

**Minutes of the Sixty-eighth Meeting of NHS Blood and Transplant
held at 9.00am on Thursday 30 July 2015 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 A Blakeman Ms J Pearson
 Mr R Bradburn Mr K Rigg
 Dr C Costello Dr C Ronaldson
 Ms L Fullwood Mr I Trenholm
 Mr R Griffins Mr S Williams
 Dr A Hadley Dr L Williamson
 Ms S Johnson

In attendance: Ms L Austin Ms C Lewis
 Mr I Bateman Mr E Webb
 Mr D Evans Sir Keith Pearson
 Mr A Powell Mr A McMordie
 Mr G Brown Ms J Minifie

15/82 APOLOGIES AND ANNOUNCEMENTS

Mr Pattullo welcomed Sir Keith Pearson and Adam McMordie, who are leading NHSBT's Triennial Review; Louise Cheung, who was attending as part of her induction process, and two members of the public, Tony Orton and Nicky Hogarth.

Apologies had been received from Mr Stredder, Dr Williams, Mr Campbell and Dr Jones. Mr Pattullo welcomed Caroline Lewis, representing Dr Jones, and Jane Pearson and Andrew Hadley who were representing Mr Stredder and Dr Williams.

The Board congratulated Mr Powell who, since the last meeting, had been appointed as Chief Digital Officer.

15/83 DECLARATION OF CONFLICT OF INTEREST

There were no conflicts of interest.

15/84 AGREED WAYS OF OPERATING FOLLOWING THE BOARD DEVELOPMENT DAY

These are in the process of being reviewed and will be considered in September. Mr Pattullo highlighted point (iv) *working at all times with colleagues in a challenging but supportive manner* which he considered particularly relevant for this agenda.

15/85 MINUTES OF THE LAST MEETING

The minutes of the previous meeting were agreed.

15/86 MATTERS ARISING

Paper 15/51 was noted.

15/87 RESPONSE TO NHS SCOTLAND'S REVIEW OF THE INCOME GENERATION AGREEMENT WITH NHSBT

Ms Johnson presented paper 15/52 and emphasised that this represented the views of clinical colleagues as well as those of NHSBT.

The Board did not agree with the proposal to change the commissioning arrangements for SORT and supported the proposal to retain operational management of the Specialist Nurses by NHSBT. It was agreed that Ms Johnson would lead on compiling a letter in formal response to the consultation which explained the views of NHSBT and the clinical community, but which also sought to retain the long term positive working relationship we have with the teams in Scotland. The letter would be reviewed by Ms Austin and Mr Trenholm and be sent in his name or that of the Chairman.

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15/88 INFRASTRUCTURE HOSTING PROJECT – DUE DILIGENCE STAGEGATE REVIEW

Mr Powell presented paper 15/53 which had been reviewed, and was supported by, Mr Monroe and Mr Williams.

In response to questions, Mr Powell explained that the three to four week period when we would be without geographical resilience with Colindale running as a single point of failure was a maximum estimate and that not all network components would be at risk at the same time. All other migration approaches other than the expensive complete build ahead option would involve an extended period of downtime for the systems. Mr Trenholm added that work had been taking place on the servers over several months to make them as stable as possible before this work commences; an IT change freeze would come into effect in the Autumn; and well used plans are in place.

The Board recognised that the proposal carried risk both in terms of the move itself and the proximity of the new data centres to each other. The board also felt that attempting to change plans and use Crown Hosting for the data centres at this point in the project added in an additional and unnecessary risk. The need under the Crown Hosting proposal to have both server rooms on the same physical site was felt by the board to be an unacceptable risk.

Whilst recognising that the proposal carried risk it was a reasonable balance of operational risk and cost. The Board (i) agreed to proceed with SCC for the supply of migration and data centre co-location hosting services; (ii) agreed to SCC Lyndon Place as the second data centre in order to mitigate Pulse operational risks; and (iii) accepted the recommended “data centre at a time” migration approach which maximises service availability but involves managed period of loss of geographical resilience.

15/89 **TRIENNIAL REVIEW**

Mr McMordie summarised the purpose of the Triennial Review which is primarily to share learning amongst the ALBs and the DH. His comments were endorsed by Sir Keith Pearson who thanked the Board for welcoming him to the meeting.

Mr McMordie also explained the purpose of the Accelerated Access Review which would focus on the NHS's use of data and genomics for the benefit of service users.

Mr Pattullo thanked Sir Keith and Mr McMordie for taking the time to address the Board and said he and Mr Trenholm saw the review as a helpful opportunity to accelerate some of our added value projects.

15/90 **ORGANISATIONAL WORKFORCE DEVELOPMENT FUNCTIONAL REVIEW**

The Board had received paper 15/55 and Sue Hopgood, Associate Director HR – Organisation and Workforce Development, attended this item to present an overview of the Organisation and Workforce Development (OWD) function.

The overview was very well received by the Board who acknowledged the benefits to NHSBT and our contribution to training and development across the ALB community. They endorsed the direction of travel for the OWD function.

Mr Blakeman asked for benchmarking data that could provide insight on the level of NHSBT spend versus other organisations.

