



**One Hundred and Sixty Seventh Meeting of the NIBTS Agency Board  
Thursday 12 January 2023 at 2.00pm  
Venue: Video Conferencing meeting**

**Present:** Ms Bonnie Anley – Non-Executive Chair  
Mr David Small – Non-Executive Member  
Mr Brendan Garland – Non-Executive Member  
Mrs Karin Jackson – Chief Executive

**In attendance:** Mr Glenn Bell – Finance & IM&T Manager  
Ms Angela Macauley – Quality and Regulatory Compliance Manager  
  
Mrs A Carabine – Minutes

**1. Apologies**

Mr Graham, Mr Gillespie and Mr Ritchie.

**2. Declaration of potential conflict of interests with any business items on the agenda**

There were no declarations of potential conflicts of interest.

**3. Minutes of One Hundred and Sixty Sixth meeting of the NIBTS Agency Board meeting held on 10 November 2022 and action list**

Some minor changes were made to the minutes to better reflect the discussions. The minutes were then agreed as an accurate reflection of the meeting and signed off by the Chair.

**Action List:**

Write to Director of Secondary Care regarding Statutory Function for NIBTS re: Pathology – Mr Small advised that he did write to the Director Secondary Care and has shared the holding response with Board members. A substantive response is still awaited.

All other actions had been completed prior to the meeting, with the exception of:

Collection Strategy to be presented to Board before 31 March 2023 – to be kept on the action list until completed.

As part of the Collection Strategy a Detailed paper on Donor core issues, marketing and any changes – Mrs Jackson advised that this paper will be brought to a future Board meeting. Mrs Jackson further advised that work is on-going and additional donation sessions will now be offered on Saturdays.

#### 4. Matters arising from the minutes of meeting held on 10 November 2022

There were no matters arising.

#### 5. Chair's Business

- Ms Anley welcomed all back after the Christmas break and thanked the NEMs for agreeing to additional meetings and workshops.
- On 29 December 2022, the Chair, NEMs and the Chief Executive met with the CMO and Director of Secondary Care to discuss the future of pathology services. Ms Anley advised that it was a helpful and informative meeting.
- Investigation Report – On 1 December 2022, the Chair and NEMs met to discuss the Investigation Report. Mr Graham and Mrs Jackson have assured that work is on-going and progressing.
- Remuneration & Terms of Service Committee – met on 9 December 2022. The Committee have drafted correspondence to the Chief Executive on an extension to her tenure. Ms Anley advised that work was in progress and there was nothing substantive to report to Board at this stage. The minutes of 9 June and 8 November 2022 have been approved. The minutes of 9 December 2022 are still in draft form and will not be ratified until the next meeting.
- Partnership Agreement – A Board Workshop has been arranged for 2.00pm on 31 January 2023. There will be a presentation from Mr S Mungavin. The Chair and Chief Executive will meet with Mr Mungavin prior to the workshop.
- Two further workshops will be arranged during February and March 2023 to discuss Board Self-Assessment and Board Effectiveness.
- Mid-Year Accountability meeting – the Chair and Chief Executive attending this meeting with DoH on 10 January 2023. Among items discussed were; finance, Pathology and Donor Strategy. The tenure of the Chair expires on 31 March 2023. DoH advised that the Chair's position has yet to be advertised but is in hand.

Mrs Jackson concurred with Ms Anley advising that DoH were positive and supportive. The Deputy Permanent Secretary had recently had a tour of NIBTS including the laboratories which helped the understanding of the work of NIBTS.

#### 6. Chief Executive's Report

Covid-19 – The number of staff required to self-isolate due to illness or contact is presently stable. There have been some challenges due to the high level of general illness (seasonal viruses, non-Covid) amongst staff and donors. There remains no evidence of staff to staff or donor to staff/staff to donor transmissions.

The Micro Lab remains on stand-by to support the testing of COVID-19 swabs.

