

Minutes

MEETING: NIMDTA Board
DATE: Thursday 27 April 2023
TIME: 10.00 am
VENUE: Boardroom, NIMDTA

Members:	Mr D Wilson	Chair
	Mr H Graham	Member
	Dr J Little	Member
	Mr G McKenna	Member
In Attendance:	Mr M McCarey	Chief Executive
	Dr C Harron	Acting Postgraduate Medical Dean & Director of Education and Medical Director (<i>part only</i>)
	Mr A McClelland	Senior Governance, IT & Facilities Manager
	Ms P Black	Senior Business Manager
	Ms R Campbell	Senior Professional Support Manager
	Dr Hendron	Dental Dean
	Ms Hughes	Senior Education Manager (<i>part only</i>)
	Ms Turner	Senior HR Manager – Trainee Employment
	Dr Stone	GP Director
	Dr Smyth	Director of Hospital Specialty and Professional Development
	Ms G Kerr	Committee Support Executive Officer

Ref	Item	Action
1.0	Apologies	
1.1	Ms G Campbell (Board Member) Mr B Garland (Board Member) Dr L Parks (Foundation Director)	
2.0	Declarations of Interests – Items of Business	
2.1	None.	

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3.0	Announcements	
3.1	Mr Wilson congratulated Dr Harron on her appointment as Postgraduate Medical Dean.	
4.0	Minute of Meeting	
4.1	The Minutes of 30 March 2023 were approved, subject to a minor wording amendment at 11.3 and 11.4.	Ms Kerr
5.0	Matters Arising	
5.1	<p>Please see appended Action List.</p> <p>Mr McCarey noted that work is ongoing to review Action List format. Mr McClelland confirmed more due diligence is required with SMC staff, prior to the amended Action List being presented to the June Board meeting.</p> <p>Mr Wilson noted he finds it difficult to follow the format of the SMC action log. Mr McClelland committed to review this also.</p>	Mr McClelland
6.0	Update from The Audit Sub-Committee	
6.1	Mr Wilson noted action is needed to progress the Committee Structure review. Mr McCarey noted he and Mr McClelland have met to discuss and work is being planned.	Mr McClelland
7.0	Update from Governance & Risk Sub-Committee	
7.1	Mr McCarey thanked all for their input to the Education Risk Register, adding that the SLE Risk Register will be brought to the May Committee meeting. Mr Wilson welcomed the progress on risk management and thanked all for the work involved.	
8.0	NIMDTA Resourcing	
8.1	<p><u>Specialty Recruitment Resilience</u></p> <p>Mr McCarey overviewed the difficulties faced in addressing this issue due to budget uncertainty, noting the likelihood that difficult decisions will need to be taken, including regarding recruitment.</p>	

Ref	Item	Action
	<p>Dr Harron overviewed the reasons for submission of a business case for expansion of the recruitment team, stressing there is an inherent risk of not having trainees in place to begin work when Trusts require them. Dr Harron added that delays in issue of offers are not helpful in this regard and cause reputational damage to NIMDTA. Dr Harron stressed the need for delicate handling as the existing team are under extreme pressure and management must learn from identified pinch points. Dr Harron noted her significant concerns about the service impact of any savings plans imposed.</p> <p><i>Dr Smyth joined the meeting.</i></p> <p>Dr Harron noted Dr Smyth is carefully managing gaps to ensure these are spread evenly across Trusts. Dr Harron stressed that NIMDTA need to think about how to mitigate the current situation and ensure August posts are filled. The implications of training posts being unfilled on service delivery and thus patient safety must be communicated clearly to DoH.</p> <p>Attendees discussed the importance of clear communication to ensure the causes of any gaps is clear to all stakeholders, and to avoid NIMDTA being blamed. Attendees also discussed the inherent risks of decisions being made on a purely financial basis without discussion with those who understand the impact on service delivery. Dr Smyth stated her belief there should not be decisions forced on NIMDTA without prior discussion, while recognising the need to make savings the long-term impact on future service levels will be very significant. All recognised the budget challenges which lie ahead.</p> <p>Members requested that while the budget is awaited communication is maintained with DoH colleagues. Dr Little volunteered to assist with discussions. Further discussion occurred about the risks of savings and the best approach for NIMDTA to negate impacts.</p> <p>Ms Black highlighted that indicative budgets are expected this week, and provided an overview of the information which has been provided to DoH/DoF to date. Dr Little noted a historic savings rule that an organisation cannot make savings which negatively impact another organisation, on which basis NIMDTA would be unable to make savings. All recognised this rule may be relaxed given current pressures.</p>	<p>Mr McCarey Dr Little</p>

