

Minutes

MEETING: NIMDTA Board
DATE: Thursday 29 September 2022
TIME: 2.00 pm
VENUE: Boardroom, NIMDTA

Members:

Mr D Wilson	Chair
Mr H Graham	Member
Dr J Little	Member
Ms G Campbell	Member
Mr B Garland	Member

In Attendance:

Dr I Steele	Postgraduate Medical Dean & Director of Education <i>(via Zoom)</i>
Mr A McClelland	Senior Governance, IT & Facilities Manager <i>(via Zoom)</i>
Ms P Black	Senior Business Manager <i>(via Zoom)</i>
Ms R Campbell	Senior Professional Support Manager <i>(via Zoom)</i>
Dr L Parks	Foundation Director <i>(via Zoom)</i>
Dr Hendron	Dental Dean <i>(via Zoom)</i>
Dr C Harron	Medical Director <i>(via Zoom)</i>
Ms Hughes	Senior Education Manager <i>(via Zoom)</i>
Ms Turner	Senior HR Manager – Trainee Employment <i>(via Zoom)</i>
Dr Stone	GP Director <i>(via Zoom)</i>
Dr Smyth	Director of Hospital Specialty and Professional Development <i>(via Zoom)</i>
Ms G Kerr	Committee Support Executive Officer

Ref	Item	Action
1.0	Apologies	
1.1	Mr G McKenna (Member) Mr M McCarey (Chief Executive)	

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2.0	Declarations of Interests – Items of Business	
2.1	None.	
3.0	Announcements	
3.1	<u>Retirement of Dr I Steele</u> Mr Wilson noted that today marks Dr Steele’s final NIMDTA Board meeting.	
3.2	<u>Senior Governance IT & Facilities Manager(SGITFM) Appointment</u> Mr Wilson welcomed Mr McClelland to his first full NIMDTA Board.	
3.3	<u>Clinical Education Day</u> Members expressed congratulations on the recent Clinical Education Day, which they felt was very informative. Ms Hughes noted this was the first in person event since 2019.	
4.0	Minute of Meeting	
4.1	The Minutes of 25 August 2022 and 30 June 2022 were approved. Mr Garland queried why some items appear repeatedly, for example those under confidential. Ms Kerr clarified that items will remain until the associated action is completed. Mr Wilson committed to look at minute format as part of the wider Board paper review.	Mr Wilson Ms Kerr
5.0	Matters Arising	
5.1	<u>9.2 GP Training Programme (29.06.21)</u> Dr Stone advised that recruitment to the 111 capacity for GPST1 intake has been achieved for the first time and recognised the practical issues of managing full capacity. Dr Stone highlighted the need to review administrative structures now that capacity has been reached. This will be pursued with Ms Black on her return. 26.08.21 – Dr Stone confirmed Ms Black is aware and they will discuss at the earliest opportunity.	Dr Stone

Ref	Item	Action
	23.09.21 – Dr Stone advised discussions have taken place, with work ongoing.	
5.2	<p><u>9.2 Resourcing (28.08.21)</u> Dr Stone highlighted funding is behind current recruitment levels. Ms Black is aware and this will be looked at as soon as possible. A new baseline for funding and recruitment is required.</p> <p>Mr McKenna stressed the need to add a risk to the Corporate Risk Register, on the ongoing likelihood of increases and how NIMDTA deal with this long term. It is important a more strategic view is taken, rather than reacting to individual DoH requests. Mr McKenna noted his concerns that historically NIMDTA has been asked to take things on with resourcing discussions taking place later.</p>	Mr McCarey
5.3	<p><u>16.2 Budgets (28.08.21)</u> Mr McCarey advised Ms Black has been focusing on budgets and allocations since her return.</p> <p>Mr Wilson queried Note 12, asking if NIMDTA should write to DoH highlighting the work DoH have asked NIMDTA to take on with non-recurrent funding. Mr McKenna agreed it is important for NIMDTA to highlight to DoH work streams which are reliant on non-recurrent funding.</p> <p>Dr Little queried Paragraph 2.1. Asking if the 1% includes all SLE trainees, as this would make for a much larger bill. Mr McCarey committed to check this.</p> <p>23.09.21 – Mr McKenna noted is continuing concerns. Ms Black confirmed 2 allocation letters have been received to date confirming 21/22 non-recurrent funding, the non-recurrent nature is highlighted repeatedly to DoH in year. Mr McCarey drew attention to email trail within his report on this matter.</p>	<p>Complete</p> <p>Mr McCarey</p>
5.4	<p><u>8.4 Confidential Section (28.08.21)</u> Please refer to the Confidential Section of Minute.</p>	Mr McCarey
5.5	<p><u>8.4 Financial Reporting (25.11.21)</u> Ms Black advised budget review work is ongoing, adding that the move to departmental budgets allows for closer monitoring of budgets. Mr D Wilson asked Ms Black to keep the Board</p>	Ms Black

