



**One Hundred and Forty Ninth meeting of the NIBTS Agency Board  
Thursday 18 June 2020 at 11.30am  
Venue: Video Conferencing meeting**

**Present:** Ms Bonnie Anley – Non Executive Chair  
Mrs Lorraine Lindsay – Non Executive Member  
Mr Ian Henderson - Non Executive Member  
Mr Philip Cathcart – Non Executive Member  
Mrs Karin Jackson – Chief Executive

**In attendance:** Dr John Simpson – Interim Medical Director  
Mr Glenn Bell – Finance & IM&T Manager  
Ms Angela Macauley – Quality & Regulatory Compliance Manager  
Mrs Alison Geddis – Laboratory & Donor Services Manager

Mrs Alison Carabine – Minutes

**1. Apologies**

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 Forty Eighth meeting held on 7 May 2020 and action list**

Ms Anley requested an amendment to Section 8 – EU Exit. The wording was amended. The minutes were signed off as an accurate reflection of the meeting. The actions from the previous meeting had been completed.

**4. Matters arising from minutes of meeting held on 7 May 2020**

There were no matters arising.

**5. Chair's Business**

- Ms Anley congratulated the efficiency and agility of NIBTS staff and management team working through these difficult times.
- On behalf of Board, Ms Anley extended good wishes for a speedy recovery to Mr Ritchie.
- On behalf of Board, Ms Anley welcomed Dr John Simpson as Interim Medical Director. Dr Simpson in turn advised he was very happy to be part of NIBTS.

- Ms Anley advised she had received correspondence from the Permanent Secretary and HSC Chief Executive advising of a new HSC Strategic Framework Management Board.
- Ms Anley advised that she had received feedback from the Minister of Health who found his visit to NIBTS both informative and enjoyable. Mr Swann expressed his thanks and congratulated NIBTS on work achieved during the current pandemic.
- Ms Anley further advised that the Minister of Health had recently participated in the NI Chair's Forum and will continue to do so hopefully on a six week basis.

## **6. Report from Chief Executive**

### COVID-19

Mrs Jackson updated the Board and advised that the measures established, which have been previously reported, remain in place. NIBTS continues to maintain stock levels and services, as activity in hospitals increase. Risk assessments are being undertaken and additional arrangements are being put in place to accommodate more staff in the HQ building as activity increases.

Testing of COVID-19 swabs within NIBTS has been paused as BHSC currently have sufficient capacity to test. This will be kept under review. Arrangements for collaboration will be kept under review as the anticipated second surge approaches.

COVID-19 antibody testing is being validated. Discussions are on-going with the regional Expert Advisory Working Group regarding the potential of seroprevalence studies of blood donors. A number of potential Convalescent Plasma donors have been identified and sessions have been set up for donations. The new COVID-19 test area for Reference Laboratory will be operational at the beginning of July 2020. Antibody testing for health care workers is being rolled out across HSC.

Since the previous Board meeting, one member of staff has tested positive for COVID-19. However, there is no evidence of staff to staff or donor to staff/staff to donor transmission. Mrs Lindsay enquired about the staff member. Mrs Geddis gave the background of the staff member and advised that there have been no further cases in NIBTS. Mrs Jackson advised of the guidance from PHA regarding employers' responsibilities if a member of staff tests positive.

Ms Anley enquired about donation sessions. Mrs Geddis advised that NIBTS is happy with practices in place and staff compliance with these new practices, i.e. triaging donors prior to donation.

Ms Anley further enquired about the previous PPE issues. Mrs Geddis advised of the process, the partnership with Trade Unions and the inclusion of staff in the development of this process. Mrs Jackson advised that this topic will be discussed at the next Governance & Risk Management meeting.

Mr Henderson enquired if the new appointment system for donors was working well. Mrs Geddis advised that it is a successful development both for donors and staff, with positive feedback from both parties and will continue post COVID-19.

#### Pathology Transformation

Mrs Jackson advised that funding for the region wide pathology transformation has been approved by the Minister. The programme is not fully funded and NIBTS is working in conjunction with DoH and the Pathology Network to prioritise areas for investment to support the transformation over the next two years. Ms Anley enquired how this fits into the new Strategic Framework. Mrs Jackson gave the background and initiatives of the new strategy. One of the strands in the new framework refers to pathology transformation, which has received funding to take forward projects which commenced in 2019/2020. DoH requests that NIBTS host the transformation, work to support the development of the blueprint document on proposed pathology management structures. Ms Anley enquired how this work would affect NIBTS. NIBTS will develop positions/posts for additional staff, the timescale of which will be in the last quarter of the financial year. Mrs Jackson further qualified this by outlining the processes for developing job descriptions and the recruitment of staff. Ms Anley enquired about the role of the Head of HR & Corporate Services as he remains on sick leave. Mrs Jackson advised of the support networks available both within and external to NIBTS.

