

Implementation Steering Group for Organ Utilisation (ISOU) Histocompatibility & Immunogenetics Sub-Group - Terms of Reference

Purpose

1. The purpose of the Histocompatibility & Immunogenetics (H&I) sub-group is to provide independent advice to DHSC Ministers and the Secretary of State for Health and Social Care on collaborative use of new technology and service provision related to H&I and solid organ transplantation.

The sub-group will be tasked with producing recommendations to the Ministers on the H&I service for solid organ transplantation, including:

- Stock-take of innovative methods and their utility and effectiveness:
- Explore potential for improvements to patient benefit, optimal use of the precious donor resource, clinical team efficiency and cost-effectiveness to the service, wider NHS and UK economy;
- o Focus on innovations which can be implemented on a 5-10 year time scale;
- o Prepare proposals for best use of these new techniques.

Scope

2. It is acknowledged that while implementation of the Organ Utilisation Group's (OUG) recommendations by the Implementation Steering group for Organ Utilisation (ISOU) apply to England, there is significant engagement and buy-in from Devolved Governments. s Organ transplantation is organised across the UK and some patients cross borders to access services. Whilst ISOU's evaluation and any implementation of the H&I sub-group's recommendations in England may inform work in the home nations, any decisions regarding implementation of recommendations outside England will be made locally by the Devolved Governments.

Membership

- 3. The Co-Chairs of the sub-group will be nominated by the DHSC ISOU Co-Chairs. The sub-group membership will include (a) patient facing clinicians with H&I subject matter expertise (SME), (2) H&I laboratory SME, (3) Laboratory provider SME. All ISOU sub-groups would typically have lay/patient representation. Due to the highly technical nature of the H&I sub-group's remit, an alternative model of lay/patient engagement will be considered. This will be with the sub-group Co-Chairs ensuring regular engagement with relevant patient/lay panels (for example the ISOU Stakeholder Forum or Patient Engagement sub-group) with this feedback embedded in the sub-group's work and final recommendations.
- **4.** Representatives of Government and/or health commissioners from all four UK nations will be invited as observers. Policy leads from all four UK nations will also receive updates from the subgroup at the main ISOU meetings as well as from subgroup members that are based in their respective nations.
- **5.** At the discretion of the sub-group Co-Chairs and ISOU Co-Chairs additional members may be co-opted for specific input as needed.

- **6.** At the discretion of the sub-group Co-Chairs and ISOU Co-Chairs representatives from the commercial sector may be invited to speak to specific points related to their products/innovations. In this scenario, all possible providers of the product/innovation will be invited to prevent any undue commercial advantage to a specific provider. DHSC will provide any commercial advice required prior to inviting commercial representatives to H+I subgroup meetings.
- **7.** Members will not be remunerated for their time, but reasonable travel and subsistence costs will be re-imbursed in line with DHSC expenses policy.

Meetings

- **8.** The sub-group will conduct in-person and/or hybrid and/or virtual meetings at the discretion of the Co-Chairs. In-person or hybrid meetings where possible will be conducted at DHSC (or NHSBT) premises.
- **9.** The sub-group will meet every 6-8 weeks over approximately 12 months. Additional meetings may be called at the discretion of the Co-Chairs. The sub-group will be disbanded on the completion of its' task.
- **10.** The meeting will be considered quorate if attended by at least 3 patient facing SME and 3 H&I laboratory SME.
- **11.** Members will have signed a declaration form to alert the secretariat to potential conflicts of interest or concerns and to agree to honour confidentiality in terms of information shared or the purposes of sub-group discussions.

Secretariat

12. DHSC will provide the Secretariat and administrative support for the sub-group, including the following activities:

Secretariat:

- Working with the Co-Chairs, collate the agenda and papers
- o Draft papers, to be cleared by Members and Co-Chairs as appropriate
- o Drafting and or compiling reports to Ministers and others, but the responsibility for the content lies with the members and ultimately the Co-Chairs of the sub-group.
- Working under the instruction of the Co-Chairs, drive activity and progress between meetings

Administration:

- Setting dates and issuing invites
- Hosting virtual meetings
- o Organising venues for in-person/hybrid meetings
- o Taking notes, clearing notes with the Co-Chairs, circulating notes to delegates

Governance

- **13.** The sub-group will report to ISOU. The final recommendations (as detailed in point 1 above) produced by the sub-group will be submitted to the DHSC ISOU Co-Chairs
- **14.** At the request of the DHSC ISOU Co-Chairs the sub-group may be invited to consider additional aspects related to H&I, that have not already been identified or considered by the sub-group.
- **15.** The Co-Chair or identified member of this sub-group who is also a member of ISOU will escalate to the DHSC ISOU Co-Chairs any requests for help or intervention that may be necessary to successfully discharge the duties of the sub-group.

16. The Co-Chair or identified member of this sub-group who is also a member of ISOU will provide regular updates at ISOU meetings.

Appendix:

Initial membership list:

Rommel Ravanan
Richard Battle
Prof Sian Griffin
Aisling Courtney
Co-chair (ISOU member)
Co-chair / Scotland rep
Physician / Welsh rep
Physician / NI rep

5. Sunil Daga Physician

6. Vasilis Kosmoliaptsis Surgeon / Heart transplantation rep

7. Tom Nieto Surgeon

8. Sarah Peacock H&I lab lead / Provider rep / Heart transplantation rep

9. Delordoson Kallon H&I lab lead / Heart transplantation rep

10. Livvy Shaw11. Katy Latham12. H&I lab lead / Paediatric Rep13. H&I lab lead / NHSBT rep

12. Brendan Clark H&I lab lead

13. Vicky Chalker14. Dr JJ KimNHS E /Genomics repPaediatric Representative