



**One Hundred and Fifty Ninth meeting of the NIBTS Agency Board
Thursday 14 October 2021 at 11.30am
Venue: Video Conferencing meeting**

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

In attendance: Ms Angela Macauley – Quality and Regulatory Compliance Manager
Dr Joanne Murdock – Medical Director (12.30pm -12.45pm)
Mr Glenn Bell – Finance & IM&T Manager
Mr Matt Gillespie – Head of Supply Chain and Testing Services

Mrs N Bryans – Minutes

1 Apologies

Mr Ivan Ritchie and Mrs Lorraine Lindsay

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

Mrs Jackson – the Remuneration and Terms of Service Committee
Mr Cathcart – Infected Blood Inquiry

All other Board members and attendees declared no conflicts of interest.

3 Minutes of One Hundred and Fifty Eighth meeting of the NIBTS Agency Board meeting held on 9 September 2021 and action list

The minutes were agreed as an accurate reflection of the meeting and signed off by the Chair.

4 Matters arising from the minutes of meeting held on 9 September 2021

No matters arising except for the following updates in respect of the action list:

Board Effectiveness Audit Findings – Mrs Jackson advised that the action plan template had been included in the Governance and Risk Management Committee papers for the meeting next week. This plan and progress will be presented to the Board to monitor progress.

Review of Trust Funds – Mr Bell reported that papers would be presented to the Board regarding the proposed expenditure. Updates on items included in the Charitable Funds Strategy will be provided to the Board by Mr Bell in future Financial Reports.

5 Chair's Business

Blueprint for Pathology Programme – Ms Anley expressed delight that the Pathology Blueprint programme was approved by the Minister. Sarah Buckley, who is currently Pathology Network Manager, has been appointed as Pathology Management Structure Blueprint Programme Manager which was welcomed by Ms Anley.

Chair's Forum – Ms Anley advised that she attended a recent event regarding NICF Programme for Governance. Ms Anley also advised that she had been elected to the Chairs' Forum Committee.

NEM Appointment - Ms Anley advised that the recruitment process was proceeding. Documentation had been agreed and the need for regulatory environment experience noted. The closing date is 9 November 2021. Providing there were sufficient applicants, the shortlisting will be the middle of November 2021, interviews scheduled for 6 December with a view to January/February 2022 start.

Ms Anley expressed her gratitude to the current Board Members for extending their term for another three months to provide continuity.

6 Remuneration and Terms of Service Committee – The committee met on 4 October 2021. A recommendation, with wording agreed by Board, had been made to DoH Sponsor Branch.

7 Chief Executive's Report

Covid-19

Mrs Jackson advised that given the season/environment/contact increase and spread of Covid-19 with schools/universities returning there was an impact on collections.

Mr Gillespie reported platelet stocks were stable. However, NIBTS had to import 98 red cells from NHSBT recently. Bookings at donations sessions were increasing. Mr Gillespie noted that feedback from UK services indicated that they are facing similar challenges.

Ms Anley asked Mr Gillespie about the number of donors. He advised of increased social media campaigns and, while there has been a dip in September, the attendance levels were now about 90% of available appointments.

Convalescent Plasma – REMAP-CAP trial has reopened nationally for Immuno-suppressed patients. NIBTS and Trusts are considering whether to participate in this new trial. NIBTS holds a small number of units available for use if required. There have been no further requests for CP following the approval of the use of monoclonal antibody therapy.

In reply to Ms Anley, Ms Macauley provided assurances to the Board by outlining the position and process in relation to MHRA, JPAC and concessionary release of CP.

Ms Anley also asked for an update on correspondence to Professor Sir Michael McBride (Chief Medical Officer). Mrs Jackson advised that Dr Piccin had been in contact with CMO's office and that there was nothing further to report.

Mrs Jackson reported that the Micro Lab remains on stand-by to support testing of C-19 Swabs.

There was nothing to report on Donor to Staff and Staff to Staff transfer of virus indicating that NIBTS safety measures are continuing to work well.

Pathology Transformation – Mrs Jackson advised that Sarah Buckley had been appointed as Pathology Management Structure Blueprint Programme Manager with an anticipated start date of January 2022 if she can be released from her current role.

Plasma for Fractionation (PFF) – still being considered by DoH.

Facilities in the West – no further update.

Pulse – approval of the BPAT business case is still pending. The procurement strategy for this is being developed.

Infected Blood Inquiry – work on Rule 9 responses is ongoing including input from the former Chief Executive/Medical Director. It is expected that UK blood services will begin providing oral evidence in November 2021.

Head of HR & Corporate Services – Mrs Jackson reported that the Head of HR & Corporate Services was progressing well and becoming more and more involved in day to day matters. Ms Anley asked for a prediction of when Board support would be available as she was concerned it was coming towards two years since he became unwell. Mrs Jackson advised the Head of HR and Corporate Services was not in a position to provide support directly to the Board at this time. However, if the Board required support, the Chair should contact her and she would provide guidance and identify support. Ms Anley asked Mrs Jackson to pass on best regards to Mr Ritchie.

Infrastructure Upgrade – Mrs Jackson advised that feedback on the ten-year capital plan from DoH was pending.

