



**One Hundred and Sixty Fourth Meeting of the NIBTS Agency Board
Thursday 30 June 2022 at 11.30am
Venue: Video Conferencing meeting**

Present: Mr David Small – Non-Executive Member - Chaired
Mr Brendan Garland – Non-Executive Member
Mr Michal Graham – Non-Executive Member
Mrs Karin Jackson – Chief Executive

In attendance: Ms Angela Macauley – Quality and Regulatory Compliance Manager
Mr Glenn Bell – Finance & IM&T Manager
Mr Matt Gillespie – Head of Supply Chain and Testing Services
Ms Jenny Calvert – Business Continuity Manager

Mrs A Carabine – Minutes

1. Apologies

Ms Anley and Mr Ritchie.

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

Mrs Jackson declared a potential conflict of interest with the Remuneration Committee update which will be discussed under Item 6.

Mr Small advised that he has recently been appointed as Audit Committee Chair for the Commission for the Survivors of Institutional Childhood Abuse. Mr Small advised that he saw no conflict with NIBTS business and he was informing the Board for the record.

There were no other declarations of potential conflicts of interest.

3. Minutes of One Hundred and Sixty Third meeting of the NIBTS Agency Board meeting held on 5 May 2022 and action list

There was one typographical error which was corrected. The minutes were agreed as an accurate reflection of the meeting and signed off by the Chair.

Action List:

The majority of actions had been completed prior to the meeting, with the exception of:

Medical Team representation at Board

Mrs Jackson advised that a member of the Medical Team would currently only be available to attend Board to report on specific medical issues. Mr Ritchie is exploring medical leadership support with the Leadership Centre.

4. Matters arising from the minutes of meeting held on 31 March 2022

Pathology Blueprint Board

Mr Garland enquired if the minutes from the first meeting had been circulated. Mrs Jackson advised that the second meeting is scheduled for 1 July 2022 when the minutes will be approved and then circulated.

5. Chair's Business

- Ms Anley and Mrs Jackson attended the launch of NIAO Good Practice Guide for Board Effectiveness by Zoom on 22 June 2022 which was hosted by the Chief Executive's Forum. It has been agreed that a workshop to review the impact of this guidance for NIBTS should be arranged.
- Pathology Blueprint Programme – following discussions with DoH, Mr Small has written to DoH seeking an update regarding the proposed statutory function change and any accountability issues for NIBTS Board. Ms Anley has requested a Board workshop as soon as possible to discuss responses from DoH and DLS.

6. Remuneration and Terms of Service Committee

The Committee convened on 9 June 2022 and agreed to extend the Chief Executive's tenure until 31 October 2022, as previously described in the Annual Report. The Chief Executive indicated that she is willing to extend her tenure as requested. However, she advised that a formal letter from the Chair to the Chief Executive advising of this recommendation from the Committee is required in order that she can respond formally and also request an extension to her secondment from the Belfast Trust. The Board agreed to further discuss following the Board meeting.

7. Board Effectiveness Action Plan

The plan was discussed and updated to the latest position. The plan will also remain as a standing item on the agenda.

8. Chief Executive's Report

Covid-19

Mrs Jackson continues to provide weekly situation reports to Non-Executive Members of the Board. Mrs Jackson further advised that the number of NIBTS staff self-isolating due to illness is increasing which is reflecting the prevalence of the virus in the community. There are currently six members of staff self-isolating. Mr Graham enquired about the impact of staff absences due to Covid on stock and if there is a contingency plan. Mrs Jackson advised that staff continue to take appropriate measures (i.e. mask wearing, hand washing etc.) within the working environment and are encouraged to do so when not in work. Mr Gillespie advised of adjustments being made on sessions and, if necessary, NIBTS can go back to the measures in place during the height of the pandemic.

Platelet and blood stocks remain generally stable. The Micro Lab remains on stand-by to support the testing of COVID-19 swabs.