#### Donation Facilities in the West

Progress on this has been paused due to COVID-19. When current guidelines are relaxed this will be followed up.

#### PULSE Replacement

The completion of the BPAT business case has now moved to July as additional options for the delivery of the project have been identified and need to be assessed within the business case. Mrs Jackson advised the Board of these additional options. There will be no negative impact on NIBTS.

#### UK Infected Blood Inquiry

Mrs Jackson advised the Board on recent correspondence to the Core Participants regarding future Hearings. The Inquiry Team is working on a mechanism to conduct the hearings remotely. The Hearings scheduled for June 2020 have been paused and moved to the end of the year. Mrs Jackson further advised that evidence from all blood establishments will be one of last areas to be called to the Hearing. Mrs Jackson also advised that the Inquiry Team have not requested any additional information from NIBTS.

#### Medical Director Post

Mrs Jackson welcomed Dr John Simpson as Interim Medical Director to NIBTS and advised that Dr Simpson will support the Senior Management Team and the Board in assuring that appropriate governance and staff arrangements are in place in NIBTS. Dr Simpson's contract will be for a period of six months pending the recruitment of a substantive Medical Director. Mrs Jackson further advised that NIBTS HR Dept are

progressing the recruitment of the post. Ms Anley enquired of Dr Simpson if he could give medical assurances to the Board. Dr Simpson advised that he has met with the Medical Team, Senior Managers, Quality Team, the Chair the Governance & Risk Management Committee and had tours of the Laboratories. He is very impressed with the work conducted within NIBTS and the dedication of staff, to date can provide assurances to the Board. Dr Simpson thanked Mrs Jackson for the detailed induction to NIBTS.

Mrs Jackson advised that Dr J Hamilton has terminated his locum arrangement with NIBTS from the end of June 2020 due to increased workload in his other position. Dr Simpson advised of a number of options for medical staff cover that are being considered. Ms Anley enquired if there was a contingency for 'On-Call' in light of Dr Hamilton's resignation. Mrs Jackson advised of other options available.

#### Head of HR & Corporate Services

Mrs Jackson advised that the Head of HR & Corporate Services remains on sick leave and will require a phased return to work which will probably not commence until the autumn. Mrs Jackson meets with Mr Ritchie regularly by video conferencing and advised that he is making progress. The Board wished Mr Ritchie a speedy recovery.

#### Blood Mobile

Mrs Jackson advised that the Blood Mobile was on loan to NHSBT to help with BAME work in sickle cell blood exchange transfusions. It was due to return to NIBTS at the end of June 2020. However, this will be delayed as the Blood Mobile was involved in an accident en route back to NIBTS and requires some bodywork repair. This will have no impact on the delivery of business within NIBTS as currently the Blood Mobile can not be used for the collection of blood due to social distancing requirements. However, there may be other ways the Blood Mobile can be utilised.

#### EU Exit – Brexit

Mrs Jackson advised that there has been no further update relevant to NIBTS and all local meetings have been paused. Mr Bell advised that DoH have provided standard wording to be included in the Annual Report.

## **7. Audit Committee Update**

Mr Cathcart (Chair) advised of a lengthy meeting prior to Board. There were a number of year-end reports considered.

#### Progress Report

Finance Audit – Satisfactory level of assurance provided.

Stock Taking - was cancelled due to COVID-19 resulting in the auditors being unable to attend.

Cyber Security - Limited assurance.

With regard to Cyber Security, Mr Cathcart advised of a detailed report by Mr P Jameson, BSO Internal Audit which received a limited assurance due to a number of IT security frameworks / governance tools not being in place.

#### Internal Annual Report 2019/20

Mr Cathcart noted that the Head of Internal Audit Annual Report had been presented and provides a satisfactory level of assurance on the adequacy and effectiveness of NIBTS framework of governance, risk management and control.

#### Internal Audit Plan 2020/2021 - 2022/2023

Mr Cathcart advised that the three year plan, which included 55 audit days each year, had been approved. The plan for 2020/21 has been revised to take account of COVID-19.

#### Shared Services

Mr Cathcart reported that further audit work on BSO Shared Services had been undertaken and improvement in the level of assurance reported.

