

Minutes of the One Hundred and Seventeenth Board Meeting in Public of NHS Blood and Transplant

Tower Hotel, St Katherine's Way, London and MS Teams

Tuesday, 30 January 2024 and MS Teams 13:00 – 15:00

Present		
Voting Members	Peter Wyman	Chair
	Caroline Serfass	Non-Executive Director
	Piers White	Non-Executive Director
	Rachel Jones	Non-Executive Director
	Phil Huggon	Non-Executive Director
	Prof. Charles Craddock	Non-Executive Director
	Jo Farrar	Chief Executive Officer
	Wendy Clark	Deputy Chief Executive Officer
	Anthony Clarkson	Director of Organ and Tissue Donation and Transplantation
	Carl Vincent	Chief Financial Officer
	Gail Mifflin	Chief Medical Officer and Director of Clinical Services
Non-voting Members (Virtual)	Stephanie Itimi	Associate Non-Executive Director
	Bella Vuillermoz	Associate Non-Executive Director
	Nicola Yates	Associate Non-Executive Director
	Gerry Gogarty	Director of Plasma for Medicines
	Helen Gillan	Director of Quality
	Paul O'Brien	Director of Blood Supply
	Rebecca Tinker	Chief Digital and Information Officer
	Denise Thiruchelvam	Chief Nursing Officer
In attendance (Virtual) (Virtual) (Virtual) (Virtual) (Virtual)	Brad Parker	Assistant Director, HR Strategy Planning and Change
	Mark Chambers	Deputy Director of Donor Experience
	Brenda Thomas	Interim Company Secretary
	Claire Williment	Chief of Staff
	Jemima Churchhouse	Disability and Wellbeing Network
	Tapiwa Songore	Interim Corporate Governance Manager
	Helen McDaniel	Department of Health and Social Care, England
	James How	Scottish Government
	Kevin Francis	Welsh Government
	Joan Hardy	Northern Irish Government
	Noel Palmer	Patient <i>(Item 2.1 only)</i>
Mark Taylor	Assistant Finance Director Planning & Performance <i>(Item 3.2 only)</i>	
Apologies	Deborah McKenzie	Chief People Officer
Observers	One member of staff and one member of the public	

		Action
1	Opening Administration	
1.1	Welcome and apologies	
	The Chair welcomed everyone to the 117th NHS Blood and Transplant (NHSBT) Board meeting in public, in particular Jemima Churchhouse who was attending as the Disability and Wellbeing Network representative and Kevin Francis who replaced Pat Vernon at the NHSBT Board from the Welsh Government.	
1.2	Register of Interests	
	The Board noted the Register of Interests. Peter Wyman reported that the Independent Review for the Secretary of State for Education had finished. The Register of Interest would be updated to reflect this. No conflicts of interests were declared in respect of the items on the agenda.	
1.3	Minutes of the previous meeting	
	The minutes of the meeting held on 28 November 2023 were approved as a true and accurate record of the meeting.	
1.4	Matters arising from previous meeting	
	The Board noted the action log and agreed to close action B54 which had been proposed for closure.	
2	Patient Story	
2.1	Patient Story	
	The Board welcomed Noel Palmer, a patient with Sickle Cell Disorder who was using Ultrasound-guided (USG) Intravenous (IV) cannulation in Red Cell Exchange. This had made a huge difference to his experience of Red Cell Exchange and had improved his wellbeing. The Board noted that this was an area of innovation and great for patients and since it was introduced since September 2022, there has been over 500 ultra ultrasound guided cannulation, reducing the impact of bacterial infections of particularly putting in dwelling lines. More nurses were being trained to deliver the service. The Board thanked Noel Palmer and Lorraine, who did not manage to attend the meeting, for sharing their stories.	
3.	For Assurance	
3.1	Chief Executive's Board and Board Performance Report	
	Jo Farrar reported on the following: <ul style="list-style-type: none"> • The winter resilience plans which had been effective in managing the blood stocks at the agreed target of more than six days of stock. • Strategic Plans for 2024 and the future, including plasma for medicines, the future proofing blood program, and the Nursing Strategy. • Evaluation of Organ Donation Week and the various campaigns to deliver improvements in patient experience and outcomes. • The positive financial forecast which was within the financial envelope for 2023/24. • The improvement in recruitment metrics to 11.89 weeks against a target 11 weeks. <p>The Board noted the performance metrics and the decline in the size of donor base</p>	