Plasma for Fractionation (PFF) – There will be a presentation to Board during the meeting. Liaison between DoH, other Devolved Administrations and DHSC regarding a memorandum of understanding (MoU) is continuing.

Facilities in the West – Work commenced on 6 June, however, the target for completion for the end of June has been extended until the end of July 2022.

Pulse Replacement/Blood Production and Tracking (BPAT) Project – work by the project teams continues and is on target.

Infected Blood Inquiry – Responses to Rule 9 requests are being finalised. Mrs Jackson advised of media reports earlier in the week and further recommendations will be made public in the coming months. NIBTS plan to respond to these by October 2022. Mr Small enquired if there were any issues for NIBTS. Mrs Jackson advised that issues will be global and unlikely to be NIBTS specific. Mrs Jackson further advised that NIBTS is planning to implement a new digital system as part of the BPAT project which will make blood more traceable.

Head of HR & Corporate Services – The Head of HR & Corporate Services' phased return to work is on-going.

Infrastructure Upgrade – NIBTS awaits feedback from DoH on the ten-year capital plan. The Chief Executive has had preliminary discussions with BHSCT regarding practicalities of completing a strategic outline business and has sought further advice from CPD in DoF. These arrangements will be confirmed once there is clarity regarding the profile of capital allocation. Mr Graham enquired how the ten-year capital plan impacts on NIBTS infrastructure. Mrs Jackson advised that the business case will be developed and will focus on the need for the service to meet regulatory requirements. There would only be issues if MHRA advised that the infrastructure was no longer fit for purpose and this affected the MHRA licence.

Occult Hepatitis B Testing – Mrs Jackson advised that the testing of donors is now in place. Work on the Pulse donor management system is also underway to avoid repeat testing of donors. The business case to cover costs of this testing has been submitted to SPPG. A further business case will be required to cover the cost of a look back exercise once the scope of the exercise is clear.

Medical Director Update – the closing date for the current advert has been extended to 30 June 2022. If there are no applicants, further changes will be made to the job description to make it a full-time post before it is re-advertised. Mr Small asked if it was a full-time position currently. Mrs Jackson advised that it has been advertised as a two day per week commitment. However, NIBTS is in discussion with DoH HR to make the position full-time. Mr Graham asked if the Leadership Centre could be used in the interim. Mrs Jackson advised that there are challenges filling Medical Director

roles within all HSC organisations, but enquiries have already been made to the Leadership Centre. Mr Small requested assurances regarding the medical workforce. Mrs Jackson gave assurance and advised that the work of NIBTS medical team is being covered.

BSO Data Breach

BSO has advised affected organisations, that the ICO has decided that no further action is necessary. The Board discussed and agreed to remove this item from the Chief Executive's report and only report by exception.

Investors in People

NIBTS was assessed against the liP standard on 21 June 2022. The Assessor is content that NIBTS is making good progress and has recommended continuing accreditation.

9. Blueprint Programme

A summary document of activity since April 2022 was included with Board papers. Mrs Jackson was able to confirm funding so far from DoH. Mr Small enquired about stakeholder engagement. Mrs Jackson advised that she has received a lot of general queries from staff across HSC, with comments, generally, being very positive. Mr Small advised he awaits confirmation of the statutory changes to host the programme. Mrs Jackson advised that NIBTS is providing support for staff and hosting. Mr Small further enquired if Mrs Jackson can absorb the extra workload. Mrs Jackson advised of her current workload associated with the Blueprint Programme and that she felt able to accommodate this at present.