Ref	Item	Action
	<p>updated on the delegation of financial reporting, and how the roll out progresses. Ms Black committed to do so, confirming that BSO will deliver training to SMC Members and the Business Management team will continue to provide overview and support to NIMDTA staff.</p>	
5.6	<p><u>13.2 Resourcing (25.11.21)</u> Ms R Campbell overviewed the current resourcing challenges within PSU, noting she feels they are unable to provide the level of support she would wish, due to a lack of resources within the team.</p> <p>Mr McCarey recognised the recurrent theme of lack of resourcing across departments, confirming he has been working with departments to establish resourcing requirements. Mr McCarey confirmed Board discussions have also taken place re the requirement to ensure baseline need is resourced across NIMDTA.</p> <p>Mr D Wilson suggested resourcing across NIMDTA become a standing agenda item, rather than individual departments reporting. Agreed.</p>	Ms Kerr
5.7	<p><u>13.7 Equality Scheme (25.11.21)</u> Ms R Campbell updated Members on the additional Equality service NIMDTA have obtained from BSO.</p> <p>Mr D Wilson asked if online training is mandatory. Ms R Campbell confirmed it is. Mr D Wilson requested completion of equality training be added to Board induction requirements.</p> <p>Ms G Campbell noted the leadership role for the Board on Equality. Mr McCarey confirmed he would welcome Board leadership on this issue.</p>	Ms Kerr
5.8	<p><u>15.2 GMC Quality Assurance Process (25.11.21)</u> Ms Hughes advised Members this has been a significant workload in recent months. Due to Covid-19, a paper exercise is being carried out in place of the normal visits. Mr D Wilson asked if this is a planned exercise and if NIMDTA know in advance what will be asked. Ms Hughes confirmed this is planned, and provided an overview for Members. Ms Hughes also committed to send the final report to Members for information.</p>	Ms Hughes

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5.9	<p><u>16.6 (25.11.21)</u> Mr D Wilson asked that the SLE Induction Overview session be scheduled asap.</p> <p>Mr D Wilson suggested non urgent queries are held until the SLE Induction Overview. All agreed.</p>	Ms Kerr
5.10	<p><u>10.4 Education (25.11.21)</u> Dr Stone highlighted the curriculum change, which has created an issue in terms of having enough available placements for trainees within GP practices.</p> <p>Mr D Wilson asked if pressures manageable. Dr Stone confirmed they are, however clarity is required on the current baseline, as it is difficult to move forward with the new curriculum until clarification has been received from DoH.</p> <p>Dr Stone and Ms Black committed to meet to establish if current funding is appropriate. Mr D Wilson offered the Boards assistance if required.</p>	Dr Stone Ms Black
5.11	<p><u>9.2 Standing Orders (25.11.21)</u> Mr McCarey noted Standing Orders were discussed in detail at a pre-meeting with Board Members.</p> <p>Members confirmed they are happy to approve Standing Orders subject to the additional minor wording amendments noted at the pre-meeting. Approved.</p>	Ms Kerr
5.12	<p><u>9.4 Stormont Messaging re Home Working (25.11.21)</u> Mr McCarey advised he, along with Ms R Campbell met with Team Leaders yesterday and will provide further detail at SMC on 29 November 2021. Team Leaders have been empowered to roll out the 1:4 hybrid working model as required, rather than to meet a target. Mr D Wilson suggested the Board keep this matter under review and act on individual concerns as raised.</p> <p>Dr Parks noted the Foundation team will have to work at a higher ratio for a period to deliver 10 days of training and recruitment pre-Christmas. Dr Parks stated she is mindful of the risk especially given the small team, should someone have to isolate. Mr D Wilson asked if contingency plans are in place. Dr Parks advised not at present, Foundation are reliant on goodwill from</p>	Mr McCarey Dr Parks

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	other teams. Mr McCarey committed to look at putting plans in place, should Foundation staff become unable to attend.	
5.13	<u>18.1 AOB - Board Process (25.11.21)</u> Members requested the Board Agenda be regularly amended to facilitate SMC Members presenting earlier in the meeting.	Ms Kerr
5.14	<u>18.2 AOB - NIMDTA Resourcing</u> Mr McCarey stressed the importance of resourcing correction prior to production of a new strategic plan, suggesting a separate work stream is created for this purpose. Mr McCarey and Mr D Wilson will meet to begin the process.	Mr McCarey Mr D Wilson
5.15	<u>7.2 G&R Mins (25.11.21)</u> Members who attended agreed the minutes are an accurate reflection of the meeting. Members agreed to ask Mr L Wilson to sign off the minutes, as he chaired the meeting.	Ms Kerr
5.16	<u>10.4 Workforce Planning (31.03.22)</u> Mr Wilson suggested adding workforce planning to NIMDTAs strategic work stream. Dr Steele clarified that NIMDTA are doing their part of the work, the difficulties arise due to a lack of funding availability. Mr Wilson clarified he is keen for the Board to strategically provide support to NIMDTA staff, rather than Dr Steele continuing address this issue alone. Dr Steele suggested Mr Wilson raises with the DoH Minister at the regular Chairs Forum Ministerial meetings. Mr McCarey committed to provide input to Mr Wilson in advance of these meetings.	Dr Steele Mr McCarey Mr Wilson
5.17	<u>15.5 Staff Interfaces (31.03.22)</u> Mr McCarey noted the unusually high number of staff interfaces within NIMDTA. Adding that he would welcome discussions to ensure there is adequate cover for all interfaces. Mr McCarey highlighted he considers this an area of risk, specifically if NIMDTA are receiving the right advice and support at present. Mr McCarey noted the time commitment required from him as Chief Executive on HR issues. Mr Wilson suggested including in strategic planning. Agreed.	Mr McCarey
5.18	<u>18.2 Building Expansion (31.03.22)</u>	

