the Board that three significant risks would be identified by Senior Management in line with the Strategy for discussion at the September Board Meeting.

It was noted that training in Risk Management for all staff at Team Leader level and above had been organised for 17 September 2009.

Members approved the Strategy subject to minor revisions.

### **10.1.2 Risk Registers**

Ms Roberts informed the Board that the Corporate Risk Register 2009/10 had been updated to take account of the objectives contained in the Business Plan 2009/10.

She explained that it was her intention to further revise the template to make it easier to populate by all Departments. Risk Registers were being produced by all Departments and would be looked at by Senior Management for possible inclusion in the Corporate Risk Register. The Quality Management Working Group, chaired by Mr Keith Gardiner (Associate Dean), was currently looking at the Hospital Training Register and mapping the risks.

The revised Register would go to the September meeting of the Board.

**Admin  
Director**

It was noted that key performance indicators would be developed by Senior Management and agreed with the Audit Committee and Board.

**10.1.3** Policy for the Reporting and Management of Serious Adverse Incidents

The Board discussed the Policy which had been presented for review. The Policy would be re-issued to staff and any incidents would be graded according to severity and potential risk and any action taken would be reported to the Board.

Members approved the Policy.

**10.1.4** Complaints Policy

The Board reviewed the policy for handling complaints which had been revised to take account of the new Departmental guidance on Managing HSC Complaints.

Members approved the Policy subject to a minor amendment to point 7.5.

**10.1.5** Business Continuity Plan

The Board approved the Business Continuity Plan which had been revised to take account of the Agency's contingency arrangements in relation to staff and doctors/dentists in training in the event of a flu pandemic.

**10.2** **Records Management**

**10.2.1** Records Management Strategy (incorporating Records Management Policy and Disposal Schedule)

Ms Roberts informed the Board that the Records Management Policy had been revised significantly to clearly identify the roles, responsibilities and arrangements for review and monitoring

Members approved the Strategy for Records Management.

**10.2.2** Data Protection Policy

The Board received and approved the Data Protection Policy which had been revised to take account of the role of the IT and Records Management Officer.

### **10.3 Equality**

#### Annual Review of Progress 2008/09

The Board received and approved the Annual Review of Progress which would be signed off by the Chairman and Chief Executive and submitted to the Equality Commission by 31 August 2009.

### **11 Report from Human Resources Manager (Paper B09/27)**

The Board received and noted the report from the Human Resources Manager which covered the following:

- Article 55 Review
- Recruitment
- KSF Appraisal System
- Staff Satisfaction Survey

Members received and noted the following documents:

- Personal Development Review Policy (*incorporating the Knowledge & Skills Framework*)
- Personal Development Portfolio
- Staff Attitude Survey – Corporate Report May 2009

#### **11.1 Article 55 Review**

The Agency had met with the Equality Commission in May to discuss the Report. Ms Campbell informed the Board that the Commission had acknowledged that the Agency had undertaken a very comprehensive review and commended the report.

#### **11.2 Recruitment**

Ms Campbell informed the Board that interviews would be held the following week for six administrative vacancies within the Agency.

The following appointments had been made to the Department of General Practice:

- Dr A-M Harney (Associate Director for Appraisal)
- Dr G Burns (Associate Director for CPD)
- Dr R Carlisle (Programme Director)

#### **11.3 KSF Appraisal**

Ms Campbell and Mrs Dennison (HR Officer) had attended the

launch of the HSC Workforce Learning Strategy and KSF Re-energise event in April 2009, which had been hosted by the DHSSPS and included delegates from all Trusts, Boards and Agencies. The Department has asked that a significant effort be made to produce KSF outlines over the coming year and an Implementation Group has been set up to oversee the progress.

Ms Campbell drew the Board's attention to the Personal Development Review Policy and Portfolio which had been developed by the Agency for administrative staff.

#### **11.4 Staff Satisfaction Survey**

Ms Campbell gave the Board an overview of the findings and informed the Board that there had been a 70% response to the electronic staff satisfaction survey completed in May 2009. She further informed the Board that it was mandatory to do an annual survey as part of the HR controls assurance standard.