General sickness – There is a marked increase in short-term sickness levels, which reflects what is happening within the general population. Mrs Jackson noted this is being monitored and the impact on services mitigated where possible.

Industrial Action – so far, this has had limited impact on sessions due to positive engagement with local and regional representatives. The situation will be kept under review. Mr Small enquired if there was a contingency plan. Mrs Jackson advised there was. In addition, NIBTS have applied for derogation. The focus is on platelet collection and enough red cell stock for major trauma events. Mrs Jackson further advised that the first set of industrial action was phased walkouts. NIBTS is working with the Unions who are required to give a statutory seven days notice of any strike action.

Plasma for Fractionation (PFF) – The Memorandum of Understanding (MoU) between DHSC, NHSBT and devolved administrations is with DoH for approval. Monthly meetings with four nations’ representatives are ongoing.

PULSE Replacement/Blood Production and Tracking (BPAT) Project – the tender documentation for the project is scheduled to go live by the end of January 2023. It is hoped that the contract can be awarded by the end of May 2023.

UK Infected Blood Inquiry – The final submission from NIBTS to the Inquiry was submitted on 16 December 2022. The submission was included with Board papers. Due to time constraints, it was not possible to share the submission with Board prior to the final submission. The closing statement to the Inquiry from Counsel representing NIBTS is scheduled for 27 January 2023. This can be viewed on YouTube.

Mr Garland enquired what is the submission’s standing considering Board did not see it prior to being submitted. Mrs Jackson advised in terms of its standing, as it has now been submitted, it is an IBI document and now in the public domain. Mr Garland further enquired if the document needed to be officially ratified by Board. Mrs Jackson advised it did not. However, Board need to note it and advised if they are content. Board discussed and advised they support and are content with the submission. Mr Small enquired of the next steps. Mrs Jackson advised once the closing statements are conducted, there will be a timetable for the completion of the IBI Chair’s report. This will include recommendations which will be considered by NIBTS.

Head of HR & Corporate Services – Final interviews for the post are scheduled for 18 January 2023. Mr Garland and Mrs Jackson will be on the panel with one other.

Infrastructure Upgrade – was discussed at the recent Mid-Year Accountability meeting. An update on the ten-year capital has been requested by DoH and will be submitted by the end of January 2023. DoH further advised that there is no guarantee of funding. However, DoH is are mindful of all regulatory requirements.

Occult Hepatitis B Testing – NIBTS consultants are taking the lead on the development of plans to deliver the look back exercise.

Medical Director Update – Interviews for the post are scheduled to occur before the end of January 2023. There will be three stakeholder interviews which will give an opportunity to engage with the candidate. Ms Anley enquired if the stakeholder interviews prior to the panel interview would prejudice the panel. Mrs Jackson advised on the process with each panel and the final interview. Information from the stakeholder groups will be returned to HR, not her and following the final interview the panel will consider all information.

On-line appointment system – Due to contractual issues, the implementation of the on-line appointment system has been delayed until the end of February 2023.

## **7. Blueprint Programme**

The December Board meeting was cancelled due to the focus on industrial action for Board members. A summary document of activity to the end of November 2022 was included with Board papers. Mrs Jackson advised that the key issue is to engage in the options for shortlisting and the timelines for implementation. Mrs Jackson will share the 'Options Shortlisting Appraisal Process'. Workstreams and design are on-going and will be for agreement by the Blueprint Board at the end of January 2023.

Ms Anley advised that during the Mid-Year Accountability meeting, she did discuss the concerns about the statutory functions for NIBTS Board. DoH anticipated responding to NIBTS Board by the end of January 2023. Board discussed on-going service transformation and workforce planning.

## **8. Finance Report**

### Revenue

Mr Bell presented the report for the 8 months ended 30 November 2022.

The cumulative revenue position showed a net deficit of £712k. NIBTS excluding haemophilia, shows a deficit of £286k.