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	<p>Mr McCarey confirmed costs have been provided for additional space in premises next door, adding that extra space would be very helpful in addressing NIMDTA's capacity issues. The financial impact would be a doubling of current rent rates.</p> <p>Mr McCarey confirmed he will work towards obtaining this space and keep Board Members informed of progress.</p>	Mr McCarey
5.19	<p><u>18.7 IT (31.03.22)</u> Mr McCarey highlighted the recent issues with Outlook, which has impacted work across NIMDTA. Mr Oliver is working to address this, however his influence is limited as this is an outsourced service.</p> <p>Mr Garland asked who the service is outsourced to. Mr McCarey advised this is part of the outsourced BSO ITS service. Mr Garland queried the service being received from BSO ITS and asked if the Board should write to BSO raising their concerns. Mr Wilson suggested this should be discussed at Governance & Risk Committee given the associated risk.</p> <p>Mr McCarey clarified that NIMDTA is limited by shared service IT, adding that he believes BSO should be held to account for the service level provided. Members discussed and agreed to defer to Governance & Risk Committee.</p>	Mr McCarey
5.20	<p><u>2.5 Related Party Transactions (05.05.22)</u> Ms Doherty advised Mr McCarey and Mr Joynes Declarations remain outstanding. Ms Doherty added that the information included is more detailed than formally required, and she believes this could be streamlined. Dr Little raised that line relating to her should be removed as relates to 20/21, Ms Doherty committed to remove. Ms Black proposed unnecessary information should be removed. Members agreed.</p>	Ms Doherty
5.21	<p><u>2.6 BSO attendance at Board Workshop (05.05.22)</u> Mr McCarey suggested it would be beneficial for Ms Doherty and team to attend a future Board Workshop to delve deeper into how the financial information is developed. Members agreed.</p>	Mr McCarey
5.22	<p><u>8.1 NIMDTA Resourcing (12.05.22)</u> Members requested a single page Resourcing Overview report be sent to each Board meeting.</p>	Mr McCarey
5.23	<p><u>8.1 NIMDTA Resourcing (12.05.22)</u></p>	Mr McCarey

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	Ms G Campbell stressed the need for a NIMDTA People Strategy, Mr McCarey agreed and said he would welcome Board input.	
5.24	<p><u>10.2 PSU Staffing (12.05.22)</u> Members noted the draft Business Case for an additional Band 4.</p> <p>Members would welcome the inclusion of a table which shows current staff levels and required staff levels across NIMDTA.</p>	Ms Campbell
5.25	<p><u>10.4 BSO – Equality Return (12.05.22)</u> Mr McCarey advised that BSO submission of the statutory equality return is late for the second year running, adding that NIMDTA need to follow up on this performance issue with BSO management. Ms G Campbell noted BSO should not be approaching the Equality Commission directly on NIMDTAs behalf. Members noted with disappointment.</p>	Ms Campbell
5.26	<p><u>10.6 Caseworker Workload (12.05.22)</u> Mr Garland queried the graph showing meetings by caseworker, specifically asked if Members should be concerned about the variation in meeting numbers by individual staff. Mr McCarey noted this evidences the VfM of the sessions provided by Educators.</p> <p>Members asked for clarification for next Board meeting.</p>	Ms Campbell
5.27	<p><u>10.7 Trainee Identification (12.05.22)</u> Dr Little noted as previously raised there should not be reports including one trainee, as this makes them easily identifiable. A percentage of trainees would be more appropriate.</p>	Ms Campbell
5.28	<p><u>10.8 Remuneration Committee (12.05.22)</u> Ms G Campbell noted Ms R Campbell highlighted the need to review the Remuneration Committee ToR to take account of Senior Executive staff. A meeting with Ms R Campbell will need to be scheduled.</p> <p>Mr McCarey confirmed he and Mr Wilson have completed his appraisal for 2021/22 and set objectives for 2022/23. Paperwork arising from this will be shared with Members via Ms R Campbell. Mr McCarey noted the Board Workshop plan</p>	Ms Kerr Ms Campbell

