



**One Hundred and Thirty Eighth meeting of the NIBTS Agency Board
Thursday 6 December 2018 at 11.30am
Venue: Lecture Room, Northern Ireland Blood Transfusion Service**

- Present:** Mr Jim Lennon – Chairman
Mrs Lorraine Lindsay – Non Executive Board Member
Mr Philip Cathcart – Non Executive Board Member
Mr Ian Henderson – Non Executive Board Member
Mrs Karin Jackson – Chief Executive
- In attendance:** Dr Kieran Morris – Medical Director
Mr Glenn Bell – Finance & IM&T Manager - (Items 1-8)
Ms Angela Macauley – Quality & Regulatory Compliance Manager
- Mrs Alison Carabine – Minutes

- 1. Apologies**
Mrs Alison Geddis and Mr Ivan Ritchie
- 2. Declaration of potential conflict of interests with any business items on the agenda**
There were no declarations of interest.
- 3. Minutes of One Hundred and Thirty Seventh meeting held on 25 October 2018 and action list**
The minutes were agreed as an accurate account of the meeting on 25 October 2018 and signed off by the Chairman. The Action had been completed and was discussed.
- 4. Matters arising from minutes of meeting held on 25 October 2018**
BBC Irish Language show featuring NIBTS – Mrs Geddis had advised the Board of the date of airing prior to it showing. Board discussed the content.
- 5. Chairman’s Business**
Hyponatraemia Inquiry
Mr Lennon advised that he had received no further updates. Both Mrs Jackson and Dr Morris advised no further updates had been received by NIBTS. The Board discussed Duty of Candour and how openness and transparency is referred to in the NIBTS Whistleblowing Policy. The Chairman advised reminding staff that it is a key priority of the Board that all staff have a duty of candour.

Update of meeting with DoHNI and the Chairman – 25 October 2018

The Chairman updated The Board on his recent meeting with the Deputy Secretary, DoHNI where they had a long discussion regarding the future of the service that NIBTS provides.

Also raised was the tenure of the Non-Executive Board Members as two of the members' tenure is due to expire early 2019. The Deputy Secretary asked if these members would consider extending their contracts. Mr Lennon asked Mrs Lindsay and Mr Henderson if they were amenable to this. They both advised they would be happy to extend their contracts.

Review of Pathology Services

The DoHNI Deputy Secretary would like to meet the Chairman, Chief Executive and Non-Executive Board Members on Friday 11 January 2019 to discuss Pathology Transformation with a view to moving forward with pathology modernisation. Mrs Jackson gave background to the rationale behind this meeting. Mr Lennon further advised that the 1994 Establishment Order can be amended without ministerial approval thereby allowing extension of scope of NIBTS to host the planning for the new pathology service model. The Board discussed all known aspects, future plans and associated risks. The Chief Executive re-iterated that the "brand" of NIBTS will be maintained and NIBTS will be resourced for the additional staff required. Mr Henderson enquired about the scale of resources. Mrs Jackson advised that currently Pathology Services employs 1,000+ people with a budget of approximately £100 million direct costs, HR costs and the transfer of staff. Mrs Jackson further advised that an HR / OD strategy for the new service is required. The Transformation Steering Group will be working through these issues. The Board discussed at length with Mr Lennon and Mrs Jackson answering all queries. Mr Lennon and Ms Macauley both advised that NIBTS need to continue to work within regulatory requirements regardless of the modernisation of services. Mr Lennon advised the Board to consider carefully the DoHNI proposal prior to meeting with the Deputy Secretary. Mr Henderson enquired if there would be a briefing paper. Mrs Jackson advised that a proposal is due prior to the meeting on 11 January 2019. Mr Lennon further advised that the Board need to be clear about what is being asked of NIBTS. Mr Lennon also stated that he will share a 'minute' of his meeting with DoHNI, 25 October 2018 the the Board minutes. Following the Extra-ordinary Board Meeting of 11 January 2019, the Deputy Secretary, DoHNI will then be in attendance at February's Board meeting.

6. Report from Chief Executive

6.1 Chief Executive's Report

Review of Pathology Services

Previously discussed at Chairman's Business.

Blood Mobile

The Blood Mobile was officially launched on 30 November 2018. The Permanent Secretary, DoHNI was in attendance. The Board felt the launch was very well received and Mrs Jackson advised of further events planned in the New Year.

Plateletpheresis in the West – NIBTS Facilities in the West

Mrs Lindsay enquired as previously discussed was the name of this topic changing. Mrs Jackson advised it was and was an oversight for this report. Mrs Jackson further advised that Ms Macauley and Mrs Geddis continue to await a response from WHSCT regarding the availability of new facilities.

PULSE Replacement

Pulse replacement continues to progress as part of the wider LIMS programme. The initial appointment of the Project Manager fell through and a new appointment has been made. The Business Case for blood production and tracking will commence in Spring 2019 and is still on track for approval by Autumn 2019.

