

**Minutes of the Sixty-fifth Meeting of NHS Blood and Transplant
held on Thursday 29 January 2015 at the
Royal College of Obstetricians and Gynaecologists
27 Sussex Place, Regent's Park, London NW1 4RG**

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

In attendance: Ms L Austin Dr D Kennedy (part meeting)
 Mr D Evans Mr G Brown
 Mr A Powell Ms J Minifie
 Dr C Jones

15/01 APOLOGIES AND ANNOUNCEMENTS

Apologies had been received from Mr Monroe, Ms Fullwood and Mr Campbell.

Mr Pattullo welcomed Helen Jones from the DH.

15/02 DECLARATION OF CONFLICT OF INTEREST

There were no conflicts of interest.

**15/03 AGREED WAYS OF OPERATING FOLLOWING THE BOARD
DEVELOPMENT DAY**

Mr Pattullo drew the Board's attention to point (iii) to approach all issues with a positive and dynamic mindset. He said the list would be reviewed during the Board Development day in May.

15/04 MINUTES OF THE LAST MEETING

The minutes of the previous meeting were agreed.

15/05 MATTERS ARISING

Paper 15/01 was noted. Mr Trenholm said he had had a productive discussion with Tamara Finkelstein. She will be convening a meeting of ALB Chief Executives with a view to creating coalitions where practicable.

Dr Costello said she had not yet received feedback on the GAC discussion about staffing levels in CMT and Mr Blakeman and Dr Williams agreed to follow this up with her.

AB HW

15/06 DONOR REGISTRATION TRANSFORMATION BUSINESS CASE

Ms Johnson presented paper 15/02. For clarity she said some

items in the original project - total cost £3.135m - had been de-scoped from the new business case - total cost £4.415m. The additional funding request was for £2.1m rather than the £1.3m stated in the paper.

Ms Johnson said the key issues were

- much more confidence in the ability of the new supplier;
- the requirement for DH clearance; Mr Powell is meeting with them on 2 February;
- the ability to specify extremely robust agile development through the programme management;
- a low risk of challenge on the procurement process;
- the Intellectual Property rights will be owned by NHSBT.

The Board noted that the project would be given priority for ODT funds in case of any funding gap in 2015/16.

The Board approved the new Business Case for delivery of the Donor Registration Transformation project including changes to the scope of the project and consequent changes in cost; the change of supplier of the Donorpath application and increase in cost for this element of the project; and the procurement route.

It was agreed that should there be any further difficulties with the project the Board would be informed quickly.

15/07 **NEW NHSBT DESKTOP – 'LIVERPOOL BETA TRIAL'**

Mr Powell presented paper 15/03. The Board supported commencement of a 'Beta Trial' of the new desktop at Liverpool. The Board supported the rollout and ongoing support of the Beta Trial using a specialist Project Team until a Detailed Business Case for full deployment is approved. The Board agreed to receive the Detailed Business Case for the full rollout of the new desktop in September 2015. Concerns were raised by several Board members about the apparent high specification/high cost nature of the pilot and it was agreed that the Business Case would contain benchmarking data, an indication of the premium cost versus a basic installation, reassurance that a low unit price has been achieved for the devices and that we did not deploy more devices than we need. The Board also considered the risk of delivering the pilot at a single site but Mr Powell reassured the Board that existing equipment would remain on site throughout the trial.

15/08 **BLOOD PERFORMANCE REVIEW**

Laura Hontario del Hoyo was present for this item.

Dr Ronaldson gave a presentation which showed that Blood Supply is on track to deliver the strategic initiatives approved as part of the Blood Donation Strategy and that planning to deliver the Blood Supply 2020 strategy has commenced. This was well received by the Board and they noted the forthcoming launch of the Blood 2020 strategy as an opportunity to pursue increased engagement with

hospitals and improvement in blood collection productivity.

15/09 **FUNCTIONAL REVIEW: CLINICAL DIRECTORATE
WORKFORCE STRATEGY 2015-20**

The Board received paper 15/04 which was supported by a presentation from Dr Williamson. This was well received by the Board. They were appreciative of Dr Williamson's achievements in attracting a high calibre workforce and endorsed the importance of sustaining this level of quality.

Dr Kennedy left the meeting.

15/10 **CHIEF EXECUTIVE'S REPORT**

Paper 15/05 was received. Mr Trenholm presented highlights from the three operational Directorates, Corporate and Communications.

15/11 **BOARD PERFORMANCE REPORT**

The Board received the report, 15/06. Mr Bradburn drew attention to particular metrics by exception and some short term trends.

Mr Bradburn said the 2015/16 budget was balanced for Blood and for DTS but the funding available for ODT had not yet been confirmed by the UK Health Departments. He reiterated that the Donor Registration Transformation work would take priority.

Mr Blakeman confirmed that the GAC would be reviewing the report in terms of assurance on reporting at its next meeting.

15/12 **CLINICAL GOVERNANCE REPORT**

Dr Williamson presented paper 15/07.

Dr Costello welcomed the fact that the work of non-NHSBT laboratories is being looked into following the inquest (Ref INC 423) and Dr Williamson was asked to report further to the Board after the meeting with external agencies which would take place in February.

LW

Ms Johnson briefed the Board on a potential issue relating to heart transplants which had arisen since the report had been dispatched. The circumstances were currently unclear but a report was imminent.

15/13 **FRANCIS REPORT ACTION PLAN UPDATE**

The Board received the report, 15/08. The Board agreed to receive a further report and to receive further reports through other channels provided that any actions not completed by July were the responsibility of a specific Director.

LW

The Board also requested an audit of the position on Duty of Candour pre and post actions to demonstrate that activities had

been embedded in working arrangements.

LW

15/14 **MINUTES OF THE GAC MEETING 26.1.14**

The minutes were noted.

15/15 **SUMMARY OF THE MEETING OF THE REMUNERATION COMMITTEE 1.10.114**

The summary was noted.

15/16 **MINUTES OF THE TRUST FUND MEETING 28.11.15**

The minutes were noted.

15/17 **MINUTES OF THE R & D COMMITTEE MEETING 29.11.14**

The minutes were noted. Dr Costello drew the Board's attention to the outcome of the NIHR BTRU competition. Whilst funding has been awarded for three research units no award has been made in the fourth area (production of blood cells). A rebidding process is underway and the result is likely to be known in March. Should our bid for a programme of *in vitro* red cell production be successful, some additional funding from within NHSBT would be needed to enable a first in man trial.

15/18 **REPORTS FROM THE UK HEALTH DEPARTMENTS**

Paper 15/13 was received.

15/19 **ANY OTHER BUSINESS**

There was no other business.

15/20 **DATE OF NEXT MEETING**

The next meeting will be held in Edinburgh on 26 March 2015 followed by an organ donation event at the Botanic Gardens in the afternoon.

15/21 **RESOLUTION ON CONFIDENTIAL BUSINESS**

The resolution, 15/14 was agreed.

15/22 **INTERNATIONAL SERVICES ANNUAL REPORT 2014**

Paper 15/15 was noted.

15/23 **NHSBT MAJOR CONTRACTS PIPELINE REPORT**

Paper 15/16 was noted.

15/24 **FORWARD AGENDA PLAN**

Paper 15/17 was noted.