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	includes BSO training on Senior Executive staff to upskill Members.	
5.29	<p><u>12.2 LDA Escalation Policy (12.05.22)</u> Dr Little noted there is no reference to Single Lead Employer (SLE) within the LDA Escalation policy, adding she believes it is important to include reference due to the competing trainee element and employment element.</p> <p>Members would in future welcome specific reference to SLE within the LDA Escalation policy and the addition of the link to Role of NIMDTA.</p>	Ms Hughes
5.30	<p><u>13.2 Deputy Dental Dean (12.05.22)</u> Members noted mention of resourcing pressures caused by a career break. Members requested expressions of interest for a 2PA post are sought.</p> <p>Members request a view from Dr Steele and Dr Hendron on the implications and methodology of NIMDTA monitoring how many hours educators are working overall, with a view on monitoring if NIMDTA are getting the value for hours and how NIMDTA ensure staff are not working outside of the European Working Time Directive.</p>	Dr Steele Dr Hendron
5.31	<p><u>20.1 Governance Statement (12.05.22)</u> Mr McCarey advised the Governance Statement was shared with Members yesterday, and highlighted the areas which require particular attention. Mr Wilson asked if resourcing is highlighted strongly enough, particularly non-recurrent expenditure. Mr McCarey agreed to add this.</p>	Mr McCarey
5.32	<p><u>20.1 Governance Statement (12.05.22)</u> Ms G Campbell noted her discomfort at the salary levels being included within the disclosure. Following discussion, Members agreed to not disclose salaries for those not classed as a Director, and amend if Audit require.</p>	Ms Black
5.33	<p><u>19.1 June Board Meeting Start Time (12.05.22)</u> Members requested the start time be brought forward to 11am. Ms Kerr to contact SMC to check feasibility.</p>	Ms Kerr
5.34	<u>8.1 Annual Report and Accounts (30.06.22)</u>	All

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	Mr Garland confirmed the Annual Report and Accounts were presented to Audit Committee this morning, and aside from previously mentioned minor wording amendments, were approved. Mr Wilson reminded Members to supply any additional amendments to Ms Gregge by tomorrow.	
5.35	<u>8.1 Annual Report and Accounts (30.06.22)</u> Mr McCarey committed to speak to Ms McKeown (Internal Audit) with a view to obtaining metrics for HSC organisations and the numbers of recommendations each organisation receives.	Mr McCarey
5.36	<u>10.2 Board Self-Assessment (30.06.22)</u> Mr McCarey noted the inclusion of the Board Self-Assessment, highlighting the ongoing succession planning difficulties and the possible issue which will arise in 2026 if all 6 members change. Members discussed and agreed Mr McCarey should proactively write to DoH to highlight this risk. Mr McCarey suggested examining in further depth at a Board workshop, where an action plan could be developed. Mr Wilson asked if this could be done at the planned Strategy workshop. Mr McCarey recommended not, as this is likely too much to cover in a single workshop. Mr Wilson asked what happens next with the Self-Assessment document. Mr McCarey advised it is held by NIMDTA and provided to DoH on request.	Mr McCarey Mr McCarey
5.37	<u>8.2 Action Plan (25.08.22)</u> Mr McCarey outlined the planned actions: <ul style="list-style-type: none"> • Take expressions of interest from SMC, and • Begin the recruitment process for a permanent postholder • The statutory requirement must be considered at all stages Ms Campbell asked for clarification on the scope of the expression of interest, asking if this includes educators etc. Mr McCarey confirmed the intention is to only open to SMC, given those staff are already working for NIMDTA and job plans can be amended quickly. Members discussed the positives/negatives of internal and external expressions of interest. Members agreed legal advice should be sought prior to issue of the expression of interest,	Mr McCarey Ms Wilson Ms Campbell

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	<p>and stressed this advice is required quickly. Members noted the need to be aware of the recruitment processes used when Professor Gardiner retired.</p> <p>Mr Wilson noted the permanent appointment process is impacted by this initial step. HR and Legal advice to be sought urgently, and shared with Board via email. Mr McCarey, Ms Campbell and Mr Wilson agreed to meet next week with HR/Legal input.</p>	Mr McCarey
5.38	<p><u>9.2 Key Challenge 2 – Planned expansion to Foundation training (25.08.22)</u></p> <p>Mr Wilson asked if the Board have formally thanked SLE staff for their efforts. Mr McCarey advised this has not been done, but he feels it would be welcome. Mr Wilson to write to SLE staff.</p>	Mr Wilson Ms Kerr
5.39	<p><u>20.1 Any Other Business – SIMODONT Visit</u></p> <p>Mr Garland and Mr McKenna thanked for the opportunity to view the SIMODONT Suite.</p> <p>Ms Kerr advised she has a list of others who still need to visit and will be following this up with Dental staff.</p>	Ms Kerr
6.0	Report from The Audit Sub-Committee	
6.1	None. There has been no meeting since the las Board.	
7.0	Report from Governance & Risk Sub-Committee	
7.1	<p>Ms G Campbell advised that the meeting scheduled for earlier today had to be cancelled at late notice, this will be rearranged, hopefully for 13 October 2022.</p> <p>Ms G Campbell added there is ongoing work to be done in relation to reporting and it is hoped that the new reporting will be in place for the December 2022 meeting.</p> <p>Mr Wilson stressed the he, along with Ms G Campbell are available to assist Mr McClelland at any stage.</p>	
8.0	NIMDTA Resourcing	
8.1	Ms G Campbell noted it would be helpful to have a single page overview of posts vacant in comparison to team size, eg. one	Ms R Campbell