Payment to Board Members

A Determination approval by DoFNI is still awaited.

Infected Blood Inquiry

The Chief Executive, Medical Director and Head of HR & Corporate Services attended a meeting co-ordinated by DoHNI, Health Protection Branch on 12 November 2018. There were representatives from each Trust, BSO, PHA, HSCB, DLS and DSO. Agreement was reached that there should be a co-ordinated approach to the response from NI health bodies. Additional legal resource should be in place early 2019. Mrs Jackson further advised that there is now a Regional Group, chaired by the Department's PHD and Infection Control. There have been a series of meetings organised for January – April 2019 where legal services advice, resourcing, communications and media enquiries will all be discussed.

Mrs Jackson also advised that further "Rule 9" responses and a witness statement have been submitted to the Inquiry's solicitors. NIBTS is now in the process of providing the Inquiry with relevant supporting information which will be scanned and uploaded to the Inquiry Team as per their instructions.

7. Report from Medical Director

7.1 Platelet Strategy paper and associated Equality Screening Template

Dr Morris presented the paper for Board's consideration and approval. The objectives of the paper are to predict demand and recommend the relative proportions of apheresis component donations and pooled platelets. The paper makes a number of recommendations which have been agreed by the Senior Management Team. There are 4 options each of which are described, evaluated and scored. Dr Morris advised that Option 2 achieved the highest score and is the preferred option. The Board discussed Option 2 and Dr Morris responded to all queries. Mr Henderson had a query regarding a formula on page 10, Dr Morris advised that it was per litre. After further discussion the Board approved Option 2 on the Platelet paper which is contingent upon implementation of platelet additive solution and high titre testing of pooled platelet components.

Equality Screening document

Dr Morris discussed the equality screening document that was submitted with the Platelet Strategy paper. It is a requirement that all strategy documents have an equality screening template completed.

Mrs Lindsay had a query on page 3 regarding wording in the second last paragraph and after discussion with Dr Morris it was agreed to remove the word 'leave' and replace with 're-suspended'.

8. Report from the Finance & IM&T Manager

8.1 Finance and IM&T report from the period 01/04/2017 – 31/10/2018

Mr Bell presented the report to provide the Board with the financial position at the end of October / month seven. Mr Bell projected a breakeven position with a small surplus at year end.

Revenue

The cumulative revenue position for the 7 months ended 31 October 2018 shows a net surplus of £133k. NIBTS, excluding haemophilia, shows a deficit of £16k. Factors influencing the deficit include Non Pay, net effect of excess expenditure on plasma products and blood delivery and a number of areas which are showing under spends. The plasma product expenditure has been impacted by the transfer of the immunoglobulin stock to Belfast Trust as part of the change in arrangements for immunoglobulin supply. The excess expenditure on plasma products and blood delivery are offset by additional income. Actual income is £696k more than planned. This is due to additional income for plasma products and blood delivery.

Capital

Capital Resource Limit (CRL) of £243.6k has been provided to NIBTS in respect of laboratory equipment, vehicles and ICT. The procurement process is on-going for two key items of laboratory equipment, vehicles and ICT refresh. A business case is being prepared for further laboratory equipment. Capital expenditure is on schedule. Mr Henderson enquired about due dates of the new vehicles. Mr Bell advised that the vehicles had been ordered and delivery was anticipated before the end of the financial year. Mrs Lindsay had queries regarding the Summary Budget Report and overspends. Mr Bell responded to all queries.

Prompt Payment Policy

Compliance with the prompt payment policy for 7 months to 31 October 2018 was 97.0% and is on target.

Monitoring

In overall terms, the notional value of blood components issued to hospitals is 6.6% below the Service Level Agreement (SLA) value at the end of October 2018. The Belfast Trust (-9.4%) and South Eastern Trust (-11.6%) are currently outside the SLA tolerance limit. An adjustment will be agreed with each Trust at the year-end as appropriate. Mr Lennon enquired about the figures, Mr Bell advised there was a time lag in SLA's catching up with product required but would all be factored into year-end projections.

Shared Services

NIBTS payment, income and payroll services are all provided by BSO Shared Services Centre (SSC). A monthly activity report is received from BSO on these services and services are being delivered in accordance with the SLA. A number of governance

issues arising from previous internal audits of BSO SSCs are currently being addressed by BSO.

8.2 Information Security Review

Mr Bell presented the briefing paper for Board's information. HSC Cyber Security Team arranged for all HSC organisations to have a information security review. This consisted of an analysis against ISO27001 which is the international information security standard.

As well as a Regional Report, NIBTS received a specific NIBTS report. An action plan will be developed and progress reports will be made to NIBTS Governance & Risk Management committee meetings and Board as required.