The pay position, shows a surplus of £258k, due to underspends in most areas due to staff vacancies arising from staff turnover. The Non Pay position shows a deficit of £631k which is primarily due to overspends on Drugs (£182k), Laboratory (£103k), Heat, Light and Power (£188k) and Transport (£157k).

However, at this time a breakeven position was projected. During December 2022, DoH issued the 2022/23 pay award circulars and NIBTS are working on the assumption these will be fully funded but are awaiting confirmation. Mr Small queried, and there was discussion on, the implications of the pay award not being funded. Ms Anley enquired if funding had been received in respect of additional energy costs. Mr Bell advised that appropriate funding will be available for Energy costs. Ms Anley further enquired when will it be known if the pay awards will be funded. Mr Bell advised, hopefully by mid-January. Mrs Jackson noted that all submitted financial returns to DoH have been clear on assumptions, which was again discussed at the Mid-Year Accountability meeting.

Mr Garland enquired about overspends in Medical Services and if they were substantive or normal. Mr Bell advised the overspend in Medical Services was due to incremental drift and was pay related.

#### Capital

A Capital Resource Limit (CRL) of £488k has been allocated by DoH for 2022/23. This comprises of £171k for General Capital and £317k for ICT projects. All projects are in progress and scheduled for completion by 31 March 2023. Mr Bell noted the only caveat would be slippage on supplier lead times and delivery.

#### Prompt Payment Policy

Compliance with Prompt Payment Policy remains below target at 93.3% for the eight months to 30 November 2022.

#### Monitoring

The notional value of blood components issued to hospitals is 3.1% below the Service Level Agreement (SLA) value at the end of November 2022. Trusts are showing activity levels ranging from 7.7% above to 12.4% below SLA. This position will be kept under review and adjustments agreed with each Trust as appropriate.

Mr Bell advised of correspondence from DoH in respect of 2023/24 Financial Planning and that a reply would be made by 27 January 2023. Mrs Jackson advised that opportunities to review and modernise donor engagement were being considered which may lead to cost reduction in this area.

### **9. Audit Committee Update**

In the absence of Mr Small, Mr Garland reported on the Audit Committee meeting held on 1 December 2022. Mr Garland advised that there was nothing substantive to report and noted a discussion on; the Progress Report, the Letter of Understanding was reviewed and discussed. There was a request for the three year audit plan to be circulated, which was.

### **10. Quality Management System Report**

Ms Macauley presented the Quality Management System report and noted that the report reflects staff sickness levels.

Documents – The target of 4% was not met for either SOPs or Policies, which are currently sitting at 5% and 9% respectively. Two departments (Quality and HR & Corporate Services) account for a large percentage of the overdue SOPs. Overdue Policies are spread across a number of departments. This has been discussed at the QIR meetings, with the need to address emphasised. Ms Macauley advised that the number of overdue documents have reduced, but have no particular issues.

Incidents – compliance with target dates for Investigations during September - November 2022 decreased with figures of 69.6%, 71.4% and 67.9% recorded. Staff illness appears to be the significant factor in the slippage. Ms Anley enquired if sickness levels have recovered. Mrs Jackson advised a small amount, but it reflects what is happening in society.

Investigations – Compliance with the completion of CAPAs within target date has also been disappointing during the September- November period, although improvement was noted during November, noting that staff absence has contributed to the slippage. Ms Macauley advised in future, more serious incidents will be separated from less serious ones. The metrics are currently sitting around 70% and not at target of 75%.

Changes – The quality metrics produced for December 2022 indicate that the number of open changes and the number past the target date has been stable of the past number of months. 22 changes past target date in November 2022, shows 13 were past target date by a period greater than six weeks. Of these 6/13 are classified as 'Amber'. Ms Macauley highlighted the six amber changes to Board.

Internal Audits – there are a number of internal audits outstanding, however, plans are in place to address.