10. Plasma For Fractionation (PFF) Presentation

Mrs Jackson advised that this presentation had been given to the previous Board. However, the purpose of the presentation today was to appraise the new NEMs. Mrs Jackson gave the PFF presentation and provided background to what PFF is, its uses and what could be achieved within Northern Ireland. UK Blood Services have not been involved in the production of plasma derived medicinal products (PDMP) since 1990s. In line with other Devolved Administrations, the Minister for Health (NI) has lifted the ban on the use of UK PFF. As the market for PDMP has grown exponentially, the UK is trying to become more self-sufficient in the supply of these products. A MoU has been developed by NHS England and is with DoH (NI) for consideration. The Chief Medical Officer and the Chief Pharmaceutical Office are involved with on-going discussions. Board discussed at length, with Mrs Jackson responding to all knowns. Mrs Jackson advised that DoH has been informed that funding would be required to undertake a feasibility study for Northern Ireland, which would then inform the business case. Mrs Jackson further advised that she would continue to update Board via the Chief Executive's reports.

11. Annual Report and Accounts

Mr Bell presented the Annual Report and Accounts and advised that the Audit Committee had reviewed and recommended approval.

There were a small number of wording amendments following clearance by NIAO which Mr Bell highlighted.

The Board approved the Annual Report and Accounts.

12. Charitable Trust Fund Annual Report and Accounts

Mr Bell presented the Trust Annual Report and Accounts and advised that the Audit Committee had reviewed and recommended approval.

There were no changes to the version previously presented to the Audit Committee.

The Board approved the Trust Fund Annual Report and Accounts.

13. Audit Committee Update

The Audit Committee met 16 June 2022. Mr Small summarised the meeting.

BSO Internal Audit documents

1. *Progress Report* – no audits have commenced and the report outlined the schedule for audits for the year ahead. Progress on previous findings will be reported in the Mid-Year Follow Up Report.
2. *General Audit Report* – was a very positive report for NIBTS who had 100% satisfactory assurances across all audits undertaken in 2021/22.

NIAO – Report to Those Charged With Governance

1. The qualified audit opinion arising from auditors inability to attend the 2020 year end stock count due to Covid-19 restrictions was discussed. As it is a technical qualification it will remain for this year.
2. There was one uncorrected misstatement regarding holiday pay accrual. The Audit Committee scrutinised the issue, which again was largely technical and agreed with the decision not to correct the misstatement.

NIBTS Annual Report & Charitable Trust Fund Annual Report and Accounts

No issues of concern. The view of the Audit Committee was to recommend Board approve the Reports.

14. Finance Report

Mr Bell presented the report for the 2 months ended 31 May 2022.

Revenue

The cumulative revenue position showed a net deficit of £151k. Mr Bell advised of a significant issue around energy costs and is awaiting funding arrangements. If no funding becomes available, an overspend of £400k is likely.

Mr Graham enquired if NIBTS had an indicative budget allocation. Mr Bell advised that baseline funding to run the service has been agreed, however, NIBTS are awaiting confirmation of funding for increased energy pressures, inflation and pay award funding and mandatory service developments.

Capital

A Capital Resource Limit (CRL) for 2022-23 has not been agreed. DoH have been advised of capital funding requirements and NIBTS are expecting a response shortly.

Prompt Payment Policy

Compliance with Prompt Payment Policy was below target at 91.5%. March – May 2022 figures were below target. Mr Bell advised of corrective action being put in place.

15. Quality Management System Report

Ms Macauley presented the Quality Management System report.

Documents – Current quality metrics data confirms that the target of 4% has been achieved during May 2022 for both SOPs and Policies.

Mr Graham highlighted his concern that coming into the holiday period compliance may not be maintained. Mrs Jackson advised that the subject of; what is acceptable and what can be delivered, is frequently discussed at the monthly QIR meetings. Board felt this should be continually monitored.

Incidents – compliance with the new target dates for Investigations has been met during May 2022, which shows an improvement from the previous two months. Compliance with the completion of Corrective and Preventative (CAPA) actions within the target date continues to be problematic, however, has shown some improvement during April and May 2022. Mr Small enquired if CAPAs will continue to improve especially during the holiday period. Ms Macauley advised that this continues to be highlighted during the QIR meetings.

Changes – there is currently a total of 116 open changes which is a decrease from March and April 2022. As of 16 June 2022, 17 open changes were passed their target implementation date. There is one Red and nine Amber open changes. Ms Macauley highlighted these changes.