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	<p>post vacant in team of three. Along with detail on how long this post has been vacant for. Ms R Campbell committed to provide this report for the next Board.</p> <p>Ms R Campbell recognised the high levels of leavers, confirming that SMC are looking at ways to make NIMDTA more attractive for staff to stay and progress.</p>	
9.0	NIMDTA Policies (for approval)	
9.1	<p>Mr Wilson noted all policies were circulated to Board for comment in advance of the meeting. All policies were approved subject to minor format changes and the amends below.</p> <p><u>Information Governance Policy</u> Mr B Garland asked for clarification at Para 5.3 on who the Personal Data Guardian is. Additionally, an IAO definition is needed.</p> <p><u>Risk Policy</u> Dr A Smyth asked if the Board only place this policy is reviewed. Ms Kerr clarified the review schedule for the Risk Policy includes SMC and Governance & Risk, prior to Board. Ms G Campbell advised that come December, she expects to be able to review Risk Policy content and ensure NIMDTA are meeting all requirements. Members agreed to review Risk Policy and processes following the December Governance & Risk Committee.</p>	<p>Mr Oliver</p> <p>Board Members Mr McClelland Ms Kerr</p>
10.0	Report from Senior Business Manager	
10.1	Members noted the report from Ms Black, Senior Business Manager.	
10.2	<p><u>Financial Update</u> Ms Black provided an overview of recent additional allocations from DoH and expected easements.</p> <p>Ms Black confirmed NIMDTA currently project breakeven, but noted there is still considerable time to go and variables to manage.</p> <p>Ms Black advised work is still ongoing to deal with fallout of the recent HRPTS issue.</p>	

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10.3	<p><u>DoH Efficiencies</u> Ms Black noted some concern raised by a recent letter from DoH re efficiencies.</p> <p>Mr Wilson asked that given budgets are under acute pressure, how does NIMDTA handle this. Ms Black clarified that NIMDTA must strive to operate within current budgets, and be aware of the potential to have savings enforced by DoH due to overall HSC budget shortfalls. Ms Black noted the additional impact of the lack of an Assembly, as DoH are unable to set budgets. Dr Steele stressed that savings requests need to be clear that while NIMDTA manages a significant budget, this is largely trainee salary costs which are fixed and cannot be reduced. Ms Black clarified DoH savings requests will not relate to trainee salary funding, just to admin costs which she recognised also include a lot of fixed costs eg. BSO SLA.</p>	
10.4	<p><u>Trainee VISA Sponsorship</u> Mr Garland noted the increase in numbers and asked for clarification of the implications for NIMDTA departments.</p> <p>Ms Black confirmed there is a specific budget line for VISAs, with additional costs sitting within PSU. This is included in funding provided by DoH. Ms Black added that the overarching impact of having large numbers of immigrants is discussed at SMC and the costs of these impacts are being gathered. Ms Hughes has submitted a business case, however Ms Black does not envisage DoH meeting this request given the current financial pressures. Dr Steele noted NIMDTA have no control over the numbers and thus associated costs, which needs to continue to be highlighted to DoH.</p>	
10.5	<p><u>Business Support Committee</u> Mr Garland asked if Business Support Committee (BSC) has authority to make decisions in the absence of Mr McCarey and/or Mr McClelland. Ms Black confirmed that BSC can take place providing the meeting is quorate, and advised any issues where it is felt Mr McCarey's input is required would be highlighted to him if absent.</p>	
10.6	<p><u>SLE Salary Overpayment</u> Mr Garland asked if this a large amount or what was the reason to escalate to Legal. Ms Black clarified there are always overpayments, particularly during rotation. However, in this</p>	

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	particular case the trainee has left the HSC and thus the overpayment could not be recouped via salary. Mr Garland asked if recovery of overpayments is stipulated in trainee contracts. Ms Turner confirmed it is and trainees are also pointed to the regional HSC policy on the return of overpayments.	
10.7	<p><u>Direct Debit Account Overdrawn</u> Mr Garland asked if NIMDTA becoming overdrawn on the Direct Debit account should cause concern to the Board. Ms Black advised that BSO manage the bank account on NIMDTA's behalf and that this incident resulted from an oversight by BSO staff. Ms Black confirmed she has raised with BSO, as this is not an occurrence NIMDTA would like to see repeated.</p>	
11.0	Report from Senior HR Manager (Trainee Employment)	
11.1	Members noted the report from Ms Turner, Senior HR Manager (Trainee Employment).	
11.2	<p><u>Payment Errors</u> Ms Turner noted there are 30 off cycle payments requiring correction. Some overpayments have occurred due to NIMDTA not having the correct information at time of processing.</p>	
11.3	<p><u>SLE Staffing</u> Ms Turner advised a recent Band 4 appointee has withdrawn, have now gone out to the reserve list.</p> <p>Ms Turner advised the Band 5 acting up to Band 6 has been extended until substantive fill of the Band 6 post.</p>	
11.4	<p><u>BMA Social Media Channels</u> Ms Turner advised that BMA tweets over the past few days have implied significant issues with pay and contracts. Ms Turner confirmed she has followed up with the BMA requesting clarification of pay issues, as this contradicts what SLE staff are aware of. The BMA have agreed to follow up.</p> <p>Ms Turner confirmed there is an issue with contracts, the statutory 8-week period ended yesterday and this target was missed. Ms Turner advised she has explained this to the BMA and will rectify asap.</p>	
11.5	Ms Turner noted that nearly 4k email requests have been received, advising that SLE have begun investigation of a	