	<p>which had continued falling from 799.3k in October to 783.6k in December and sought clarity on the assumptions and insights that were driving the activities behind the plan.</p> <p>Assurance was provided that there was intelligence sitting behind the campaigns to engage with donors. The information was being used to plan more effective campaigns. A report would be submitted to the Board to demonstrate the process and how campaigns were planned, why they were planned and the target market. It was also noted that plans were underway to create a strategic long-term plan to increase the resilience and profile of the donor base.</p> <p>The Board asked how technological investment was being used to build the capability and improve donor experience. It was noted that the Digital, Data and Technology Services (DDTS) team were progressing a new marketing automation tool and donor session capability outside of Pulse to achieve that.</p> <p>The Board sought assurance on the capability to manage new donors and it was noted that there were automated systems to respond, however the challenge was triaging all the new donors and priority was given to some blood groups in order to manage the blood stock effectively.</p> <p>The Board requested more information on the self-assessment of the Freedom To Speak Up arrangements and the revised policy. It noted that the service was still looking for options to improve, including the use of technology. It was also noted that work was underway to ensure that all policies were up to date and were fit for purpose.</p> <p>Gail Miflin updated the Board on the joint work between NHSE and NHSBT in blood cell genotyping for patients with sickle cell disease.</p> <p>The Board noted the report.</p>	
<p>3.2</p>	<p>Finance Report</p> <p>Carl Vincent and Mark Taylor presented the report and highlighted the following:</p> <ul style="list-style-type: none"> • At Q3, there was confidence in the delivery of the year’s financial position within the agreed funding envelope. This position had been achieved by the use of one-off cash reserves to meet additional collection costs and future proofing for blood plans in Blood Services. • The Capital Plan 2023/24 had a forecast of £15m for 2023/24 versus £20.5m allocation. Spend was likely to increase in the latter part of the year. • Cash and revenue were in line with forecast. <p>The Board noted the report.</p>	
<p>3.3</p>	<p>Care Quality Commission Action Plan</p> <p>Helen Gillan provided an update to the Board on the progress against the CQC action plan, following the Well-Led and regulated activity inspections in June and August 2022.</p> <p>Of the 33 actions raised to address the six MUST (Well-Led) findings, 32 had been closed in total, one more since the last update to the Board. The outstanding action was on the review of the effectiveness of the Board and Committee structure, and this would be completed by the end of February 2024.</p> <p>The Board noted the report and congratulated the team on the successful near completion of the CQC action plan.</p>	