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	<p>Mr McCarey advised that current communication lines with DoH must be respected, and asked for Board Members to indicate their preference on how to proceed with trainee recruitment processes. Members wish to proceed as normal until such times as an accounting officer letter is received with a clear directive to change process.</p> <p>Mr McCarey also asked Board Members to indicate their preference on additional resourcing of Specialty Recruitment if at all feasible.</p> <p><i>Dr Harron left the meeting.</i></p> <p>Attendees further discussed the difficulties in recruiting additional staff under current circumstances. Dr Smyth overviewed the risks and impact of delaying recruitment further, offering to provide a more detailed breakdown of difficulties caused/potential to Board Members in a separate session. Mr McCarey agreed it is necessary to take some action regardless of budget pressures and asked for Board approval to investigate recruitment to addressing the issue. Mr Wilson asked for next steps given current budget position. Mr McCarey committed to investigate how additional staffing could be funded and will keep the Board informed of findings. Ms R Campbell offered to provide support with this. Board Members confirmed their support of this approach, requesting to be kept informed of progression and noting that DoH senior staff also need to be informed as part of the wider conversation on financial impacts.</p>	<p>Mr McCarey Ms R Campbell Ms Black</p>
8.2	<p><u>SLE PPE</u> Mr McCarey noted that the resourcing of the SLE team and the level of responsibility on Ms Turner is currently unacceptable and must be addressed.</p> <p>Mr Garland submitted a query via email in advance of today's meeting. Mr Garland queried why DoH have not responded, asking if NIMDTA can progress internally and inform DoH of outcome.</p> <p>Mr McCarey confirmed both he and Dr Harron have reached out to DoH Sponsor Branch to encourage progression on the PPE.</p>	

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9.0	NIMDTA Policies (for approval)	
9.1	None.	
10.0	Report from Chief Executive	
10.1	Members noted the report from Mr McCarey, Chief Executive.	
10.2	<p><u>Strategic Plan</u> Mr McCarey noted the near 1000% increase in the size of NIMDTA, stressing that the need to address staffing to facilitate this increase is a vital part of the Strategic Plan. A root and branch review of everything NIMDTA does is required to ensure the correct structures are in place going forward. Mr McCarey confirmed there will be a separate session for Board Members to discuss the Strategic Plan. Mr Wilson welcomed the work done to date to update this and requested SMC also attend the session. Mr Wilson highlighted the next step is developing the underlying business plan. Mr McCarey confirmed he and Mr McClelland have begun some initial work on this.</p> <p><i>Ms Hughes left the meeting.</i></p>	<p>Mr McClelland Ms Kerr</p>
11.0	Report from Senior Business Manager	
11.1	Members noted the report from Ms Black, Senior Business Manager.	
11.2	<p><u>Overseas Travel Report</u> Ms Black advised this has been included for information, and will be sent to the next bi-lateral meeting.</p>	
11.3	<p><u>Losses</u> Ms Black highlighted an administrative loss of £9k relating to NIMDTA growth which will feature in the accounts. This will also be reported through the Audit Committee.</p>	
11.4	<p><u>Fraud</u> Ms Black advised that the previously reported fraud case is progressing with the other involved organisation.</p>	

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11.5	<u>Budgets</u> Ms Black advised that budget allocations for 2023/24 have not yet been received, highlighting that cuts are expected and work should be done to prepare options to achieve requested savings.	
11.6	<u>Year End</u> Ms Black advised that an Ad Hoc review of the Accounts is scheduled for Thursday 4th May, with papers due to issue on Tuesday 2 nd to give time for consideration. The Governance Statement will also be reviewed at this meeting. Ms Black noted a surplus of £30k at year end. Ms Black noted some amendments to the format of the Accounts this year. Mr Wilson commended the achievement of breakeven and asked for Board thanks to be passed to Ms Black's team. Mr McCarey added his congratulations, recognising the in-year difficulties faced and welcomed the work done by team which will allow clear communication of savings impacts.	Ms Black
12.0	Report from the Acting Postgraduate Medical Dean /Director of Education	
12.1	Members noted the report from Dr Harron, PGMD/Director of Education.	
12.2	Mr McCarey confirmed earlier discussions had covered the main points from Dr Harron's report.	
13.0	Report from the Director of Hospital Specialty and Professional Development	
13.1	Members noted the report from Dr Smyth, Director of Hospital Specialty and Professional Development.	
13.2	<u>Inter Deanery Transfers</u> Dr Smyth advised of 15 IDT requests from hospital specialties, including 11 from a single programme and noted the careful monitoring required now there is no longer a reason required for IDT requests. Mr Graham asked if the 11 requests from a single programme is indicative of an issue with programme. Dr Smyth stated she does not believe so as all requesters are	Dr Hendron Dr Harron

