



Association of *Directors of Public Health (UK)*

Annual General Meeting

Tuesday 15th May 2012
1:15 p.m.

Victory Services Club, 63 -79 Seymour Street, London, W2 2HF

Minutes

Present:

Diana Grice	ADPH Vice President	DPH, East Sussex
Paul Edmondson-Jones	ADPH Secretary	DPH, Portsmouth City
Mike Robinson	ADPH Treasurer	Joint Medical Director / DPH, Hounslow
Judith Hooper	ADPH Membership Secretary	DPH, Kirklees
Janet Atherton	ADPH President Elect	DPH, Sefton
Houda Al Sharifi	ADPH Member	DPH, Wandsworth
Aliko Ahmed	ADPH Member	DPH, Staffs
Andrea Atherton	ADPH Member	DPH, Sth East Essex
Alison Barnett	ADPH Member	DPH, Medway
Ian Cameron	ADPH Executive Member	DPH, Leeds
Jackie Chin	ADPH Member	DPH, Ealing
Nonnie Crawford	ADPH Member	DPH, South of Tyne and Wear
Frances Cuning	ADPH Member	DPH, North Lincs
Miriam Davidson	ADPH Executive Member	DPH, County Durham & Darlington
Sue Drew	ADPH Member	DPH, Knowsley
Kay Eilbert	ADPH Member	Acting DPH, Waltham Forest
Velena Gilfillian	ADPH Associate Member	Deputy DPH Wandsworth
Isabel Gillis	ADPH Member	DPH, Walsall
Paula Grey	ADPH Member	DPH LPCT /LCC, Liverpool
Julia Groom	Observer	Consultant in Public Health, Sutton and Merton
Alan Higgins	ADPH Member	DPH, Oldham
Sharon Hopkins	ADPH Executive Member	Exec DPH, Cardiff and Wales
Fiona Johnson	ADPH Member	DPH, Wirral
Peter Kelly	ADPH Member	Acting RDPH, North East
Chris Kenny	ADPH Executive Member	DPH, Nottingham
Valerie Little	ADPH Member	DPH, Dudley
Anna Lynch	ADPH Member	DPH, County Durham & Darlington
Peter Marks	ADPH Executive Member	DPH, Leicestershire
Meradin Peachey	ADPH Member	DPH, Kent
Quentin Sandifer	ADPH Executive Member	DPH, Camden
Andrew Scott-Clark	Observer	Director of Health Improvement (KCC)
Melanie Smith	ADPH Member	DPH, Inner Nth West London
Jenifer Smith	ADPH Member	DPH, Isle of Wight
Gerry Taylor	ADPH Member	DPH, Luton
Helen Walters	ADPH Associate Member	Health Improvement Director, Greater London
Judith Wright	ADPH Member	DPH, West Sussex
Nicola Close	Staff	ADPH Chief Executive
Julia Ellis	Staff	ADPH Policy Manager
Caroline Bosworth	Staff	Administrator

Apologies were received from a number of ADPH members

The Meeting was confirmed as quorate



1. Welcome

The Vice President, Diana Grice welcomed members to the 2012 Annual General Meeting.

2. Minutes of Annual General Meeting 2011

The minutes of the Annual General Meeting held on 13th May 2011 were approved.

3. Matters arising from minutes

There were no matters arising from the minutes.

4. President's Annual Report

The Vice President presented the 2011/12 Annual Review. It had been a year of high DPH and ADPH profile and influence and a resultant strong and increasing membership engagement through member involvement / representation, surveys, communications and representative structure. Work had continued on DPH development and the new Masterclass and supporting the transition in England. The Vice President referred to the following highlights of the work programmes:

- **Mutual support and collective effort** – including the annual conference, membership workshops and executive policy workshops held in a variety of locations on a range of topics. Additionally regular e-DPH newsletters had been sent to members and stakeholders, an Honorary Membership scheme is in place and a President's blog, member area e-forum and redesigned website.
- **DPH Development** – including development of master-classes on strategic marketing of public health to local authorities and successful DPH Annual Report Competition; input to a transformational leadership programme for Health and Wellbeing Boards led by the LGA, and joint work with the CMO (England) on an event for DsPH.
- **Advocacy** – including lobbying and meetings with a wide range of stakeholders.
- **Policy** – including representation on many national bodies / committees including NHS Future Forum, Secretary of State's National Stakeholders Forum, DH and LG Transition Group, Social Care Reference Group and PH Engagement Group.
- **Infrastructure and governance** – regular Honorary Officer and Executive meetings had been held and a balanced budget with sufficient reserves had been achieved. A review of the subscription system had been completed; and the election processes completed for President and Vice President 2012-15.

The Vice President paid tribute to Frank Atherton, outgoing President, for his leadership and significant contribution to the Association. Frank had sent his best wishes and apologies, as he had been unable to attend the AGM having recently taken up a new post in Canada.

