

**Minutes of the Twenty-third Meeting of NHS Blood and Transplant
held at 9.30am on Thursday 7th February
at the Royal College of Obstetricians and Gynaecologists
27 Sussex Place, Regent's Park, London NW1 4RG**

Present:	Mr E Fullagar	Mr G Jenkins
	Mrs E Buggins	Dr C Ronaldson
	Mr P Garwood	Mr D Shute
	Mr D Greggains	Mr B Savery
	Mrs J Gubbins	Dr D Walford
	Ms L Hamlyn	Dr L Williamson
	In attendance:	Mr D Dryburgh
Mr D Evans		Mr A McDermott
Ms H Joy		Ms J Minifie
Mr T Male		

08/14 APOLOGIES AND ANNOUNCEMENTS

Apologies had been received from Mr Forsythe, Mr Rudge, who was being represented by Mr Shute, and Mr Connon.

On behalf of the Board, Mr Fullagar formally welcomed the new Chief Executive, Ms Lynda Hamlyn. The Board expressed their sincere thanks to Mr Savery for fulfilling the Chief Executive role in the interim period.

08/15 APPOINTMENT OF DEPUTY CHAIR

Mr Fullagar said assurances had been received from the Appointments Commission, and from the Treasury, that it was acceptable for the Deputy Chair of a Special Health Authority also to be Chair of the Authority's Governance and Audit Committee provided that the Deputy Chair would be acting as Chair only for short periods. Should it be necessary for the Deputy to act as Chair for any lengthy period, such an arrangement would no longer be appropriate and alternative arrangements would need to be made.

The Board agreed that Mr Jenkins should become Deputy Chair of NHSBT on 1 April 2008 following Mrs Gubbins' retirement from the Board.

08/16 MINUTES OF THE LAST MEETING

Subject to the inclusion of Mrs Newington's name on the list of those present; and a correction to 08/08, which should refer to the 'Governance and Audit Committee', the minutes of the previous meeting were agreed.

08/17 MATTERS ARISING

17.1 Cash Limits

Mr Savery said that while he had been informally notified that NHSBT's cash limits for the coming year would include £23,000,000 to be carried over from the current year, he had not yet received formal notification of NHSBT's cash limits for 2008/09 and he would chase the DH for this during the coming weeks if necessary.

BJS

17.2 Contingency Planning for Emergencies

In Mr Connon's absence Ms Hamlyn said she would follow up with him the question relating to the control of information.

LH

17.3 Losses and Special Payments

Mr Savery said this issue continued to rest with the DH, was now extremely urgent and he would be writing to the DH and raising it at the next Accountability Review meeting with the DH.

BJS

17.4 Organ Donor Task Force

Mrs Buggins expressed grateful thanks to the Directors and staff in NHSBT who had contributed to the work around the ODTF, and Mr Rudge in particular, which had led to an exceptionally positive reception of the recommendations.

08/18 THE NBS STRATEGY REVIEW

The Board formally approved the findings of the NBS Strategy Review.

08/19 PLANNING FOR THE IMPLEMENTATION OF THE ODTF RECOMMENDATIONS

Mr Male presented the paper and the Board welcomed the overall ODTF findings. They expressed strong support for the plans for the implementation of the NHSBT share of the work and these would be incorporated in headline form within the draft Business Plan for 2008/09 which would be presented at the next meeting.

TM

The Board were acutely aware of the importance of NHS/DH oversight of the overall ODTF programme and Mr Fullagar said he continued to push for this to be established. Mrs Buggins said she had written to Sir Bruce Keogh about the timescale for this and added that she would raise the issue with the CMO's expert advisor and the Prime Minister's advisor at forthcoming meetings.

EB

08/20 OPTIONS RELATING TO THE USE OF EMBRYONIC AND FETAL TISSUES IN HEALTHCARE RESEARCH WITHIN NHSBT PREMISES

Mrs Gubbins was concerned that NHSBT should ensure that it is not ultra vires for it, or others on its premises, to carry out research on embryonic and fetal tissues. Following discussion it was agreed that Dr Williamson would write to Elizabeth Woodeson and William Connon at the DH asking them to confirm that this type of research was within NHSBT's powers and to send the letter to Mrs Gubbins for her review beforehand. Ms Joy was asked to obtain information on current public attitudes to this type of research and, in particular, whether any negative impact had been experienced by other organisations involved in such work. In addition, the GAC was asked to review any other obstacles which might stand in the way of the proposals. Subject to the foregoing, the Board agreed to the removal of the bar to research involving embryonic and fetal tissue at the Cambridge Centre only, with careful monitoring of the impact on donor attendance there and nationally. Mrs Buggins said she had a moral objection to this work, particularly on fetal tissue, although she entirely respected the motivation of the people who were doing it.