#### Draft Annual Report and Accounts and Draft Report to Those Charged with Governance

Mr Cathcart advised that Annual Report and Accounts had been presented by Mr Bell. A breakeven position was achieved for 2019/2020.

It was noted that additional wording had been provided by DoH in a number of areas and that further wording was pending in respect of COVID-19. In addition, some additional wording had been recommended by NIAO.

The draft Report to Those Charged with Governance had also been presented. The accounts would receive a qualified opinion. This was due to COVID-19 restrictions preventing External Auditors attending and verifying year end stock counts. It was recognised that this was outside the control of NIBTS.

Ms Anley enquired if this could be challenged and if other HSC bodies had the same issue.

Mr Bell explained the nature of the high stock values and the materiality levels relevant to NIBTS accounts. Within HSC, this situation was unique to NIBTS.

Mr Henderson advised that he was very concerned that wording in the draft report did not adequately indicate that the qualification was outside the control of NIBTS, but was the result of COVID-19 pandemic and auditors inability to travel to NIBTS. If possible, the wording of the report should be changed.

Mr Bell advised he would discuss re-wording with auditors.

Due to wording additions required and the need to include a comment referencing the qualification of the accounts in the Governance Statement, it was agreed that a

revised draft of the Annual Report and Accounts be circulated to Board members for clearance prior to final audit review and presentation to Board for approval.

#### Trust Fund Annual Report and Accounts

Mr Cathcart advised that Trust Annual Report had been presented. The only issue of note was the potential fall in valuation of investments at the end of March 2020.

#### Fraud

Mr Cathcart advised the Board that there was one incident of potential fraud which had been referred to BSO Counter Fraud Service.

### **8. Report from the Finance & IM&T Manager**

- **Finance and/ IM&T report from the period 01/04/2018 – 31/05/2020**

Mr Bell presented the report to provide the Board with the financial position for the first two months.

#### Revenue

The cumulative revenue position for the two months ended 31 May 2020 shows a net surplus of £164k. NIBTS, excluding haemophilia, shows a surplus of £133k. A breakeven position by year end is projected. Mr Bell also outlined the cost implications of COVID-19.

#### Capital

A Capital Resource Limit (CRL) of £187.2k to date has been allocated by DoH. This is in respect of the PULSE Server Replacement, Cyber Tenable and Printers, General Capital requirements for the year have been identified to DoH and confirmation of funding level is pending.

#### Prompt Payment Policy

Compliance with Prompt Payment Policy for 2 months to 31 May 2020 is 96.9%.

#### Monitoring

In overall terms, the notional value of blood components issued to hospitals is 17.2% below the Service Level Agreement (SLA) value at the end of May 2020. Trusts are showing activity level of 10%-21% below SLA. The reduced activity results from COVID-19. The position will be kept under review and adjustments agreed with each Trust at year end.

### **12 Business Case - Microsoft Client Access Licences**

Mr Bell presented the business case and advised that Microsoft Client Access licences were reaching end of life and require prompt attention to ensure that the environment available for use will remain supported. This was also reflected in Internal Audit's Cyber Security Report.

Mr Bell went through the business case outlining options. The Board discussed and approved the business case.

## **9 Board Self-Assessment**

Mrs Jackson advised that the current document does not reflect the DoH guidance on the completion of the self-assessment. She also advised that BSO Internal Audit will be reviewing Board Effectiveness this year and that the Board Self-Assessment Template will be one of the pieces of evidence that they will look at. Mrs Jackson took the Board through the guidance and presented sample responses to some of the questions asked that she and Mr Bell felt better reflected the guidance.

Ms Anley advised that her feeling was that the Board should have its own voice and it was up to the Board to manage its own effectiveness. Ms Anley advised she would like the version that was mutually agreed by all of the Non-Executive Board Members, emailed to Mrs Jackson and copied to NEMs on 4 June 2020 to be considered.

Mrs Lindsay enquired about previous Board Self-Assessment documents. Her recollection was that there had not been particular recommendations, albeit the document had been completed similarly in past years. Mr Cathcart recalled that the last time the document was audited, the only recommendation was a fourth NEM for the Agency Board. Mr Henderson said that this was an administrative piece of work which he felt was better in its current (perhaps imperfect) form as it represented the Board, rather than being reviewed by SMT.

All the NEMs agreed that it would be better to approve the Self- Assessment document to which they had all contributed as it represented the voice of the majority of the Board. Ms Anley advised Mr Bell not to continue with reviewing that document and thanked him for his contribution. Ms Anley felt that there had been a misunderstanding in relation to the review and apologised to Mr Bell and Mrs Jackson for the time they had spent in making changes to Sections 1.1 and 3.1 of the Self-Assessment document.

