## Minutes of the Sixtieth Meeting of NHS Blood and Transplant held at 11.30am on Thursday 30 January 2014 at the Royal College of Obstetricians and Gynaecologists 27 Sussex Place, Regent's Park, London NW1 4RG

Present:	Mr J Pattullo Mr A Blakeman Mr R Bradburn Dr C Costello Ms L Fullwood Mr R Griffins Ms L Hamlyn	Ms S Johnson Mr J Monroe Mr K Rigg Dr C Ronaldson Mr S Williams Dr L Williamson
In attendance:	Ms L Austin Mr M Cox Mr D Evans Mr M Potter Dr D Kennedy	Mr G Brown Ms J Hardy Ms P Vernon Ms J Minifie

## 14/01 APOLOGIES FOR ABSENCE

Apologies had been received from Dr Williams, Dr Duncan and Dr Donnelly.

## 14/02 MINUTES OF THE LAST MEETING

The minutes of the previous meeting were agreed.

### 14/03 MATTERS ARISING

The Board recorded the items they had discussed in the confidential section of the meeting. These were certain commercial, strategic and policy issues. The commercial issues related to the purchase of services. The strategic issues related to business planning for 2014/15. The policy issues related to transplantation.

## 14/04 RELOCATION OF NOTTINGHAM DONOR CENTRE

Dr Ronaldson presented paper 14/02 and thanked Ms Fullwood and Dr Costello for their help in defining the final version. Ms Fullwood asked the Board to consider very seriously this large investment and whether it was essential in this financial year.

Dr Ronaldson said he believed it was essential to make the investment now as most of the £1.3m required is capital which is available. He said he believed this opportunity to relocate to a prime city centre location should not be missed when the current location is seriously sub optimal with consistently poor metrics for donor satisfaction. Ms Hontoria del Hoyo said the running cost would be very similar to that for other comparable centres. In answer to a question, Dr Ronaldson said that the marketing budget at a maximum

of £60,000 per annum was intended to ensure retention of the donors who attend the current centre and he confirmed that this was a conservative estimate and would only be spent if essential.

Dr Costello said she supported the proposal, believing it was the right time to improve our efficiency and our service to donors in Nottingham at a relatively small cost. Mr Rigg said that he had visited the existing centre and fully supported the need for the improvement.

Mr Griffins enquired about the likelihood of DH approval. Mr Bradburn said he did not anticipate a problem because the proposal is included in our capital plan. Dr Kennedy said the proposal would go through the normal route and Mr Pattullo added that there had been recent helpful discussions with the DH about speeding up approval processes.

Ms Hamlyn confirmed that there had been good Executive Team scrutiny and personally, on the basis of her knowledge of all 25 static centres she believed this was the number one priority.

The Board approved the business case and the related actions set out in the paper.

### 14/05 HEMATOS DATABASE UPGRADE

Mr Potter presented paper 14/03 and commended the proposal to the Board. Mr Blakeman and Mr Monroe, who had reviewed an advance version of the paper, confirmed their support for the proposal. The Board agreed the proposal.

## 14/06 **ODT INFRASTRUCTURE REFRESH**

Mr Potter presented paper 14/04. The Board approved the funding to implement the new infrastructure for the National Transplant Database and the Organ Donor Register.

## 14/07 UPDATED COMMITTEE TERMS OF REFERENCE

The Board approved the updated terms of reference for (i) the R & D Committee, (ii) the Remuneration Committee and (iii) the National Administrations Committee.

# 14/08 ANNUAL FUNCTIONAL REPORT – ESTATES AND FACILITIES

Mark Woodget, Deputy Director of Estates and Facilities attended for this item.

Mr Bradburn introduced the item, the first of a series of reviews designed to provide the Board with background to the way in which individual functions are supporting our strategy.

Mr Woodget gave a presentation which highlighted the key actions and issues for the Estates and Facilities function in the short and long term.

The report and presentation were very well received. The Board found it valuable to see the activity relating to projects they have already approved, such as the Tooting Blood Centre First Floor Refurbishment, and the indicators of work to come. They were also reassured by the work being undertaken to strengthen the function.

The Board thanked Mr Woodget and Mr Bradburn for this clear presentation and confirmed that it had met the intended objectives.

### 14/09 BLOOD SUPPLY – COLLECTIONS PERFORMANCE MANAGEMENT REVIEW

Dr Ronaldson presented the paper which set out progress to date to address the five challenges in the Blood Supply – Collections Strategy. He said progress was largely in line with the high level implementation plan but there was concern about the number of donor complaints. He drew attention to the fact that reduced demand made productivity targets harder to achieve.

