

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

Present: Mr J Pattullo Mr P Lidstone
 Mr A Blakeman Mr J Monroe
 Mr R Bradburn Mr K Rigg
 Dr C Costello Mr I Trenholm
 Ms L Fullwood Dr H Williams
 Mr R Griffins Mr S Williams
 Ms S Johnson Dr L Williamson

In attendance: Ms L Austin Ms S Baker
 Mr I Bateman Mr G Brown
 Mr D Evans Ms K Phillips
 Mr A Powell Mr E Webb
 Mr M Stredder Ms J Minifie

16/01 **APOLOGIES AND ANNOUNCEMENTS**

Mr Pattullo welcomed Sam Baker from the Scottish Government who would be attending some future Board meetings while Mr Brown is acting in a more senior role.

Apologies had been received from Ms Evans.

Mr Pattullo said that Dr Felicity Harvey, Director General at the DH, had let him know of her intention to retire later in the year.

Mr Pattullo said that he expected to be able to announce the appointment of our two new Non-Executive Directors shortly.

Mr Pattullo said his own appointment as Chairman of NHSBT had been extended, for a year from June 2016.

16/02 **DECLARATION OF CONFLICT OF INTEREST**

There were no conflicts of interest.

16/03 **MINUTES OF THE LAST MEETING**

The minutes of the previous meeting were agreed.

16/04 **MATTERS ARISING**

Paper 16/02 was noted.

The Board ratified the Chairman's Action to appoint Ernst and Young to provide professional services support to complete the target operating model, blueprint business case and programme set-up for the Core Systems Modernisation (CSM) Programme as

set out in paper 16/03. The Chairman had consulted with three Non-Executive Directors, Mr Blakeman, Mr Griffins and Mr Monroe, all of whom had supported the Action.

It was noted that the statement in paper 16/03 that NHSBT's Standing Orders require the Chairman to consult three Non-Executive Directors was incorrect. The requirement is for two Non-Executive Directors.

16/05 **BOARD 'WAYS OF WORKING'**

The Board endorsed the new document particularly the alignment with NHSBT values. The Board agreed to review its performance at the end of each meeting in the context of how they might do things differently next time.

16/06 **NATIONAL ORGAN RETRIEVAL SERVICE REVIEW IMPLEMENTATION**

Karen Quinn, Assistant Director UK Commissioning, attended to present paper 16/04.

Ms Johnson said that Ms Quinn and her team had engaged with clinical colleagues extensively about the implementation process and in extreme detail. Ms Johnson also emphasised that the new arrangements would mean no less capacity for retrieval.

Mr Trenholm said he supported the proposal on the basis that recommendations had been arrived at via a sophisticated model and there was a clear trigger point to review and consider additional resources. Overall he felt this represented an acceptable level of risk.

Ms Fullwood said she was impressed by the quality of the modelling and asked for confirmation that the new model would cover potential increases in retrievals driven by the changes in legislation in Wales. Ms Quinn said that the modelling had been done on the basis of requirements for forecasted 2020 capacity.

Mr Rigg said the NORS Review based its recommendations on historical data for retrieval activity and modelled for future increases and he therefore believed it to be safe.

Mr Monroe congratulated the team on the level of care and attention with which the consultation had been addressed. He confirmed his robust support for the proposal on the basis that additional retrieval capacity would be purchased if needed in the future.

Mr Bradburn highlighted the need to be vigilant about variable costs and the impact of the new structure, allied to volume and location of retrieval activity, on retrieval patterns and associated travel costs.

Mr Webb said it would be important to keep the Minister informed and Ms Johnson pointed out that Triona Norman is a member of the implementation group.

The Board noted the process being followed to implement the NORS Review and agreed to the reduction in on call cardiothoracic retrieval team capacity and short term cost pressure.

16/07 **CHIEF EXECUTIVE'S REPORT**

Mr Trenholm presented his report, 16/05, highlighting the key points.

There was a discussion about the risk to NHSBT from flooding and other events of a catastrophic nature but it was agreed that the more pertinent area of focus currently should be the significant major change to our IT systems.

It was agreed that Dr Williams would circulate a position paper to the Board offline which would document our capability for response to incidents, including a mass terrorist attack, and any further action we need to take.

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16/08 **BOARD PERFORMANCE REVIEW**

Mr Bradburn provided an overview of the position as detailed in paper 16/06.

Mr Rigg questioned the amber status of the CRM Platform and the ODT National Hub projects. Mr Powell explained the reason for a slight delay on the Platform and said it would be quickly back on track. There had been a knock on effect on the Hub.

Mr Monroe questioned the amber status of the Planning & Control System. Mr Lidstone said this project had suffered some lack of progress but was catching up and he expected it to show green next month.

Mr Blakeman questioned whether the amber position for SCDT sales income was totally related to strategy and whether operational issues were a factor. This matter will be considered when the Stem Cell Strategy is discussed at the July Board meeting.

16/09 **CLINICAL GOVERNANCE REPORT**

Dr Williamson presented paper 16/07. The main issues were the Serious Incident Requiring Investigation, SIRI INC64666 which involved the transfusion of an incorrect product to a baby requiring exchange transfusion, and SIRI INC6390 which is the subject of the next item on the agenda.