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	<p>system which would provide better reporting, this would also be helpful for the upcoming PPE review.</p> <p>Ms Turner advised of 2 grievances from SHSCT, a meeting has been set up as there is a common issue. Mr Wilson asked what this issue is. Ms Turner clarified both grievances relate to eligibility for excess mileage claims.</p> <p>Mr Wilson asked if it would be fair to say issues are proportionally small compared to SLE numbers. Ms Turner confirmed this is correct, adding that whilst the number of formal grievances (i.e., grievances progressing to formal hearing) are relatively low, part of the role of SLE is to work with Host Organisations (and BMA) to resolve issues before they progress to formal grievance. A considerable amount of time is involved in liaising with parties to resolve issues before resorting to formal hearing.</p>	
11.6	<p>Mr Garland asked if there is anything the Board needs to do to stress the importance of host organisations sharing necessary information with SLE. Ms Turner advised a workshop is planned with host organisations which will help to clarify roles and responsibilities.</p> <p>Ms G Campbell asked if there are any issues which will come back on NIMDTA as the employer, but for which responsibility is devolved to a Trust. Ms Turner confirmed this is a definite risk and is being actively managed. Ms G Campbell noted that NIMDTA continue to hold the risk regardless. Mr Graham stressed the planned workshop is crucial to ensure SLE continues to work on the ground.</p>	
12.0	Report from the Director of Postgraduate GP Education	
12.1	Members noted the report from Dr Stone, Director of Postgraduate GP Education.	
12.2	<p><u>Recruitment</u> Dr Stone provided an update on current recruitment figures, noting that recruitment for February 2023 starts is now closed with 121 trainees.</p> <p>Dr Stone advised she was involved in the DoH Task & Finish group for GP workforce planning, which shows there continues to be an increasing requirement for GP's year on year. Mr Wilson asked if NIMDTA have any control over increases to</p>	

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	<p>trainee numbers. Dr Stone confirmed she has some input via the Task & Finish group, noting the view to increase numbers to 161 in the next year. Dr Stone stressed this is not currently possible as there are not enough training practices to place that number of trainees. Dr Stone highlighted the difficulties within the GP sector with practices closing, and the increasing number of practices under enhanced monitoring.</p> <p>Mr Wilson asked if it is possible to increase training practice numbers. Dr Stone confirmed her team are working very hard to promote the benefits of becoming a training practice, and while many practices are keen, a number are having to withdraw due to work pressures.</p>	
12.3	<p><u>Staffing</u> Dr Stone advised that the GP Department Band 6 retires tomorrow, which is a significant loss given her length of service. The current Band 5 has been appointed to the Band 6 post, thus recruitment of a replacement Band 5 is required. Dr Stone highlighted that there has also been an additional Band 5 post approved.</p>	
13.0	Report from the Director of Foundation Training	
13.1	Members noted the report from Dr Parks, Director of Foundation Training.	
13.2	<p><u>PSA</u> Dr Parks advised the PSA fail rate is comparable with what is being seen across the UK. Thirteen trainees are due to resit in March 2023.</p>	
13.3	<p><u>Staffing</u> Dr Parks advised that a temporary Band 4 is due to start next week.</p>	
13.4	<p><u>Community Placements</u> Dr Parks highlighted that the requirement for F2 trainees to have a 4-month GP placement is going to put pressure on both her team, and Dr Stone's team. Northern Ireland is not currently matching other UK regions % of F2 docs obtaining community experience. Dr Parks stressed proactive work is needed to promote the benefits of having a F2 trainee within a GP practice.</p>	
13.5	<u>Fitness to Practice (FtP)/Complaints</u>	