### **12 Report from Postgraduate Dental Dean (Paper B09/28)**

The Board received and noted the report from the Postgraduate Dental Dean which included an update on:

- Vocational Training
- General Professional Training
- Continuing Professional Development for Dental Care Professionals
- Continuing Education Programme
- Hospital Dentistry
- COPDEND

#### **12.1 Vocational Training**

Thirty-four out of a possible thirty-six training places had been successfully filled. Dr Hussey informed the Board that he was pleased by the improvement in the gender split of Trainers.

#### **12.2 General Professional Training**

The four training places had been successfully filled.

#### **12.3 Continuing Professional Development for Dental Care Professionals**

The DCP coordinator post had been filled on a job-share basis by Elaine Fugard and Marguerite Burke who had commenced running road shows across the Province.

## **12.4 Continuing Education Programme**

The Dental Department were moving toward using the on-line Intrepid booking system from Autumn. A mail shot would be issued over the summer informing the profession of the changes.

## **12.5 Hospital Dentistry**

A total of twenty-one Senior House Officer posts had been filled following competitive interviews. Dr Hussey informed the Board this number may be reduced if some of the candidates are successful in obtaining Specialist Registrar posts.

Three Specialist Registrar posts were due to be advertised, one in Orthodontics and two for Oral Surgery. Dr Hussey informed the meeting that Dr John Marley had agreed to take on the role of Training Programme Director for Oral Surgery which was a new discipline in Hospital Dentistry.

## **12.6 COPDeND**

The Agency had hosted a successful meeting of Celtic COPDEND from 30 April to 1 May 2009 at the Hilton, Templepatrick.

Dr Hussey informed the Board that he had been appointed as one of the two Deputy Chairs of COPDEND.

He further informed the meeting that COPDEND were developing a Quality Assurance initiative along PMETB visit lines.

## **13 Report from Director for Postgraduate General Practice Education (Paper B09/29)**

The Board received and noted a report from the Director for Postgraduate General Practice Education which covered an update on the following:

- Staff Issues (Recruitment)
- General Issues
- Specialty Training
- Continuing Personal Development
- Appraisal

### **13.1 Staff Issues**

Appointments made to the Department of General Practice had been discussed in the Human Resources Report.

## **13.2 General Issues**

### **13.2.1 Regulation and Quality Improvement Authority**

Dr Loughrey informed the Board that the RQIA had invited the General Practice Department to participate in an event to promote collaborative working. She had also been invited to deliver a presentation.

### **13.2.2 National Underperformance Strategy Group**

Dr Loughrey further informed the meeting that she had represented the Agency at a national strategy group which had been convened by the Welsh Deanery.

## **13.3 Specialty Training**

A total of sixty five trainees and thirteen trainers had been appointed.

## **13.4 Continuing Personal Development**

Dr Loughrey updated the Board on the on-going work on the Intrepid system for course management and online booking for General Practice.

Work was also ongoing to set up a Returner, Retraining and Induction Scheme for General Practitioners.

## **13.5 Appraisal**

The 2<sup>nd</sup> annual appraisal conference had taken place on 6/7 May.

The Agency had delivered a total of 1451 appraisals in 2008/09. It was projected that the number of GPs needing to be appraised in 2009/10 would rise with an expected shortfall in Appraisers.

Dr Loughrey further informed the meeting that General Practice had recently met with the local GMC representative to discuss revalidation and appraisal and two projects are planned.

## **14 Correspondence/Reports/Papers**

The Board received and noted Papers B09/30, 31, 32, 33 and 34 which were listed under the agenda.

The Chairman brought the Boards attention to Paper B09/31 –

'Departmental Accountability Meetings with Arm's Length Bodies 2009/10' which stated that there would be two formal accountability meetings between the Department and each of the ALBs. One in the middle of the year October/November 2009 and a second at the end of the year in May 2010.

**15 Any Other Business**

There was no further business.

**16 Date of next meeting**

Monday 21 September 2009 @ 1.30 pm in Committee Room 2

**17 Future Dates**

Monday 23 November 2009 @ 12.30 pm – Seminar Room

Thursday 14 January 2010 @ 12.30 pm – Seminar Room

Thursday 11 March 2010 @ 12.30 pm - Boardroom