Dr Williamson also highlighted:

- (i) The unsatisfactory Internal Audit report on the use of Personal Identifiers in the Duty Office. A number of actions had already been taken by Ms Johnson to rectify. It was noted that Mr Bateman would be taking a plan to address human behavioural factors to the GAC in March.
- (ii) The project to implement HEV testing and confirmation that SaBTO will be reviewing the need to provide this product for additional patient groups once new data is available.
- (iii) Paper, 16/19, relating to the Governance Review of Care, in the information section of the agenda.

Mr Lidstone asked the Board to note that the Executive had agreed to defer implementation of the reduction in the level of HTLV testing, as endorsed by SaBTO, from April to October 2016. This was because the risks associated with making these additional changes before the underlying system changes were secure were considered too great. Cost savings would be delayed slightly as a result and there are no safety implications.

Dr Williamson also referred to the Zika virus and said that in order to protect the blood supply JPAC had already approved an extension to the travel area for the deferral of donors. A JPAC committee (SACTTI) was reviewing the risk to blood, stem cells and organs.

Finally, Dr Williamson said she had just heard that the potential new supplier of Austrian plasma had withdrawn from the contract process. This will be investigated further and, if appropriate, the DH will be informed.

16/10

UPDATE ON SIRI INC6390: REVIEW OF DECEASED ORGAN DONOR TYPING PROCESSES

Dr Williams presented paper 16/08. The Board scrutinised the completed and ongoing actions in light of the risks and issues associated with this serious quality incident.

Dr Costello asked specific questions about staffing levels and checking processes which Dr Williams answered.

Mr Trenholm emphasised that the potential for a technical solution to replace the manual transcription processes had been investigated immediately following this incident but that, given the different nature of the systems in each laboratory, the only IT solution involved the implementation of multiple interfaces which presented an even greater risk and would take time to implement and test, set against a back drop of an IT change freeze. Introduction of new laboratory typing technology which had recently become available was being fast-tracked. He added that at the

same time the need to reinforce the disciplines required to operate the current system was well recognised.

Dr Williamson said a member of the ICT team had been involved in the investigations into this SRI from the outset and it had been agreed that this would be routine for all future SRIs. Additionally, there will be an ICT representative on the CARE Committee once the new Chief Technology Officer is in post.

16/11 **DEVELOPMENT OF RECOMMENDATIONS FOR USE OF HEV-NEGATIVE BLOOD COMPONENTS**

Dr Williamson presented paper 16/09. The Board noted the chronology of events; the steps taken to improve future decision-making and consultation; and the on-going limitations of clinical information regarding detailed usage of blood components. Mr Pattullo suggested to Mr Trenholm that it would be useful to look at the underlying process issues in greater detail at the March Board meeting.

16/12 **COMMUNICATIONS FUNCTIONAL REVIEW**

Gary Hughes, Assistant Director Corporate Communications, and Ceri Rose, Assistant Director Digital & Marketing, joined Ms Austin to present the Communications function's support of NHSBT's Strategy. The presentation and paper 16/10, which provided a functional review of the activities of the Communications Directorate, were well received.

16/13 **LOGISTICS FUNCTIONAL REVIEW**

Paul Taylor, Assistant Director Logistics, joined Mr Lidstone to present the Logistics function's support of NHSBT's strategy. The presentation and paper 16/11, which gave an overview of the Logistics function, were well received. Mr Trenholm said that the excellent progress being made was very much the result of Mr Taylor's personal contribution.

The Board agreed to receive a further Review of the Logistics function in a year's time.

16/14 **PUBLIC BEHAVIOUR STRATEGY UPDATE**

Ms Austin presented paper 16/12. The Board noted the progress to date and the priorities for 2016/17; and noted that the Sustainable Funding Group support the investment of £1.2m in the Yes I Do behaviour change campaign and that this will be included in the ODT budget.

16/15 BUSINESS CONTINUITY UPDATE

Dr Williams presented paper 16/13. The Board noted the progress against the 2015/16 objectives and agreed the objectives proposed for 2016/17.

16/16 YOUR VOICE – CHECK UP! EMPLOYEE SURVEY REPORT

Mr Evans presented paper 16/14. The Board noted the outcome of the Survey; the three areas for continued action and improvement; and the proposal to undertake a full survey in November 2016.

16/17 MINUTES OF THE GOVERNANCE AND ASSURANCE COMMITTEE MEETING HELD ON 20.11.15

The minutes were noted.

16/18 SUMMARY OF THE MEETING OF THE REMUNERATION COMMITTEE HELD ON 24.11.15

Paper 16/16 was noted.

16/19 REPORTS FROM THE UK HEALTH DEPARTMENTS

Paper 16/17 was noted.

16/20 ANY OTHER BUSINESS

In order to enable one of the Non-Executive Directors to attend the May Board meeting Mr Pattullo proposed that this should take place on Wednesday 25 May, with the Development Day following on Thursday 26 May. Mr Pattullo asked UK Health Department colleagues to let him know within the next few days if the change of date would cause them difficulty.

16/21 DATE OF NEXT MEETING

The next meeting will be held on Thursday 31 March at The Marriott Hotel in Cardiff. Members of the public are welcome to attend. The meeting will be preceded by a dinner for invited stakeholders on the evening of Wednesday 30 March.

Mr Williams left the meeting at this point.

16/22 RESOLUTION ON CONFIDENTIAL BUSINESS

The resolution, 16/18, was agreed.

16/23 GOVERNANCE REVIEW OF CARE

Paper 16/19 was noted.

16/24 **FORWARD AGENDA PLAN**

Paper 16/20 was noted.