Whilst there were areas highlighted for improvement, NIBTS was commended on good practice particularly regarding vulnerability scanning. The Board discussed NIBTS systems, Mr Bell and Ms Macauley advised on process' and tests. Mr Henderson enquired about the credentials of the Cyber Security Team. Mr Bell advised that the team would be well qualified and specialised staff who would be abreast of all developments.

9. Report from Quality & Regulatory Compliance Manager

9.1 Quality Management System Report

Ms Macauley presented the report

Open Incidents

The overall number of incidents raised is consistent with previous months. Closure of incidents within the target 30 days continues to present a challenge. There are two main factors contributing to this during October 1) donor travel combined with staffing levels of Nurses in Donor Services meaning covering sessions has taken priority and 2) several incidents involving corrective actions with long target dates some of which are dependent on external parties.. Ms Macauley advised that NIBTS require to show improvement in this area and aim to do so before March 2019. A paper re the investigations into travel incidents to date has been prepared to share with MHRA which outlines the actions taken to reduce and the NIBTS proposed approach to investigation of future travel related incidents which it is anticipated will reduce the investigative burden for this type of incident. Ms Macauley advised that after reading external audit reports from other blood establishments, NIBTS have similar issues to those raised as findings. Mrs Lindsay voiced her concerns regarding staffing, Ms Macauley advised that both she and the Chief Executive are working on getting systems in place to address. Mr Lennon enquired what would be a reasonable target for March 2019. Ms Macauley advised that there should be a justifiable reason for any incident remaining open after 30 days.

SOPs Beyond Review Date

Target for SOPs beyond review is set at 4% or below. Currently NIBTS are meeting this target organisationally. However, the target is not being met by three departments. There are currently 14 SOPs beyond their review date by 60 days or more. It has been agreed at QIR departmental meetings that 'over 60 days' documents would be

prioritised for review / revision. During these meetings it has been noted that some of these documents have specific reasons for delaying reviews.

Change Control – Past Due Date

There has been a small improvement in the number of changes past target. Legacy changes, however, remain the main area of concern. These are reviewed regularly including consideration of any risks associated with the delay in completion. Mrs Lindsay enquired about the process of assessing the risk for changes. Ms Macauley advised that there is a risk matrix which is followed when assessing risks associated with current changes however for those 'legacy' changes and the acceptability of suspending, risk is assessed by the department head and this perhaps could be improved. Ms Macauley advised that the Quality Department intended to initiate a more formal documented risk assessment of all current open legacy changes to provide further assurance that the delay in progression would not present significant risk.

Mrs Lindsay further enquired if a date can be set to get these changes closed. Mrs Jackson indicated that this would not be practical however assured Mrs Lindsay that work to close these changes would be progressed. Mrs Jackson noted that additionally the task and finish group for change control continued to work towards making the process more efficient and effective.

Audit – Scheduled Audits Completed

Ms Macauley advised that the quality of audits have improved since the introduction of the new checklists and training. There are three audits outstanding which will be completed shortly.

10. Report from Head of HR & Corporate Services

10.1 Key Performance Indicators report

In Mr Ritchie's absence, Mrs Jackson presented the KPI report. Mrs Jackson advised that DoHNI have no concerns with NIBTS figures.

Staff Absence the figure has again reduced to 6.31% although the short-term sickness figures remain relatively high.

SDRs Complete

The percentage has increased to 69.5% and is expected to be >90% by year end.

CAPAs within 30 days the high number of incidents remain due to challenges with resources in Donor Services and Laboratories.

Changes Outside Target the high number of changes includes legacy changes.

Audits Completed on Time this is due to resourcing issues within the Quality Dept.

Invoice Payment within 30 days currently .6% below target.

11. Report from Laboratory and Donor Services Manager

11.1 Business Case for 3 cooled incubators for Hospital Services

In Mrs Geddis' absence, Ms Macauley presented the Business Case to the Board.

Ms Macauley advised that the two current incubators are old, experiencing frequent breakdowns and replacement parts are increasingly difficult to source. In addition to the two incubators needing replacing, a third is required to ensure deliveries of blood, blood products and blood components to hospitals are maintained at the appropriate temperature. The Board had previously received the business case with their papers, discussed and approved the case.

12. Any Other Business

There was no further business.

13. Action list from meeting held 30 August 2018

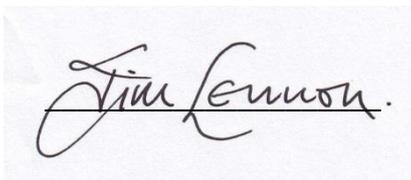
Action	Responsible Person
Request a briefing / proposal paper re: NIBTS / DoHNI meeting 11/01/2019	Mrs Jackson

14 Dates of next meetings:

Extraordinary Board meeting – 1 item agenda – Friday 11 January 2019 at 9.30am – Lecture Room

Next full Board meeting: Thursday 7 February 2019 at 11.30am – Lecture Room

Signed:



Dated:

7 February 2019