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15/91 **CHIEF EXECUTIVE'S REPORT**

The Board received paper 15/57 and Mr Trenholm drew attention to the key issues.

15/92 **MODERNISATION OF MANUFACTURING IN NHSBT**

A group of seven members of staff from the Sheffield and Newcastle centres had travelled to the meeting to present their case against the proposal to consolidate manufacturing onto three sites in Manchester, Filton and Colindale. The Board considered many of the points well made; they asked questions of the group and there were further discussions with them during the break.

The group were also concerned about the future of both the Sheffield and Leeds sites if the consolidation proceeded. Mr Trenholm said a detailed review of these two sites was commencing and he expected it to report at the end of the year. He said he was confident that NHSBT would continue to need a presence in the area.

Stuart Penny, Assistant Director for Operations - Blood Supply, attended for this item and he and Dr Ronaldson presented paper 15/56. The purpose of

the proposal was to improve current operational performance and future-proof operations. Dr Ronaldson emphasised that the proposal was in no way a reflection on the capability or the commitment of the staff at Sheffield and Newcastle.

Dr Williamson outlined the clinical risk assessment work which had been done in relation to the proposal. Referring to previous experience with other consolidations, she said that further work would focus on how to deliver specialist products, not whether it was possible to do so.

Mr Trenholm thanked the group for coming to the meeting. He also thanked and commended union and other colleagues for the way they had conducted themselves throughout the process which had without exception been with passion and professionalism. He also emphasised that the proposals did not reflect a judgement on performance.

Mr Trenholm said the Board had a responsibility to strike a balance between its duty to patients and its duty to taxpayers. While there was further detail to be worked through given the strength of our previous experience and a well laid out proposal he felt that there was sufficient information to hand for the Board to make a decision. Mr Trenholm recommended that the Board agree the proposal. The Board would receive regular updates on the work and would be made aware of the point of no return in advance.

The Board concluded unanimously that they supported work to invest in and further consolidate manufacturing operations including: closing manufacturing departments in Sheffield and Newcastle and transfer of the activity to Manchester; investing in the modernisation of manufacturing facilities and operations in Manchester; moving to 24/7 working in the Manchester manufacturing department; and changes within Hospital services in Manchester, Sheffield and Newcastle to support the new operating model ensuring we continue to meet patient need.

15/93 **BOARD PERFORMANCE REPORT**

Mr Bradburn presented the report 15/58. The Board noted the main points and received answers to some questions. They noted that the Transformation Programme would be reviewed at the September meeting And the SCDT Strategy would be reviewed in July 2016.

Mr Bradburn noted that NHSBT was ahead of budget at Q1. The quarterly reforecast currently indicated a deficit of ca £1.5m for the year but that, due to timing of spend on large transformation projects, the actual outturn for the year could be in the range of £5m surplus to 2m deficit. As such the formal forecast had been retained at break even.

Mr Bradburn drew the Board's attention to paper 15/69 in the information section which summarised the approval of the 2014/15 Annual Report and Accounts. He commended the finance team and other colleagues for an ongoing record where few/no management letter points or accounts adjustments have been made to management accounts/draft accounts during the annual audit over many years.

15/94 CLINICAL GOVERNANCE REPORT

Dr Williamson presented paper 15/59. She said that since the report had been issued the written conclusion from the inquest on the death of a recipient of a mismatched heart had been received. The conclusion stated that while the balance of probabilities was that the mismatched heart was the cause of death, this had resulted from a single error and not because our procedures are inadequate. Therefore no Prevention of Future Deaths recommendations were issued and Article 2 of the Convention of Human Rights will not be invoked.

The Board received the Francis Report Action Plan Update 15/60 and noted progress. They agreed to receive a final report in March 2016 rather than January.

The Board received paper 15/61 which covered points for reflection following the report from the Penrose Inquiry and this was well received.

15/95 MINUTES OF THE GAC MEETING

The minutes were noted.

15/96 MINUTES OF THE EXPENDITURE CONTROLS COMMITTEE MEETING

The minutes were noted.

15/97 MINUTES OF THE R&D COMMITTEE MEETING

The minutes were noted.

15/98 SUMMARY OF THE MEETING OF THE REMUNERATION COMMITTEE

The summary was noted.

15/99 REPORTS FROM THE UK HEALTH DEPARTMENTS

Paper 15/66 was noted. Ms Lewis thanked NHSBT for our work to develop the new Organ Donor Register.

15/100 ANY OTHER BUSINESS

There was no other business.

15/101 DATE OF NEXT MEETING

The next meeting will be held on Thursday 24 September in Belfast.

15/102 RESOLUTION ON CONFIDENTIAL BUSINESS

The resolution, 15/67 was agreed.

15/103 ANNUAL REPORTS FROM THE BOARD COMMITTEES

Mr Pattullo commended paper 15/68 to the Board and this was noted.

15/104 2014/15 ANNUAL REPORT AND ACCOUNTS

Paper 15/69 was noted.

15/105 REGISTER OF SEALINGS

Paper 15/70 was noted.

15/106 FORWARD AGENDA PLAN

Paper 15/71 was noted.