8 Financial Report

Mr Bell presented the Financial Report for the 6 months ended 30 September 2021. The report shows an overspend of £399k including Haemophilia products and £170k excluding these products.

The financial position will be addressed through seeking additional funding in respect of Covid-19 cost pressures. A meeting with HSCB has been scheduled to discuss confirmation of funding. In addition, where possible, NIBTS will continue to constrain expenditure.

A breakeven position can be achieved provided there is no unexpected additional expenditure and the above factors can be achieved. The Board will be advised there are any exceptional changes to the financial projections.

In respect of Capital, an additional CRL of £110k has now been allocated by DoH meaning capital requirements for the year are now funded. Prompt Payment Compliance remains on target.

Dr Murdock joined the meeting and provided an update on:

Medical Staff – Dr Murdock reported that the two medical staff currently on maternity leave had confirmed they would be returning to NIBTS in February 2022 with phased return to facilitate the use of annual leave. Dr Murdock was investigating the possibility of securing additional medical support and would advise the Board of progress on this as necessary.

Convalescent Plasma – Dr Murdock reported that there were no further issues of units and no anticipation of issuing any further. There are a small number of units available for trial.

FAIR 2 – Sub Sahara question will be removed in line with UK wide guidance.

Occult Hep B testing – awaiting confirmation that the recommendation should be implemented. NIBTS would have a six-month turnaround. This is similar to other blood organisations.

Ms Anley enquired about staff morale and Dr Murdock advised that they were stretched but managing with it sometimes hard to get cover. However, it is under control and feeling more optimistic.

Dr Murdock left the meeting

9 Audit Committee

The minutes of the Audit Committee held in June 2021 were included in the papers and noted.

Mr Cathcart provided a verbal update from the latest Audit Committee held that morning. Reports were presented on Risk Management; Mid-Year review and Mid-year Assurance Statement. All areas were satisfactory and no issues to bring to attention of the Board.

10 Governance and Risk Management Committee

The minutes of the G&RMC held in July 2021 were included in the papers and noted. The next meeting of the G&RMC is scheduled for 20 October 2021.

11 Quality Management System Report

Ms Macauley presented the Quality Management System report.

Documents – documents overdue review had increased a little i.e. both SOPs and Policies. The need to address this trend was discussed at QIR and will be again emphasised at October's meeting. An improvement in the figures with respect to Policy Documents has been achieved based on review of current figures.

Incidents – compliance with targets for investigation decreased during August with some improvement anticipated during September based on review of current status but, remains below the required 75% Compliance with Corrective and Preventative Action targets has been below the target figure for the summer months, with staff holidays identified as one of the causal factors i.e. staff not ensuring complete before taking leave or failing to reassign work to other staff members. The need to improve compliance has been and will continue to be stressed at QIR.

Changes – changes past their target date continued to fall. A number of changes have passed their target date by a period of greater than six weeks and those within the red/amber risk classification categories were summarised in the report.

Component Quality – red cells components continue to meet conformance and no issues identified with frozen product. However, issues continue with buffy coat derived platelets continue. A further revision of the Compomat programme has shown encouraging results with the first phase of validation completed and expected to move into the next validation phase which involves introduction into routine in production with 100% testing and close monitoring by November 2021.

The Quality Management System is functioning at a satisfactory level although it is imperative that conformance with document review and incident management is improved.

Ms Macauley also advised of staff resources issues - staff had left NIBTS and not been replaced. Volume and the nature of the work had increased/changed presenting challenges with ensuring all necessary work is completed and ensuring QMS was developed to meet current best practice. Business case for additional resourcing to be developed with the aim to achieve the appropriate staff number/skill mix.

Ms Anley enquired about next MHRA inspection. Ms Macauley advised that no indication of date currently provided but usually four weeks' notice is given.

12 Key Performance Indicators (KPIs)

The KPI report was presented by Mrs Jackson and included additional narrative to support KPI's. Mr Gillespie provided an update on the importation of Red Cells.

Ms Anley noted that the revised KPIs were very useful and informative to the Board.

13 Business Case – Molecular Testing Platform

Mr Gillespie presented the business case for a Molecular Testing Platform. This was approved by the Board.

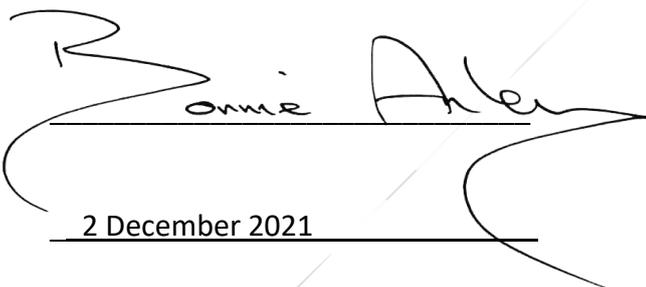
14 Any other business – Ms Anley thanked Mr Gillespie for attending given that he is in Covid-19 isolation.

15 Action List

There were no actions

Action	Responsible Person

**Date of next meeting: 2 December 2021, 11.30am
via video conferencing**

Signed: 
Dated: 2 December 2021