LW

HJ
LW

08/21 THIRD QUARTER PERFORMANCE REPORT

The Board received the report. There was general acceptance that the existing performance indicators were not the most useful and appropriate. Ms Hamlyn said it would be essential that this position was rectified within the annual and three year

plans from April, she would be working on these with her Executive Team and would welcome any input from Board Members.

08/22 **MEDICAL DIRECTOR'S REPORT**

Dr Williamson presented her report. The Board noted the Clinical Excellence award to Dr Sheila MacLennan; the need for a revision of performance indicators in the clinical area; and the workshop which had been set up to review issues around blood donation frequency rules. Dr Walford requested that the number of donor fainting episodes, etc. be highlighted in future in NHSBT's Health and Safety Reports.

LW

08/23 **OPERATING DIVISION PERFORMANCE REPORTS**

23.1 **BPL**

Mrs Martin said that BPL continued to perform very well. The one red indicator, in respect of Vigam, reflected back orders from the Christmas period when the National Institute for Biological Standards and Control (NIBSC) were not testing. To correct the lack of inventory which had caused this position, production had been increased significantly with both running rate and fill records being broken in December. In answer to a question about the amber status of exports, which were below target, Mrs Martin said that exports depended on UK requirements and she expected to meet the export target overall at the year end. Revenue was now ahead of budget. BPL expected to return £3,000,000 of the £12,000,000 GIA received in 2007/08, and forecast a further reduced requirement in 2008/09; this compared to £24,000,000 required in 2006/07. The Board congratulated Mrs Martin on BPL's success in reducing its Grant in Aid (GIA) requirements and asked her to pass on their congratulations to all her staff. They also wished to ensure that this achievement was appropriately recognised by the DH. Mrs Martin stressed that to achieve its further goals on GIA it would be essential for BPL to ensure it secured sufficient plasma over the coming years and to ensure it delivered in terms of productivity. Mr Greggains asked about the position on Kazakhstan, which was unchanged from the previous month, and Mrs Martin agreed to include a reference to this project in future reports.

23.2 **NBS**

Dr Ronaldson said that nearly one hundred per cent of requests for red cells had been met despite the light inventory during December. He was pleased that stocks had now risen to approximately 39,000 units although the increase mainly reflected historical trends. The recent MHRA inspection at Birmingham had shown significant improvement with one 'major' and several 'other' non-conformances and he expected to see further improvement in standards there. In the NBS overall there were no significant problems in health & safety or with adverse reactions and he said he expected finances to be on, or close to, target at the year end. High staff absence rates at collection sessions continued to be a problem but he expected improvements to begin to show following the recent management changes. In response to a comment about the healthy level of skin stock he said that while current stocks had all been sourced from the UK, foreign imports were still being sought for use for children to reduce the risk of transmission of vCJD.

23.3 **UKT**

The position on transplants was noted. On staff turnover, in response to a question from Mrs Buggins, Mr Evans confirmed that a limited number of posts at the new Filton centre would be open to staff across NHSBT as a whole. The turnover position continued to be carefully monitored and Mrs Buggins suggested that this should not continue to be flagged as red if it did not represent a problem.

Referring to the heart transplant programme in Glasgow, which had been suspended, Mr Shute said that an investigation by the Chair of the Cardio-Thoracic Advisory Group had not identified any problems beyond a run of poor results and the programme had resumed in mid January. During the suspension Glasgow patients had been cared for at the unit in Newcastle where one transplant had been carried out.

08/24 HEALTHCARE COMMISSION (HCC) INSPECTION BRIEFING

The Board noted the briefing relating to the forthcoming Healthcare Commission inspection of NHSBT, in particular the importance of identifying internally the correct criteria for assessment. They also acknowledged the need for realistic expectations of the outcome of the inspection against the background of the results in NHS Trusts.

Mrs Buggins said the HCC Chairman, Sir Ian Kennedy, would be consulting Mr Rudge with a view to including some organ donor activity for Trusts, and suggested that the opportunity be taken to raise this during the course of meetings relating to the inspection.