The Vice President thanked all ADPH members for their input and support. Also, thanks went to all the Honorary Officers, Executive Members, Chief Executive Nicola Close and her staff.

The Annual Report was received and noted.

5. Treasurer's Report

The Treasurer, Mike Robinson, presented the Treasurer's Report and Accounts for 2011/12, which are appended to these minutes.

The Treasurer thanked Nicola Close, Chief Executive and her team for managing the budget effectively in year and Cambridgeshire PCT for their support in hosting the organisation.

The Treasurer's Report and accounts for 2011/12 were accepted.



6. ADPH Subscriptions

The AGM agreed a recommendation that subscriptions for 2012/13 be retained at the same rate as 2011/12 ie:

Ordinary Members (England)

Band	Size of population	Fee
1	< 99,999	£750
2	100k < 249,999	£1,250
3	250k < 499,999	£1,750
4	500k < 749,999	£2,000
5	750k < 999,999	£2,250
6	> = 1m	£2,500

In respect of job-share DsPH, the subscription to be charged as if it was one DPH.

In respect of joint DsPH across two organisations, the subscription to be charged as if it was one LA population.

Ordinary Members (Scotland, Wales, Northern Ireland and British Isles):

Corporate subscription payable by employing organisations or other appropriate organisations based on a population levy similar to English rates.

7. Future Hosting of ADPH

The AGM noted the options for the future hosting of the Association.

8. Constitution

The AGM agreed to the revised wording of the Constitution to reflect the two changes approved as follows:

Amendment to Article 2.1 A - to amend section a) to add the words 'Local Authorities'. This was to reflect public health structural changes in England w.e.f. 1.4.13 within the Health & Social Care Act. The Constitution would be reviewed in 2013 and any further changes arising from enactment of the Health & Social Care Bill would be made (e.g. the removal of 'PCTs').

Amendment to Article 3.1.2 - to add the words 'All Elected Officers and nominees for elected office should be Ordinary members of the Association whose corporate subscription has been paid.' This was to clarify and bring in line the requirements relating to corporate subscriptions and to standing for and holding elected office.

9. Executive Committee Membership

Election of President

In January 2012 nominations were sought from Ordinary members for the position of President for the term 2012 - 2015.

Two nominations were received as follows:

Nominee: John Ashton, DPH Cumbria

Nominee: Janet Atherton, DPH Sefton

A ballot was therefore held amongst Ordinary Members and the results of voting were:



ATHERTON, Janet	70	Elected
ASHTON, John	17	

Electoral Reform Services project managed and administered the ballot on behalf of ADPH.

The number of eligible voters was 176; the total number of valid votes counted was 87; and turn-out was therefore 49.4%.

The term of office for the ADPH President is 3 years and the term therefore runs from the 2012 AGM to the 2015 AGM.

The AGM noted the election of the President 2012-15.

Election of Vice President

Due to a change in role, Chris Packham stood down from his role as ADPH Vice President in December 2011. In accordance with the Constitution, such a vacancy is filled on a temporary basis by co-option from amongst the Executive. Following a nomination process, Executive member Diana Grice was appointed as Interim Vice President, up to the AGM 2012.

In January 2012 nominations were sought from Ordinary members for the position of Vice-President for the term 2012 - 2015.

At the close of the nomination process, one nomination was received for the post of ADPH Vice President, and so the candidate – Diana Grice (DPH East Sussex and serving interim ADPH Vice President) - was appointed unopposed.

The term of office for the ADPH Vice President is 3 years and the term therefore runs from the 2012 AGM to the 2015 AGM.

The AGM noted the election of the Vice President for 2012-15.

Executive membership

The AGM received and noted a report summarising Executive Committee appointments in 2012.

The AGM welcomed new Executive Members appointed in 2011/12:

- Shona Arora – South West
- Peter Marks and Chris Kenny - East Midlands
- Liz Robin - East of England
- Gillian Richardson and Sharon Hopkins - Wales

The AGM noted that members in the following regions would shortly be receiving an invitation to stand for local constituency representative vacancies: North East, North West, West Midlands, Yorkshire & Humber, South East and South Central

The AGM confirmed the annual appointment of the FPH Observer, John Middleton.

10. Any Other Business

There was no other business.

11. Close of AGM

The Vice President thanked members for their participation and closed the meeting at 13:40.



Appendix to 2012 AGM minutes

ADPH Treasurer's Annual Report for 2011/2012 – Dr Mike Robinson

The budget for the Association is hosted by NHS Cambridgeshire and the financial summary presented in this report is, therefore, based on financial statements provided by the PCT. It is internally monitored and externally audited through the PCT regulatory systems.