MHRA Inspection – Action Plan – all actions within the action plan submitted in response to the MHRA inspection are progressing within target, with the exception of two findings which relate to technical agreements and user requirement specifications. A request to extend was submitted to MHRA and accepted by them. Mr Garland enquired if these outstanding actions can be addressed by the end of January 2023. Ms Macauley advised they could and on-going work is making good progress.

Ms Macauley provided assurances that the Quality Management System is operating at a satisfactory level.

## **11. Key Performance Indicators (KPIs)**

The KPI report was presented by Mrs Jackson who advised that there has been a significant increase in staff absence. Workload is being prioritised and is hopeful that staff absence will resolve in the coming months. The need to import stock is reflective of our ability to collect and, in the meantime, NIBTS is augmenting sessions and moving staff to cover gaps. Mrs Jackson further advised that work is being conducted on operational KPIs and the data will inform the collection strategy. Mrs Jackson further advised Board on short notice cancelled appointments by donors and DNA (Do Not Attend) which are running at 25% of all collections. To counteract this, donor administrative staff are trying to book 25% more donors to make up the short-fall.

Mr Small enquired if the proposal brought to the November Board meeting by Mr Gillespie will help the baselines. Mrs Jackson advised they should. Mr Small further enquired if the import target relates to the collection strategy. Mrs Jackson advised it did and should be achievable. Averaging import figures equate to approximately 10 additional units per day, therefore, the collection strategy should be able to achieve this and augment the number of appointments.

Mr Small enquired if the KPI for Imports is still appropriate or does it need to be amended. Mrs Jackson considers it to be correct, but there is a need for sessions to optimise collections. This is another aspect that the collection strategy will consider.

Ms Anley enquired if one member of staff can bleed two donors. Mrs Jackson advised they can, as this is how other UK blood services operate, which will also be included in the collection strategy. This is currently being discussed with staff on how best to implement. Mrs Jackson further advised that the framework for the strategy is ready and is being populated with data.

### 12. Business Case for Calorifiers

Mr Bell presented the business case which was prepared by the Facilities Department. Mr Bell advised that the current heat exchange is outdated (the original system was installed in 1995) and should it break down replacement parts would be difficult to source due to the age of the Calorifiers. BHSCT Estates Dept recommend replacement of the system with newer technology, i.e. Plate Heat Exchange system, which is more energy efficient and will improve business carbon footprint. Mr Bell further advised that the work will need to be completed during the summer months when heating is not required throughout the building. However, agreement will have to be sought from DoH for funding. Mr Bell appraised the Board on the Options and Risks.

Board discussed, supported and approved the business case.

### 13. Any other business

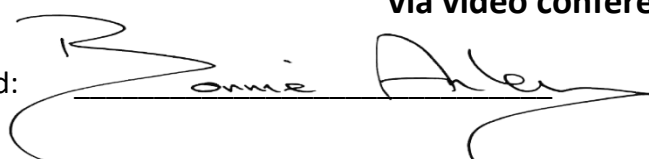
Mr Small enquired if the 2023/24 Business Plan was being developed. Mrs Jackson advised that it was and DoH were requesting submission by 31 January 2023. The Business Case will be submitted by that date. However, it will be caveated that the Plan requires Board approval and will be brought to Board at the next meeting on 2 March 2023 for approval.

### 14. Action List

Action	Responsible Person
Collection Strategy to be presented to Board before 31 March 2023	Mr Gillespie – Strategy to be tabled to Board 18 May 2023
Detailed paper on Donor core issues, marketing and any changes	Mr Gillespie – will be included in the Collection Strategy
Share the Blueprint ‘Options Shortlisting Appraisal Process’ document	Mrs Jackson <b><i>Post meeting note - document emailed to Board – 12 January 2023</i></b>

**Date of next meeting:  
Thursday 2 March 2023 at 11.30am  
via video conferencing**

Signed:



Dated:

2 March 2023