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	<p>Mr Wilson asked how impactful FtP issues and complaints are on teams' availability to do 'business as usual' work. Dr Parks advised that although issues are very small in comparison to trainee numbers, they do require significant time commitment which pulls staff away from normal work.</p> <p><i>Ms Black left the meeting.</i></p>	
14.0	Report from the Senior Professional Support Manager	
14.1	Members noted the report from Ms R Campbell, Senior Professional Support Manager.	
14.2	<p><u>Immigration Update</u> Ms R Campbell advised the volume increase being seen is unprecedented, and having the staff in post with necessary skills to administrate this is proving challenging. Ms R Campbell recognised the difficulty resourcing this service due to ever changing requirements.</p>	
14.3	<p><u>Equality Report 2022</u> Ms R Campbell noted the requirement to screen policies. Mr McClelland will progress this and Team Managers have been reminded of the requirement.</p> <p>Ms G Campbell noted job descriptions don't include reference to Section 75. Ms R Campbell clarified these are standard job descriptions, those for Team Manager posts would include Section 75 requirements. Ms R Campbell noted Section 75 requirements should be included in all staff induction regardless of banding.</p> <p>Ms G Campbell highlighted that Board Members require some form of Equality training. Ms R Campbell suggested Equality become a standing item on the Board Agenda, eg. once per year.</p>	<p>Mr McClelland</p> <p>Ms R Campbell Ms Kerr</p>
15.0	Report from the Director of Hospital Specialty Training and Professional Development	
15.1	Members noted the report from Dr Smyth, Director of Hospital Specialty Training and Professional Development.	
15.2	<u>Staffing</u>	

Ref	Item	Action
	<p>Dr Smyth advised that Band 3 vacancies increase to 57% next month and Band 4 vacancies to 25%.</p> <p>Dr Smyth stated it is concerning that so many are leaving, adding she believes a lack of progression opportunity is part of the issue for this. Ms G Campbell welcomed this style of breakdown.</p>	
15.3	<p><u>Inter Deanery Transfer (IDT)</u> Dr Smyth advised of the removal of the requirement to have a reason to request an IDT, which could have a significant impact for NIMDTA.</p> <p>Mr Wilson asked if the current level of requests is normal. Dr Smyth confirmed they are higher than generally seen.</p> <p>Dr Steele provided background to IDTs which have historically seen relatively small numbers. Mr Wilson suggested this issue should be considered in more detail during development of NIMDTA's Strategic Plan.</p>	
15.4	<p><u>Recruitment</u> Dr Smyth advised of the introduction of multi station recruitment, and the associated staffing/equipment needs associated with this.</p>	
15.5	<p><u>Confidential – ARCP's</u> See Item C13.0 below.</p>	
16.0	Report from the Postgraduate Dental Dean	
16.1	<p>Members noted the report from Dr Hendron, Postgraduate Dental Dean.</p>	
16.2	<p><u>Staffing</u> Dr Hendron advised that interviews took place today for the two (of three) Band 4 vacancies within the Dental team. Recruitment for the Simulation Band 7 takes place next week.</p> <p>These appointments will be very welcome as the admin team have been under considerable pressure.</p>	
16.3	<p><u>GDC Self-Assessment Report</u> Dr Hendron confirmed the report has been returned with positive feedback.</p>	

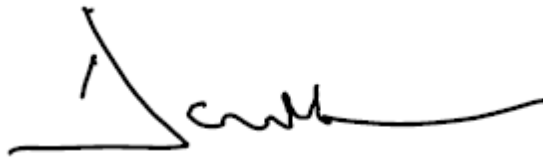
Ref	Item	Action
16.4	<p><u>Recruitment</u> Dr Hendron updated Members on current recruitment levels, noting the higher numbers of international graduates expected. Dr Hendron highlighted difficulties which can be caused due to delays with GDC registration and the additional support required by international graduates in comparison to UK graduates.</p>	
16.5	<p><u>Education Supervisor (ES) Payments</u> Dr Hendron overviewed the payment process for ES's, adding that training is likely to become more unattractive for dental practices when DoH removes the block payment process introduced during COVID.</p> <p>Mr Graham asked of there anything NIMDTA can do proactively on this issue. Dr Hendron confirmed she raises the issue consistently with DoH, however the decisions in recent years have not taken place until after recruitment takes place, which is not satisfactory for ES's. Dr Hendron welcomed Board input.</p>	Board Members
16.6	<p><u>Associate Dentists</u> Dr Hendron highlighted that Associate Dentists are being offered excellent remuneration packages by dental practices, which along with further increases in international graduates and any requirement for extensions, could create considerable problems for NIMDTA in future years.</p>	
16.7	<p><u>DCT</u> Dr Hendron highlighted that DCT salary remains an issue. Core training needs to remain attractive.</p>	
16.8	<p><u>Educational Supervisor (ES) Recruitment</u> Dr Hendron highlighted that morale is low in dental practices. There is an increase in retirements, small practices merging into Corporates etc, which all decrease the placement opportunities for trainees.</p> <p>Mr Graham asked if Corporate practices take on trainees, Dr Hendron confirmed they do, but this does not equate to the placements being lost by the closure of small practices.</p>	
16.9	<p><u>Local Recruitment</u> Dr Smyth asked if it would be prudent for NIMDTA to recruit locally, given there are 60 QUB grads and NIMDTA only require</p>	