4.0	FOR APPROVAL	
4.1	Standing Orders	
	<p>The Board received the Standing Orders which had been reviewed at the Audit, Risk and Governance Committee at its meeting on 11 January 2024, and recommended to the Board for approval.</p> <p>The Board approved the Standing Orders, subject to inclusion of the following: ‘the Board has powers to remove (as well as appoint) the CEO; and the Board appointing Independent members’.</p>	
4.2	Anti-fraud, Bribery and Corruption Policy	
	<p>Carl Vincent and Duncan Boud presented the Anti-fraud, Bribery and Corruption Policy which had been reviewed and recommended for approval by the Audit, Risk and Governance Committee on 11 January 2024.</p> <p>The Board approved the Policy subject to including a paragraph on cyber security.</p>	
5.0	GOVERNANCE	
5.1	Committee Assurance Reports	
5.1.1	Audit, Risk and Governance Committee	
	<p>Piers White presented the report from the Audit, Risk and Governance Committee (ARGC) meeting on Thursday 11 January 2024. The following issues discussed at the meeting were highlighted:</p> <ul style="list-style-type: none"> • Indemnity cover and financial risk - Data Protection. • Records management and the approach being used to manage the records from the Infected Blood Inquiry. There was a a legal and regulatory risk involved in the work was likely to be a costly exercise. • Compliance with Functional Standards. Compliance would be monitored once a year. • Supplier Chain Management. • Recommendation to approve the Anti-fraud, Bribery and Corruption Policy. • Recommendation to approve the Terms of Refence. • Recommendation to approve Standing Orders. <p>The Board approved the recommendation to approve the Committee Terms of Reference.</p>	
5.1.2	Clinical Governance Committee	
	<p>Dee Thiruchelvam presented the report from the Clinical Governance Committee (CGC) meeting held on Friday 12 January 2024. The following issues discussed at the meeting were highlighted:</p> <ul style="list-style-type: none"> • The Organ and Tissue Donation and Transplantation (OTDT) Safety Culture Survey. It had been agreed that this would be embedded within the whole organisation. • A hepatitis A transfusion transmitted infection had occurred following a donor infection. There was no error was from NHSBT. A look back exercise was being undertaken and it was noted that the HAV and Parvovirus B19 screening for donors being implemented when plasma was taken for medicines will mitigate this risk. <p>The Board raised the issue of machines failures, and it was noted that the organisation had records of all assets, equipment, maintenance schedules, validation,</p>	

	<p>and return service calibration on the Quality Management System.</p> <p>The Board noted the report.</p>	
5.1.3	People Committee	
	<p>Caroline Serfass presented the report from the People Committee meeting on Monday, 4 December 2023. The following items discussed at the meeting were highlighted:</p> <ul style="list-style-type: none"> • BAF risk P07 (Staff Capability, Capacity, Recruitment and Retention) and BAF risk P08 (Leaders and Managers' lack of skills and capability). • All the People directorate actions on the CQC Well led Action Plan had been closed. • Compliance with mandatory training was at 95%. <p>The Board discussed mandatory training and it was noted that some roles could not be performed without the required training.</p> <p>The Board noted the report.</p>	
5.1.4	Trust Fund Committee	
	<p>Phil Huggon presented the report from the Trust Fund Committee meeting on Monday 18 December 2023. The following items discussed at the meeting were highlighted:</p> <ul style="list-style-type: none"> • The approval of the 2022/2023 Trust Fund Annual Reports and Accounts. • Proposals for Growing the Trust Fund. <p>The Board discussed the proposal for Growing the Trust Fund, and it was noted that the proposals were with the Executive Team for discussion, and it was suggested that the options could be explored with the fund managers as well.</p> <p>The Board noted the report.</p>	
5.2	Governance Update	
	<p>The Board received the Governate Update and a proposal to approve the internal Board Self-Effectiveness Review Questionnaire.</p> <p>The Board approved the internal Board Self-Effectiveness Review Questionnaire.</p>	
6.0	For Report	
6.1	Reports from the UK Health Departments	
6.1.1	England	
	<p>Helen McDaniel provided a verbal update and highlighted the following:</p> <ul style="list-style-type: none"> • The appointment of the Secretary of State, Victoria Atkins, and Andrea Leadsom as new Minister responsible for blood, organs and tissues and their areas of interest. • The debate attended by Lord Markham on the impact of the deemed consent legislation in England. • Lord Markham's visit to NHSBT Filton Centre. • The 2024/25 business planning process. <p>The Board noted the update.</p>	

