

**Minutes of the National Administrations Sub Committee
of the NHS Blood and Transplant Board held on Friday 6th October 2017,
via Telecon**

Present: Léonie Austin (**LA**)
Millie Banerjee (**MB**) (Chair)
Ian Bateman (**IB**)
Louise Fullwood (**LF**)
Sally Johnson (**SJ**)
Jeremy Monroe (**JM**)
Keith Rigg (**KR**)

In attendance: Cathy Allen (**CA**) (Minutes)
Neel Niak (**NN**)
Wayne Lawley (**WL**) (Observing)

Apologies: John Forsythe (**JF**)

1. For review and recommendation to the Board

1.1. Minutes of the previous meeting

The minutes were approved.

1.2. Review of actions from the last meeting

Actions from the previous meeting were completed.

2. Brexit

2.1 Neel Naik, Exiting the EU Lead within the EU and International Health Team at the Department of Health (DH), joined the call to update on progress from a Department perspective.

NN explained that the Government has set up the Department for Exiting the European Union as the central co-ordination department working closely with each Department on their respective policy areas. The negotiations, to date, had only covered the Withdrawal Agreement and negotiations on the future UK-EU relationship had not yet begun. The Department is planning to deliver a smooth exit under any scenario.

The European Union (Withdrawal) Bill aims to maximise certainty for individuals and businesses as we leave the EU and so, the laws and rules that we have now will, so far as possible, continue to apply. We are working closely with the devolved administrations to determine where we will need common approaches in the future.

2.2 IB updated on progress since the Committee last met. IB is continuing to attend bi-weekly telephone conferences chaired by NHS England. Separate work streams are being set up by DH with first meetings due to take place at the end of October. NHSBT is feeding information into various work streams which will be factored into the management and contingency planning process; and reconstruction of laws in relation to the European Union (Withdrawal) Bill.

IB assured that no new risks to NHSBT's operations have been identified and we are working through those that have, in particular workforce, especially ODT, which could be potentially impacted due to the high number of non-EU citizens currently in post. There are also discussions about the movement of organs in and out of Ireland depending on what border decisions are made.

IB also highlighted that he is in the process of setting up an oversight group within NHSBT given the resource needed to collate and respond to the increasing volume of requests. He will provide an update paper for the next NAC meeting.

NN mentioned that HMRC had queried whether any issues might arise from organs going through customs. SJ does not foresee this being a problem as organs don't follow the usual customs route and are often given a police escort.

ACTION: IB to provide an update paper for the next meeting.

3. Activity Reports

Each Non-Executive national lead introduced the activity report for their Administration.

3.1 Northern Ireland

As the new Government is still to be formed there is currently no Health Minister in place meaning that policies and strategies are not moving forward.

LF has encouraged representation from NI at the Board and this has been noted.

SJ asked, given the current political situation, where NI stands in relation to opt out. The Republic of Ireland has published its consultation and, with England on course to do the same, they are in danger of being behind the curve.

LF suggested that next steps may depend on who is in Government as DUP and Sinn Fein have previously held opposing views.

SJ highlighted that including NI in the English consultation (with NI branding) could help to keep them in line with progress and would also be more cost effective.

ACTION: SJ to continue to raise this with DH.

3.2 Scotland

SJ explained the issue with third party involvement in the collection of data for ODR registrations that come in via GPs in Scotland which has been ongoing for a number of years. There is no risk as this is only for requests to opt in to donate.

One of the challenges has been identifying who is accountable for the three third parties involved. NHSBT is working with the Scottish Government to resolve the issue. SJ highlighted that it is particularly important that ahead of any changes in legislation the systems for capturing ODR data are robust.

ACTION: SJ/KR to raise at the next SDTG meeting and ensure that the minutes of that meeting reflect the correct accountability for finding a resolution.

3.3 Wales

MB updated the group that her meeting with the Welsh Health Minister Vaughan Gething went well. He confirmed the next steps for opt-out in Wales is to run a new campaign around promoting conversations and the role of the family in the decision making process.

SJ highlighted that following the opt-out announcement in England the Welsh Government has opened out attendance to their forthcoming Organ Donation and Transplantation Conference (to be held on Friday 1 December 2017) to NHSBT's Specialist Nurses and that representatives from each region would be attending. The findings of the impact evaluation report commissioned by the Welsh Government will be presented at the conference and future plans will be considered.

4. Current Issues

4.1 Organ Donation and Transplantation – opt-out

SJ updated the Committee that the Scottish Government has declared that it is moving to a change in legislation. SJ said we are providing support to both the Scottish and English health departments in developing their approaches to opt out.

Current timelines in Scotland are June 2018 to publish the bill with the aim of reaching Royal Assent by December 2018. Following this it would take 18 months to two years to implement.

SJ confirmed that we have provided cost information for the DH impact assessment and information and issues to feed into the consultation.

5. Developments in England which may have an impact:

5.1 Manifesto commitment for a national campaign to increase the number of black, Asian and ethnic minority organ donors.

LA updated the Committee that Ceri Rose, Assistant Director Marketing, had presented to the Health Minister responsible for NHSBT, Jackie Doyle-Price, on what a campaign targeting these audiences could look like. The Minister was supportive and a proposal has now been put to DH for consideration. This campaign will be in addition to our ongoing behaviour change work and will need to work along-side opt-out developments.

6. Committee annual report

The report was agreed and will be submitted to the November Board.

Any Other Business

MB asked for meeting papers to be added to Convene in future.

CA to follow this up

7. Date of the Next Meeting

Date for next meeting: Monday 08 January 2018, 4:00-5:00pm
Via Telecon – 0800 032 8069 - Participant code: 17775430 then #