Mrs Jackson said that it was for the Board to decide if they wished to proceed to approve the original Self-Assessment document and she would like her advice to be noted in the minutes. Ms Anley said that that course of action was not possible as the original document had only been sent to Board members that morning but that she would consider presenting it to the next Board meeting in July for approval.

Ms Anley proposed that Dr Simpson facilitate a review of governance arrangements at NIBTS as she was now over one year in post and Dr Simpson was already assisting with some areas of NIBTS governance. Mrs Jackson suggested that further discussion on the scope of this review should occur outside of the Board meeting. The Board agreed that Ms Anley and Mrs Jackson would meet and scope out a Terms of Reference for the review.

Ms Anley advised that she had some queries regarding the wording in the Governance Statement contained within the Annual Report. Ms Anley also queried the absence of the draft Annual Report within the Board papers. Mr Bell gave some background to the current Governance Statement and suggested an approach to encompass an already planned review of the Board Assurance Framework. It was also agreed that the review of the Board Assurance Framework should continue to progress and that the work could be included within the scope of the governance review.

## **10 Report from Deputy Quality & Regulatory Compliance Manager Quality Management System Report**

Ms Macauley presented the report.

### Documents

Targets relating to SOP documents reviewed within appropriate review periods were met. Targets relating to policy documents have not been met since January 2020. The majority of the overdue policies fall within two departments; HR & Corporate Services and IM&T. Since completion of the report all IM&T policies and the majority of HR & Corporate Services have been revised. As of 3 June 2020, five policies are outside their review period.

### Incidents

The number of incidents raised remains consistent with previous months as does the severity distribution, the majority being classified as yellow/green (minor incidents). Compliance with the KPI target for incident closure within 30 days has been poor. As indicated previously NIBTS intends to discontinue the use of this KPI provided a more appropriate KPI can be identified which will ensure appropriate monitoring of the completion of the various incident stages within acceptable target dates. Ms Macauley advised her department are currently working on KPI targets and should have a clearer idea on the approach to take before the end of July 2020. Of the eight incidents open at the time of compiling the report, five had appropriate time extensions and the remaining three have now been closed.

### Changes

Ms Macauley advised of a slight decrease both in the number of changes open and the number past their target date. 26 of the changes open are directly related to COVID-19, which in turn had an impact on the figures. Two of the open changes relate to suppliers and are outside the control of NIBTS. Each department has been issued with a list of their open changes and its current status which will allow a review of any slippage and associated risk.

### Audits- Internal & External

The internal audit schedule for 2020 has now been developed. Those audits due during January - April 2020 have been completed with no major or critical findings recorded.

Mr Henderson advised that these figures are excellent and congratulated Ms Macauley and NIBTS staff.

Mrs Lindsay congratulated Ms Macauley and her team for getting audits back on schedule and with the newly qualified auditors, should remain on schedule.

Dr Simpson advised that he was impressed by the way NIBTS uses quality and improvements as everyday work and not as an 'add on'.

Ms Macauley confirmed that she is confident that NIBTS is maintaining the quality system to an appropriate level to comply with regulatory requirements.

Ms Macauley advised that UKAS had wanted to change from the original date in December to auditing in July / August 2020, however, they have now reverted back to the original time in December / January but this has not been finalised.

### 11 Report from Head of HR & Corporate Services

In Mr Ritchie's absence, Mrs Jackson presented the report.

#### Key Performance Indicators

Donor / Customer – all targets have been achieved.

People – target has been achieved.

SDRs - outside target. However, this reflects the normal position for this time of year. Last year's target was not achieved due to COVID-19.

Quality – previously discussed.

Financial Breakeven – outside target due to an underspend. Mr Bell is confident of reaching target by year end.

### 13 Any Other Business

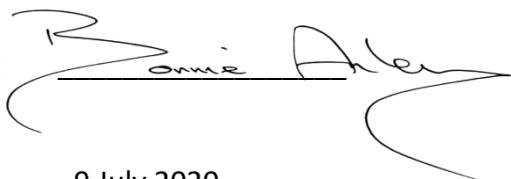
Ms Anley advised that she will be responding to DoH Management letter.

### 14 Action list

Action	Responsible Person
Agree wording with auditors re: accounts	Mr Bell

**Date of next meeting: 9 July 2020, 11.30am via video conferencing**

Signed:



Dated:

9 July 2020