Income

The main source of income for the Association has been subscriptions from members. The model continues to be an organisational subscription model and income from subscriptions in year was £202,150, up from £139,950 in 2010/11. This increase in subscription income is partly as a result of the 25% increase in subscription rates introduced this year, but also is due to a decrease in the number of non-paying organisations. At present around 81% of English PCTs/LAs subscribe (an increase from 76% in 2010/2011), as does Wales, Northern Ireland and Jersey. Scottish DsPH wish to remain associates of the Association, and do not pay a subscription.

As last year, no Department of Health funding was allocated to the Association in 2011/12 for specific projects, and this is not expected to change in 2012/13 or future years.

An small amount of funding was secured from other services (£868).

Expenditure

The majority of expenditure relates to pay and non-pay costs associated with staffing and the backfill needed for the President to be able to fulfil his role.

Thanks to more virtual and mobile working, expenditure was reduced from £207,203 in 2010/11 to £195,844 in 2011/12. However expenditure in the forthcoming year is expected to increase again, (see below).

Contingency

In order to ensure business continuity during the year, ideally the Association should carry forward sufficient reserves to cover the planned work programme for the year. In addition it should hold a contingency to allow for unexpected costs and any liabilities should the organisation need to be wound up. These reserves should total at least £250,000.

The Association entered the year with an adequate level of reserves at £351,320, and at the end of the year are slightly increased at £358,494. However this represents less than two years annual expenditure, and continuing prudence about expenditure is required given the uncertainties of the current transition .

2012/2013

Income: No change in subscriptions is planned for 2012/13, but may be necessary for 2013/14, if the transition results in more non-paying organisations. It should be noted that current subscriptions are smaller than those paid by local authorities for similar organisations (eg Directors of Adults Services and Directors of Children's Services). The subscription model will be reviewed in 2013 and consideration will be given to alignment with the ADASS and ADCS models.

Expenditure: The expenditure budget for 2012/13 is expected to be approximately £5000 greater than in 2011/12. Pay and staffing associated non-pay costs are expected to remain constant, but there will be additional expenditure to cover the move to new offices and the recruitment of a new member of staff to replace Patricia Leming.

Looking forward to future years

The role for the Association in the "new world" post April 2013 is not expected to be fundamentally different to the status quo, but there may not be the same opportunities for income generation which have supplemented subscription income in the past.

We should be prepared to take action early if our long term financial viability is under threat. Even if external funding for specific projects such as that received in recent years from the Department of Health can be secured, this will be linked to delivery of specific projects or programmes and cannot be expected to generate any surplus towards general infrastructure.

Various sources of additional income have been considered in the recent years, in particular sponsorship of our conference, but there are no firm proposals in this area.



The future costs of hosting our core administrative functions are likely to increase. At present offices, HR and finance are provided by NHS Cambridgeshire at cost, but whether a similar arrangement can be negotiated from April 2013 when the PCT is abolished is not yet known.

Projection of when our reserves might fall below the critical level of £250,000 is difficult. The Honorary Officers will regularly review risks to our income and increase in our expenditure during the next 12 months. A clearer long term picture should emerge for reporting to members at the 2013 Annual General Meeting, when the costs of our accommodation and host functions should be known.

Finally I would like to congratulate Nicola Close, Chief Executive and her team for managing the budgets to generate a surplus in year and to thank NHS Cambridgeshire for their support in hosting the organisation during 2011/12.

Budget statement 2010-2011 and 2011-2012

		2010-2011	2011-2012
Income			
	Subscriptions	-£139,950	-£202,150
	Project funding	£0	£0
	Misc income	-£1,160	-£868
	Total income	-£141,110	-£203,018
Expenditure			
Staffing	Salaries	£113,191	£114,552
	Backfill for President	£36,000	£36,000
	Agency / temporary	£6,510	£14,290
		£155,701	£164,842
Infrastructure	Rent and hosting charges	£9,000	£6,500
	IT	£0	£198
	Comms	£447	£999
	Meetings	£661	£900
	Staff development	£476	£434
	Staff expenses	£3,842	£1,526
	Advertising for staff	£0	£0
	Stationery, Journals etc	£574	£263
	Legal fees	£6,788	£10,820
		£21,788	£10,820
Membership services	Web-site	£3,014	£6,572
	Events	£7,109	£9,982
	Ann Report Comp	£2,250	£2,250
	DPH Devt	£325	£0
		£12,698	£18,804
Policy and Advocacy	Policy devt	£16,732	£1,378
	Advocacy	£284	£1,378
		£17,016	£1,378
	Total spend	£207,203	£195,844
	Surplus / deficit	£66,093	-£7,174
Reserves			
Start of year	Contingency reserve	-£250,000	-£250,000
	C/over from previous yr	-£167,413	-£101,320
		-£417,413	-£351,320
End year	Contingency reserve	-£250,000	-£250,000
	Carryover to next yr	-£101,320	-£108,494
		-£351,320	-£358,494