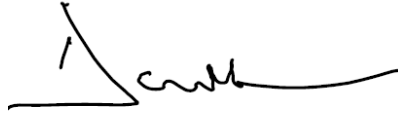
Ref	Item	Action
	international graduates which is believed to be the reason behind requests. Dr Smyth added this is likely to be an increasing trend given the higher numbers of international graduates and should be included on the Education Risk Register.	
13.3	<u>Industrial Tribunals</u> Dr Smyth noted the significant workload involved with current Industrial Tribunal cases, for which the outcome is unknown at present.	
13.4	<u>Clinical and Governance Issues</u> Mr Garland submitted a question via email, asking if recent clinical and governance issues identified in Surgery are indicative of more fundamental cross cutting issues. Dr Smyth clarified that they are specific to the identified units and provided some background clarification for Members.	
14.0	Report from the GP Director	
14.1	Members noted the report from Dr Stone, GP Director.	
14.2	<u>Recruitment</u> Dr Stone advised final recruitment numbers are awaited, noting it is likely NIMDTA will be slightly under target and will have a significant number of international graduates.	
14.3	<u>Resourcing</u> Dr Stone highlighted that Educator support requirements need to be reviewed as more support is required. Training capacity remains an issue, and work remains ongoing to increase training practice numbers.	
14.4	<u>Retirement of GP Director</u> Dr Stone advised Members of her plans to retire at the end of 2023, adding that she is keen for a replacement to be in post before then to facilitate a smooth handover. Mr McCarey highlighted that wider succession planning issues need to be addressed, with plans required to ensure retention of knowledge etc. Ms R Campbell highlighted the new Retire and Return policy which will be helpful in this regard.	

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15.0	Report from Senior HR Manager (Trainee Employment)	
15.1	Members noted the report from Ms Turner, Senior HR Manager (Trainee Employment).	
15.2	<p><u>Industrial Tribunals</u> Ms Turner advised of two further Industrial Tribunals re rota banding, adding that due to the disbandment of BLG (which formerly had a role in the Banding Appeal process) difficulties are being experienced and it is likely that increasing number of Industrial Tribunals will be seen if a new approach cannot be agreed. Ms Turner confirmed that work is ongoing with the BMA and DoH to reach a compromise which will avoid the scenarios that result in trainees feeling they need to pursue an Industrial Tribunal. Ms Turner noted that savings plans and the potential impact on rotas (ie. absorbing vacancies and collapsing rotas) could increase the numbers of banding disputes and become an unmanageable workload.</p> <p>Dr Smyth queried why NIMDTA are addressing this issue rather than Trusts. Ms Turner clarified that because NIMDTA is the legal employer it falls within NIMDTA responsibility. Ms Turner added she believes the solution is to resolve the banding appeal process.</p> <p>Dr Smyth asked who is liable for any financial loss resulting from Industrial Tribunals. Depending on the circumstances of a case and tribunal judgement Ms Turner confirmed that NIMDTA could be liable for part at least, but the ERA covers this and how pay/damages are apportioned.</p> <p>Mr Wilson asked that this issue is included within PPE. Ms Turner committed to do so.</p>	Ms Turner
15.3	<p><u>Host Organisation Workshop</u> Ms Turner overviewed the recent successful workshop, noting there have been requests to repeat this. Based on feedback, Ms Turner will issue revised versions of the SLE Roles and Responsibilities.</p> <p>Mr McCarey congratulated Ms Turner and her team for the success of the workshop.</p>	Ms Turner

