

**Minutes of the Seventy-fourth Meeting of NHS Blood and Transplant  
held at 9.00am on Thursday 28 July 2016 at the  
Royal College of Obstetricians and Gynaecologists  
27 Sussex Place, Regent's Park, London NW1 4RG**

Present:            Mr J Pattullo            Mr J Monroe  
                      Mr R Bradburn        Mr K Rigg  
                      Ms L Fullwood        Mr C St John  
                      Mr R Griffins         Mr I Trenholm  
                      Ms S Johnson         Prof P Vyas  
                      Mr P Lidstone        Dr H Williams  
                      Dr G Miflin            Mr S Williams

In attendance:    Mr I Bateman         Ms T Norman  
                      Mr D Evans            Ms K Phillips  
                      Mr A Powell           Ms J Minifie  
                      Mr M Stredder        Mr O Roth

**16/74        APOLOGIES AND ANNOUNCEMENTS**

Apologies had been received from Ms Austin. Apologies had also been received from Scottish Government colleagues and from Mr Webb. He was represented by Ms Norman.

The Board wholeheartedly thanked Jane Minifie, who was retiring, for her support over many years. She said it had been a privilege to have had the opportunity to work with Board members.

The Board welcomed Oliver Roth who would be taking over as Executive Assistant to the Chief Executive and Board Secretary from 1 August. Mr Roth is one of the first members of our new Management Graduate Scheme.

Mr Pattullo said that a discussion on progress on Deemed Consent in Wales would be included on the agenda at the next meeting.

**16/75        DECLARATION OF CONFLICT OF INTEREST**

There were no conflicts of interest.

**16/76        BOARD 'WAYS OF WORKING'**

The 'Ways of Working' were noted.

**16/77        MINUTES OF THE LAST MEETING**

The minutes of the previous meeting were agreed.

**16/78        MATTERS ARISING**

Paper 16/55 was noted.

16/79 **PATIENT STORIES**

Dr Mifflin presented a tale of two pregnancies with different outcomes for two women with Sickle Cell Disease. This highlighted the fact that the best possible care by all involved does not always succeed in saving lives.

The stories also highlighted the need for more donors from Black, Asian and other ethnic groups. We are trying in a number of ways to attract more donors from these groups and will continue to use patients in this endeavour. There was a discussion about the continuing issue of engagement with the BAME donor population. This is a priority and work to address it is being led by Léonie Austin.

16/80 **CHIEF EXECUTIVE'S REPORT**

The Board received paper 16/56 and Mr Trenholm drew attention to the key issues. He also summarised the position on the implications of 'Brexit'. While there was no immediate impact he said that Mr Bateman was the Executive lead on Brexit and was preparing a report for the DH to identify issues relevant to NHSBT.

It was agreed that Mr Bateman would share the draft report with the Board. It was also agreed that Mr Bateman would join the National Administrations Committee for a period. The Board requested regular updates on the position.

**IB**

It was also noted that the process of leaving the EU may provide an opportunity to streamline some bureaucratic arrangements and it was important for us to be very clear of our requirements when we engage with the Minister's office.

Mr Trenholm reviewed the recent Stakeholder Meeting. The session had focussed on improving engagement with the BAME community. There is still work to be done in this area and Ms Austin is leading an initiative to develop an agreed programme of further work.

16/81 **BOARD PERFORMANCE REVIEW**

The Board received paper 16/57. It was noted that DTS was currently shown at red in error and should be shown as amber. The main issues are the challenges presented by an overall declining organ donor pool, and possible increase in non-proceeding donors, the effect on productivity of the declining demand for blood and, in particular, the difficulty in maintaining O negative stock levels.

Mr Bradburn said the Board would be asked to approve proposals for the blood price for 2017-18 at the next meeting, prior to the

NCG meeting in November. To provide the context for these proposals he presented an update on the financial plan for 2016-21. This included options to address the income gap and noted overall savings to the NHS. Mr Bradburn was asked to circulate this to the Board. It was agreed that he would provide a more detailed version, containing specific details of cost savings and delivery dates, for the discussion in September.

**RB**

16/82

## **CORE SYSTEMS MODERNISATION (CSM) PROGRAMME BUSINESS CASE**

Mr Lidstone introduced this item. Mick Burton, Accountable Executive Core Systems Modernisation, attended to present the Business Case and Bill O'Neill, Chief Technology Officer, also attended.

Mr Monroe said he and Prof Vyas had met with Mr Burton and Dr O'Neill to review the business case. Mr Monroe said the progress made on the project over the last nine months satisfied him that the programme is achievable, although the nature of the project meant it was still not without risk. He confirmed his support for the Business Case.

The paper was well received and the Board (i) approved the full funding of the £27.6m business case in principle. They also authorised the first spend of £7.6 million for the first implementation phase (three programme increments), with the expectation that further authorisation would be sought in due course. This will result in the delivery of the blood donor facing solution ready for deployment and progress with the neo-natal platelet pilot and TES solution by March 2017; (ii) noted the intent to bring an updated business case to the January 2017 Board meeting that will reflect progress and learning to date and will seek approval for the next phase of the programme from April 2017 onwards; and (iii) supported the submission of the business case to the Department of Health (DH) and Government Digital Services (GDS).