Ref	Item	Action
	<p>30 trainees. Dr Hendron confirmed those numbers are correct, however NIMDTA have found using a local recruitment process resulted in some training posts remaining unfilled.</p> <p>Dr Hendron noted the Welsh deanery are looking at this intensely and their results will be shared with NIMDTA. Dr Hendron stated she feels it is wise to continue with national recruitment for now.</p>	
16.10	<p><u>Dental Risk Register</u> Ms G Campbell noted a lot of the issues Dr Hendron raised today should sit on an operational Dental Risk Register, and asked if one exists. Dr Hendron confirmed there is a register, however it requires more regular review. Ms G Campbell added the register needs to focus on actions to address risks, not just on recording the risk.</p>	
17.0	Report from the Senior Governance, IT & Facilities Manager	
17.1	Members noted the report from Mr McClelland, Senior Governance, IT & Facilities Manager.	
17.2	<p><u>Risk Management</u> Numerous conversations have taken place since starting the Senior Governance, IT & Facilities Manager role and now progressing a review of how risks are managed and reported on. Highlighted that an electronic system is also being investigated, Mr Garland is leading on behalf of the Board.</p>	
17.3	<p><u>Complaints Policy</u> Mr McClelland advised 2 recent complaints were resolved satisfactorily.</p>	
17.4	<p><u>Information Governance</u> Mr McClelland advised of a recent flurry of data incidents, most were minor, with one reported to the ICO.</p> <p>Mr Wilson asked if the incorrect recipient of bank details confirmed they deleted these. Mr McClelland advised they had confirmed deletion.</p>	

Ref	Item	Action
	<p>Mr Oliver has delivered training to NIMDTA staff, with further training being rolled out in coming weeks.</p> <p>Mr McClelland noted MS Teams has been rolled out across NIMDTA. Further training will take place with a view to streamlining current processes.</p>	
17.5	<p><u>Premises</u> Mr McClelland confirmed work is ongoing. Figures are awaited from LPS, and once received these will be shared with the Board.</p>	
17.6	<p><u>Cyber Attack</u> Mr Garland had previously raised concern that responsibility for IT Security was pushed out to BSO. Mr McClelland shared that at the central meeting other Organisations also raised concerns about what oversight there was of BSO and 3rd party organisations in relation to cyber security and business continuity arrangements. It was agreed this needs to be looked at in terms of Business Continuity Planning. Mr McClelland is keen to investigate further and will come back to Board with clarification.</p>	
18.0	Report from the Postgraduate Medical Dean / Director of Education	
18.1	Members noted the report from Dr Steele, PGMD/Director of Education.	
18.2	<p><u>Cardio Thoracic Surgery</u> Dr Little asked if the Cardio Thoracic unit is progressing positively. Dr Steele confirmed improvements are being seen, although progress is slow. The Trainee experience has improved, with no reports of patient safety concerns.</p>	
18.3	<p><u>Urology Enquiry SHSCT</u> Mr Graham asked if this involves NIMDTA. Dr Steele clarified that there is no impact on training and thus NIMDTA is not involved.</p>	
18.4	<u>Dr Steele's Retirement</u>	

Ref	Item	Action
	Mr Wilson thanked Dr Steele for his considerable input to NIMDTA during his tenure, particularly during the Covid pandemic.	
19.0	Report from Senior Education Manager	
19.1	Members noted the report from Ms Hughes, Senior Education Manager.	
19.2	<p><u>Clinical Education Day</u> Ms Hughes noted a very positive event and advised a paper is included with her report. Feedback will be reviewed next week with QUB/UU.</p> <p>Ms Hughes noted the input from Mr Higgins has been excellent.</p> <p><i>Dr Steele left the meeting.</i></p>	
19.3	<p><u>Annual Quality Report</u> Ms Hughes confirmed the final version has now been circulated, and thanked all NIMDTA teams for their input especially given tight timelines.</p>	
19.4	<p><u>New to NI Working Group</u> Ms Hughes advised that since submission of her Board report, the business case has been resubmitted, to include the provision of an opportunity for trainees to work in a supernumerary role for a few weeks prior to taking up post. This has been done successfully by WHSCT for a number of years, and provides an excellent introduction to how HSC service delivery works.</p>	
19.5	<p><u>Staffing</u> Ms Hughes advised of two gaps within the Education team, with 2 members of staff also due to go on maternity leave soon.</p> <p>Ms Hughes added that she does not believe revalidation work has been correctly resourced.</p>	
19.6	<p><u>HR Medical Forum</u> Ms Hughes advised this was held historically pre the introduction of SLE. Ms Hughes added she hopes to reintroduce this forum.</p>	
19.6	<u>Confidential</u>	

Ref	Item	Action
	Ms Hughes noted a number of industrial tribunals are currently ongoing.	
20.0	Report from Chief Executive	
20.1	Taken as read in absence of Mr McCarey.	
21.0	Any Other Business	
21.1	None.	
22.0	Date of next meeting	
22.1	24 November 2022	



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NIMDTA Chair

24.11.22

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Date