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15.4	<u>Off cycle payments</u> Mr Wilson noted this is a classic KPI target for Board to monitor.	Ms Turner Mr McClelland
15.5	<u>Staff Pressures</u> Mr Wilson asked if rotations are becoming more manageable for staff. Ms Turner advised that processes are being fine-tuned which is helping, as is the recent appointment of a Band 6. Ms Turner highlighted that the August rotation is always difficult due to the large numbers involved.	
16.0	Report from the Senior Professional Support Manager	
16.1	Members noted the report from Ms R Campbell, Senior Professional Support Manager.	
16.2	<u>VISAS</u> Ms R Campbell advised the current delays with issue of VISAs are due to a delay in recruitment checks, adding there are 61 new VISA holders at present which is more than expected. Ms R Campbell highlighted that the payment issue is ongoing.	
16.3	Ms R Campbell advised that the fair employment return system is broken on HRPTS, thus an extension will be required for the return due on 1st May 2023, additionally statistics required for the Annual Report cannot currently be produced.	
16.4	<u>Staffing Fill Rates</u> Ms R Campbell advised that liaison with QUB has been helpful with some placements starting in the coming weeks. Work is ongoing to increase the fill rate.	
17.0	Report from the Postgraduate Dental Dean	
17.1	Members noted the report from Dr Hendron, Postgraduate Dental Dean.	
17.2	<u>Extensions</u> Dr Hendron advised that two to three extensions are expected, which is better than expected given the ongoing Covid impact and the increased numbers of international graduates.	
17.3	<u>Foundation Dental SLE</u>	

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	Dr Hendron advised SLE is being mentioned more often at national meetings, with some displeasure that NIMDTA are not currently progressing introduction of this. Dr Hendron noted that the Chief Dental Officer has indicated this is not likely to happen any time soon.	
17.4	<u>Income Generation</u> Dr Hendron advised income generation possibilities for the SIMODONT suite are being investigated, including from outside of NI.	
17.5	<u>Dental Core</u> Dr Hendron overviewed issues with the oversight and filling of the scheme, funding is an issue and a business case has been submitted to address this.	
17.6	<u>Educational Supervisor (ES) Payments (Risk 5)</u> Dr Hendron advised some errors are still being seen, confirming that communication that payments are facilitated by BSO rather than NIMDTA has been largely successful. Dr Hendon confirmed DoH have provided three options to ES's, whom have submitted a response, to which a DoH final decision is awaited. NIMDTA has no input at this stage.	
17.7	<u>Inter Deanery Transfers (IDTs)</u> Dr Hendron advised that 2 specialty trainees have applied for transfers, adding it may be prudent to examine whether national recruitment is increasing the likelihood of increased IDT numbers. Mr Wilson asked if a reason is required. Dr Hendron confirmed a reason is required, however a request cannot be rejected due to the reason given.	
17.8	<u>Pay Disparity for Dental Core Training</u> Mr Graham asked if this is solely with DoH control. Dr Hendron confirmed this is a DoH pay policy. Ms Turner added that any change would require ministerial input, recognising this has been a long running issue. Dr Hendron clarified this impacts on 22 trainees only, which makes it difficult to understand DoH reticence to address the issue.	
18.0	Report from the Senior Governance, IT & Facilities Manager	

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18.1	Members noted the report from Mr McClelland, Senior Governance, IT & Facilities Manager.	
18.2	<u>Risk</u> Mr McClelland noted the Corporate Risk Register is included for information, adding that he is attending the Education Forum in May to further input/review the Education Risk Register.	
18.3	<u>Partnership Agreement</u> Mr McClelland advised work is ongoing to develop the Partnership agreement, noting DoH are looking at finalising ALB Partnership Agreements during October 2023. Mr McClelland added he would like to review the Partnership Agreement at a future Board workshop.	Mr McClelland
18.4	<u>Premises</u> Mr McClelland advised that the business case remains with DoH. Mr Wilson noted the current advertisement of the building by landlord, Mr McClelland confirmed DoH are aware of this development.	
19.0	Correspondence/Reports/Papers received (for information)	
19.1	None.	
20.0	Any Other Business	
20.1	None.	
21.0	Date of next meeting	
21.1	Thursday 25 May 2023, 2pm	

A handwritten signature in black ink, consisting of a large, stylized initial 'A' followed by a cursive name.

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NIMDTA Chair

22.06.23

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Date