LH

08/25 CHIEF EXECUTIVE'S REPORT

Ms Hamlyn presented her report. This included a summary of her first three weeks in post which had incorporated a combination of various induction visits, involvement in the launch of the recommendations from the ODTF, further work on the day to day management of the blood collection service, the development of plans to launch the outcomes of the review of the NBS Strategy to staff and stakeholders, and more detailed work on the implementation plan. She had also included with her report proposals for some changes to the way the Board conducts its business which Mr Fullagar had agreed should be the subject of future informal discussion by the Board. Ms Hamlyn said she would be pleased to receive feedback on the kind of items Members would find it useful for her to include.

Ms Hamlyn said she was giving particular attention to the concern around blood stocks and was in frequent discussion with Dr Ronaldson on the matter. While it was clear to her that stock levels needed to be higher at present she wanted to achieve a greater understanding of the reasons for the target of 40,000 and to establish whether this was the right level.

In answer to a question on the Human Tissue Authority (HTA) inspection of the Stem Cell Immunotherapies activities in Leeds, Mr Garwood said he had now received the draft report and expected the final version shortly. Of 109 different categories and standards the NBS had scored four (maximum) on 100 and three on nine. A programme of work had been put in place to address the areas scoring three.

08/26 FINANCE REPORT

Mr Savery said the Authority was in a good financial position and had now entered the year end planning period. Cash flow was satisfactory and he was in discussion with the DH with a view to them agreeing to NHSBT holding a £2,000,000 year end cash balance represented but this would mean that the following year's cash limits would be proportionately reduced. He said that formal confirmation of 2007/08 cash limits had now been received and these included the £6,000,000 capital sum returned to the DH and the carry over into 2008/09 of £23,000,000. The position on overdue accounts was satisfactory overall with UCLH and University Hospitals of Leicester now having paid up to date and City Hospitals Sunderland having promised payment by 15th February.

Mr Savery stressed his concern over the issue between the DH and the Treasury about small payments to blood donors (which came under the heading of Losses and Special Payments) which remained unresolved. If this was not resolved in the near future the issue could be mentioned in the Management Letter or even result in NHSBT's accounts being qualified. He said he would be writing to Elizabeth Woodeson and William Connon on the matter and be raising it at the next Accountability Review meeting with the DH.

Mr Savery confirmed that a total of £7,000,000 would be refunded to hospitals on blood prices in accordance with National Commissioning Group for Blood (NCGB) procedures and he would provide a breakdown if this if required. It was likely that a further £3,000,000 in GIA would also be returned to the DH in this financial year as a result of the good sales performance of BPL.

The level of funding NHSBT would receive for ODTF initiatives in 2008/09 was unclear and Mr Savery said he would raise this at the next Accountability Review meeting if it was not clarified in the meantime.

08/27 **BLOOD, TISSUES AND ORGAN SAFETY**

Mr Garwood presented the briefing. He said the SHOT report was available on the web or he could provide hard copies if required.

There was a general discussion about prion filtration and also how NHSBT would handle publicity about early implementation in Ireland if this took place. Dr Williamson said SaBTO regarded prion filtration and testing as their first priority and she was a member of a group which was preparing a paper for their next meeting. In the meantime the Board agreed that NHSBT needed to develop a handling strategy and to brief the DH. Dr Williamson and Mr Garwood were asked to take soundings from Irish colleagues on their timetable and, depending on that timing, to bring a paper on this specific issue to the Board in two or three months' time.

**LW
PAG**

08/28 **REGISTER OF SEALINGS**

Mr Savery said that the register entry referred to a minor licensing agreement, not to the entire works at the West End Donor Centre as the wording of the entry suggested. The Register was noted.

08/29 **ANY OTHER BUSINESS**

29.1 **Trust Fund Committee**

Mrs Gubbins suggested that it would be useful if possible for the Non-Executive Director who would be succeeding her as Chair of the NHSBT Trust Fund Committee to attend its next meeting. This would take place at 2.00pm on 17th March in London.

EJF

29.2 **Delegations of Power**

Mr Savery said that the Delegations of Power were due for annual review but following discussion with Ms Hamlyn, Mr Fullagar and Mr Jenkins he was proposing that this be delayed for approximately three months pending any organisational changes resulting from the ODTF recommendations and the NBS Strategy Review. This proposal was agreed.

08/30 **DATE OF NEXT MEETING**

The next meeting would be held on Thursday 6th March at the Royal College of Obstetricians and Gynaecologists. Mr Fullagar said that the Chief Executive and the

Regional Director of the Appointments Commission would be joining the Board to provide a briefing on the role of the Commission.

08/31 **RESOLUTION ON CONFIDENTIAL BUSINESS**

The resolution was passed.