6.1.2	Northern Ireland	
	<p>Joan Hardy reported on the following:</p> <ul style="list-style-type: none"> • The imminent appointment of the new First Minister. • Promotional Activity in Northern Ireland. • Meeting with the Clinical Lead for utilisation and transplant center in December along with the Commissioner. • Discussions on the challenging financial position. • Organ Donor Register figures since 1 June 2023 had dipped slightly compared to patterns pre-law change. Opt-ins remained strong and constant, slightly lower than previous. Opt-outs have continued to fall since the peak in June 2023. <p>The Board noted the report.</p>	
6.1.3	Scotland	
	<p>James How reported on the following:</p> <ul style="list-style-type: none"> • As part of the living kidney donation campaign, Minister Jenny Minto visited the Royal Infirmary and had an opportunity to attend a living kidney donation and transplantation. • Discussions with NHSBT on plasma and eyes. • Work to set up a transplant research network. • The transplant patient survey and telemedicine survey the results of which would be discussed in April. • The current difficult financial situation. <p>The Board noted the report.</p>	
6.1.4	Wales	
	<p>Kevin Francis presented the report and highlighted the following:</p> <ul style="list-style-type: none"> • A new First Minister expected in April. • The current difficult financial situation. • The movement of the Welsh Transplant Advisory Group to the NHS Executive. <p>The Board noted the report.</p>	
6.2	Board Forward Plan	
	<p>The Board noted the updated Board Forward Plan and that the Board Forward Plan for 2024/25 would be presented at the Board meeting in March.</p>	
7	Closing Administration	
7.1	Any Other Business	
	<p>The Board noted that this was Brenda Thomas' last meeting as Interim Company Secretary and Phil Huggon's last meeting as a Non-Executive Director and thanked them for their immense contribution to NHS BT.</p>	
7.2	Questions from the Public	
	<p><u>Question 1</u></p> <p>Peter Wyman reported that a question had been received from a member of the public, however the question was inadmissible since it neither related to a matter on the agenda nor a matter of general public interest.</p>	

	<p><u>Question 2</u></p> <p>What reassurance does the Board have that they are actively assessing their assets? Furthermore, what concrete plan is in place to measure and track progress in doing so?</p> <p><u>Answer</u></p> <p>As a Board, we discuss stakeholders, and we engage with both our physical assets and our staff. Typically, our Board meetings are held at one of our sites, and while we are there, we engage with our staff and regularly engage with stakeholders.</p> <p>In terms of community engagement, we are constantly exploring new ideas and strategies. Our efforts in Brixton have been particularly innovative, and we are keen to expand on these achievements. We have developed the People Plan which is about engaging with our people and we discussed this in the Private Board, to bring all of our people initiatives together. We are aware of the challenges we face with our estates, and in the upcoming months, we aim to present the Estates Strategy to the Board. This would focus on strategic considerations regarding our buildings and physical assets, as well as their optimal utilisation. Our primary objective is to create an exceptional working environment for our staff and a welcoming atmosphere for our valued donors.</p> <p>These issues require investment, which we are currently considering. Every person seated around this table devotes some of their time to personally visit our units, not only to observe and communicate with our staff, but also to engage with members of the public who are donating blood or receiving treatment in hospitals. We are very mindful of how important all those people are to us.</p> <p><u>Question 3</u></p> <p>What assurance do you get on the impact of that – how do you measure the impact?</p> <p><u>Answer</u></p> <p>We monitor all of our campaigns to analyse our ability to engage donors and attract new supporters. We have been closely monitoring the campaign that launched at the beginning of the year, which was highly engaging, resulting in significant increases in registrations and bookings. Over the course of three weeks, we observed over 70,000 bookings, many of which were made by new donors. It is essential for us to continuously track our progress to ensure the effectiveness of our efforts.</p> <p>Donors who attend sessions also provide feedback on the service they receive. A significant 84% of donors who participated in sessions rated their experience as a nine or 10. This rating reflects their satisfaction with the treatment received, the handling process, and the speed at which they were able to complete the session.</p>	
6.2	Close of Meeting	
	The Chair thanked everyone for their attendance and contribution.	
6.3	Date of Next Meeting	
	The date of the next meeting is Tuesday, 26 March 2024 at NHSBT Newcastle.	