Concerned about recent adverse publicity in the press, Dr Costello asked whether there was capability in the on-line system for donors to check in advance on how a session was running. Dr Ronaldson said he was looking to trial communications via text from us to donors in the event of problems on sessions, due for instance to staff sickness absence, advising them not to attend. He said he would provide more information on this at the next Board meeting although he pointed out that there would be a cost to such a system and all projects are subject to prioritisation of funds. He added that the donor portal was helping the situation and the changes in the Marketing and Planning area would help further.

Dr Costello also asked whether donor forums could be created through which complaints could be co-ordinated and fed through to management through a selected donor representative. Mr Griffins supported this suggestion and Dr Ronaldson agreed to consider extending the current programme of donor panels to facilitate this.

In response to questions from Mr Monroe about capacity for change, Dr Ronaldson said that appointments had been made to around 50 of the 70 Senior Sister posts. He said the change programme was a stretching challenge but he was convinced that the new Senior Sister posts would lead to significant improvements.

The Board found the review very helpful and noted that they would receive the business case for the platelet strategy at the May meeting. CR

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# 14/10 CHIEF EXECUTIVE'S REPORT

The Board received paper 14/10.

### 14/11 **PERFORMANCE REPORT**

Mr Bradburn presented the performance report for December 2013 and a supplementary report which provided an overview of performance during 2013/14 by theme. He drew attention to the additional metrics on red cells and diagnostic and therapeutics in the monthly report and confirmed that the next report would include more on organ donation and transplantation. On overall trends, he drew attention to increased service and turn around times in H & I, which were reflected in income growth, and to deterioration in both hospital satisfaction on RCI and blood donor satisfaction.

Mr Bradburn said that although some progress had been made on the All Wales Blood Service in recent weeks its status had been moved to red because no business case, budget or impact assessment had yet been developed. Ms Vernon confirmed that the Welsh Government were aware of our concerns.

Mr Rigg drew attention to the red status of the Infrastructure Hosting Project. Mr Potter said that following a meeting with DH colleagues the previous day, the outcomes of which he had not had the opportunity to share with the Executive, he believed a way forward had been identified and he thanked Dr Kennedy for his help in achieving this.

Mr Bradburn also presented paper 14/13 on the subject of blood demand projections and their impact on future pricing and cost savings. The Board welcomed the paper which provided a very clear analysis of the issues involved. There will be a discussion at the March Board meeting which will identify work needed in advance of a more detailed discussion at the July meeting when a strategic decision will be taken on our approach to blood pricing.

## 14/12 CLINICAL GOVERNANCE

Dr Williamson presented paper 14/14. She drew attention to the successful defence of a hacking attack on our IT systems; and to our continuing exemplary record on CQC inspections. She also updated the Board on the Science and Technology House of Commons Inquiry into blood, tissue and organ screening.

Dr Costello asked questions about the Audit of Clinical Concessions and Dr Williamson said she would be pleased to send her the report and follow it up with a discussion.

The Board received the SUI Summary Report. There had been no new incidents since the previous report.

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Dr Williamson presented an update on the Francis Report Action Plan and said that no additional actions for NHSBT had been indicated by the Government's response. She drew attention to two recommendations which had been rejected by Government which would have had a major impact on NHSBT had they been accepted. These were a registration system for all healthcare assistants and the creation of a criminal offence in relation to misleading information and performance of duties. Dr Williamson confirmed that she was satisfied with NHSBT's response to the Francis recommendations. Dr Costello said she found the update very comprehensive and she had no comments.

# 14/13 MINUTES OF THE EXPENDITURE CONTROLS COMMITTEE 2.12.13

The minutes were noted.

## 14/14 MINUTES OF THE TRUST FUND COMMITTEE 12.12.13

The minutes were noted.

### 14/15 SUMMARY OF THE MEETINGS OF THE REMUNERATION COMMITTEE HELD ON 5.11.13 AND 18.11.13

The summaries of the meetings were noted.

## 14/16 MINUTES OF THE R & D COMMITTEE

The minutes were noted.

# 14/17 NOMINATIONS COMMITTEE NOTES

Paper 14/22 was noted.

## 14/18 REPORTS FROM THE UK HEALTH DEPARTMENTS

Paper 14/23 was noted.

# 14/19 ANY OTHER BUSINESS

There was no other business.

## 14/20 DATE OF NEXT MEETING

The next meeting will be held on Thursday 27 March in Edinburgh.

## 14/21 SUSTAINABILITY DEVELOPMENT UPDATE

Paper 14/24 was noted.

# 14/22 IMPLEMENTATION OF NHSBT UK STRATEGY FOR LIVING DONOR KIDNEY TRANSPLANTATION 2010-2014

14/23 Paper 14/25 was noted.

# 14/24 NHSBT CONTRACT PIPELINE REPORT

Paper 14/26 was noted.

# 14/25 FORWARD AGENDA PLAN

The forward plan was noted.