These decisions were made on the basis of the following points:

- The 25% contingency figure will be kept under review;
- the £9m for the Target Operating Model (TOM) is not agreed at this time; it is viewed as a separate enhancement which will need to be justified by cost savings;
- there is a need to avoid any lag in the DH/GDS approval process as this will incur unnecessary additional cost; Mr Powell to inform Mr Trenholm and the Board of any delay;
- it was agreed for Peter Lidstone to develop a metric to track organisational readiness for future management of the project;
- there is a need to be watchful of the ICT function complement which is currently running with 29 vacancies;
- a positive report on our interface with MHRA from Mr Bateman;

**AP**

- a request for the use of plain English in future papers;
- the need for the Board to have a sufficient understanding of ICT and technology. AP to organise a briefing session for NEDs and EDs in due course.

**All**

**16/83 DONOR REGISTRATION TRANSFORMATION FINAL REPORT**

John Richardson, Head of Health Informatics, attended to present the report and a demonstration of the DonorPath application.

In response to a question, Ms Johnson assured the Board that significant specific lessons had been learned from the difficulties experienced at the beginning of the project.

The Board approved £195k additional funding by the Transformation Programme Board (TPB) to support year one development and maintenance costs.

The report was very well received and the Board requested that the work be formally published and well publicised.

**SJ**

**16/84 CLINICAL GOVERNANCE REPORT**

Dr Mifflin presented paper 16/60, drawing attention to the main points.

Mr St John questioned whether the “opportunity to discuss any concerns” element of the Montgomerie recommendations was adequately covered in the blood donation consent form and Dr Mifflin said she would follow that up.

**GM**

Dr Mifflin also reported on the recent European Conference on Donor Management which had been jointly sponsored by NHSBT and the University of Cambridge. Very good feedback on the event had been received and she summarised some of the key highlights.

**16/85 DATA SECURITY AND CONSENT FOR DATA SHARING**

Mr Powell presented paper 16/61. The Board noted the anticipated NHSBT position in relation to the National Data Guardian and Care Quality Commission data security and sharing reports. The Board asked to receive a further report when the requirements have been clarified.

The Board agreed to hold a seminar later in the year to improve their awareness of the requirements for data security and consent for data sharing.

**AP GM**

16/86 **INTERIM REPORT – TRANSCRIPTION ERRORS IN DTS SPECIALIST SERVICES**

Dr Williams presented paper 16/62. The Board (i) noted the progress made in introducing an interface between one of the testing platforms and the reporting system which will obviate the need for manual transcription in reporting deceased donor HLA types to ODT; and (ii) noted the work planned and in progress to further reduce the opportunities for human error in Specialist Services. The Board were encouraged by the transparency of the report and particularly welcomed the broad scope of the evaluation and the use of process engineering techniques.

16/87 **HEALTH, SAFETY AND WELLBEING SENIOR MANAGEMENT REVIEW 2015/16**

Mr Evans presented paper 16/63 and the contents were noted.

16/88 **BUSINESS CONTINUITY REVIEW**

Richard Rackham, Assistant Director – Governance & Resilience, attended to present paper 16/64. The Board noted the progress against 2015-16 objectives; noted the progress against the 2016-17 objectives; and noted issues and developments in Business Continuity.

16/89 **PROCUREMENT FUNCTIONAL REVIEW**

Mr Bradburn was joined by Eugene Cooke, National Head of Procurement, in presenting an overview of the work of the Procurement Function. The Board were assured that this area is being well managed.

Mr Bradburn was asked to circulate the slides to the Board. Mr Bradburn offered to provide individual NEDs with a short training session when they are visiting Centres if this would be helpful.

**RB**

16/90 **MINUTES OF THE NATIONAL ADMINISTRATIONS COMMITTEE MEETING HELD ON 12.5.16**

The minutes were noted.

16/91 **MINUTES OF THE MEETING OF THE R & D COMMITTEE HELD ON 19.5.16**

The minutes were noted.

16/92 **SUMMARY OF THE MINUTES OF THE MEETING OF THE REMUNERATION COMMITTEE MEETING HELD ON 13.6.16**

The summary of the minutes was noted.

16/93 **MINUTES OF THE GOVERNANCE AND AUDIT COMMITTEE MEETING HELD ON 14.6.16**

The minutes were noted.

16/94 **REPORTS FROM THE UK HEALTH DEPARTMENTS**

Paper 16/69 was noted. It was agreed that in future the DH also will provide a written report.

Ms Norman provided an update on personnel changes at the DH and apologised for the delay in the publication of the Triennial Review which had been caused by protocols around the change of Minister.

**TN**

16/95 **ANY OTHER BUSINESS**

There was no other business.

16/96 **DATE OF NEXT MEETING**

The next meeting will be held on Thursday 29 September at the Golden Jubilee Conference Hotel, Beardmore Street, Glasgow G81 4SA. Members of the public are welcome to attend. Mr Pattullo asked Mr Roth to arrange for the Communications team to provide the Board with a briefing on the hospital. There will be a dinner for invited stakeholders on the evening of Wednesday 28 September.

**OR**

16/97 **RESOLUTION ON CONFIDENTIAL BUSINESS**

The resolution, 16/70, was agreed.

16/98 **ANNUAL REPORT AND ACCOUNTS**

Paper 16/71 was noted.

16/99 **RAISING CONCERNS AT WORK (WHISTLEBLOWING)**

Paper 16/72 was noted.

16/100 **ANNUAL REPORTS FROM THE BOARD COMMITTEES**

Paper 16/73 was noted.

16/101 **REGISTER OF SEALINGS**

Paper 16/74 was noted.

16/102 **FORWARD AGENDA PLAN**

Paper 16/75 was noted.