Internal Audits – two audits originally scheduled for April and one audit originally scheduled for May remain incomplete. 1 of the 4 audits scheduled for June 2022 has been completed. The need to complete the outstanding audits have been brought to the attention of the relevant auditors.

16. Risk Management Strategy

Ms Calvert presented the strategy and advised that it had been presented at the last Governance & Risk Management Committee on 4 May 2022 where it was agreed, pending two changes and was being presented at Board for final approval. The two changes were on Page 4 and Page 5; page 4 'Structures' was amended to include Board members and page 5 was amended to include Risk Appetite. Mr Garland agreed with the changes and is impressed with the document. Mr Small enquired if this is the first NIBTS Risk Management Strategy. Ms Calvert advised the document was not the first risk management document, however, it is the first-time risk appetite has been developed.

Board agreed with the content contained within risk appetite, was happy with the document and it was approved.

17. Key Performance Indicators (KPIs)

The KPI report was presented by Mrs Jackson who advised that it was discussed at length at SMT on how to present the figures as 12-month rolling average and what metrics needed to re-start every year.

Active Donor base (whole blood) – Mr Gillespie advised that Active Donor Base will never reach the 56k KPI and the rationale has previously been discussed at Board. Mr Gillespie advised of work around this KPI which has been discussed by SMT. Mr Gillespie will present a plan at the next Board meeting (20 September 2022).

Red cells imported as % of issues – Mr Gillespie advised that 38 (1.2% of issue) were imported during April 2022. This related to shortage and high usage of O negative red cells.

Number of donor complaints – Mr Gillespie advised that there were 4 complaints received during May 2022 and were mainly due to the mandatory wearing of face masks at donation. Mr Graham enquired why there were 28 complaints recorded in the final column. Mrs Jackson advised that this was the total for the 12-month rolling period and not an average.

Incidents investigations completed on target - discussed at the QMS section. Ms Macauley advised that the table reflects monthly totals rather than cumulative figures as previously reported

CAPA completed on target – as above.

Audit completed with scheduled year – Ms Macauley advised that 33 audits were scheduled for 2022, two are currently overdue by the permissible four weeks.

SDRs completed in past 12 months – continue to be reviewed, discussed at SMT and scheduled across departments. All SDRs within the Quality Dept have been completed.

Invoice Prompt Payment % within 30 days – fell below target due to delays in processing invoices partly due to staff absence. Corrective actions are being implemented.

Mr Graham advised that KPI figures are a useful tool, if presented correctly. Mrs Jackson advised that NIBTS has many metrics and enquired if there were other metrics the Board would like to see.

Mr Small enquired if the 2022-23 Business Plan had been developed. Mrs Jackson advised Board that advice received from DoH is to roll over last year's to this year. Last

year's Business Plan was approved by Board, however, it will be reviewed. The Business Plan is available on the NIBTS intranet. Mr Small enquired if the Pathology Blueprint is referenced on the Business Plan. Mrs Jackson advised that it was.

18. Any other business

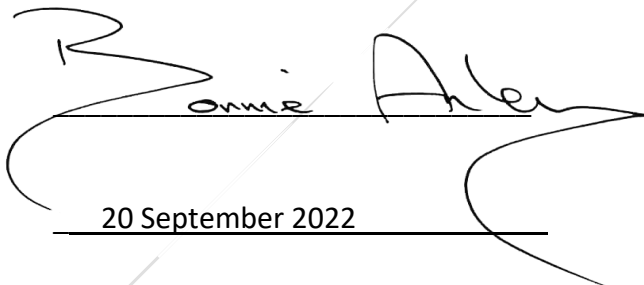
There was no further business.

19. Action List

Action	Responsible Person
Doodle Poll to be created in the autumn to ascertain a date for a Board Workshop following the NIAO Good Practice Guide for Board Effectiveness.	Mrs Carabine
Doodle Poll to be created to ascertain a date for a Board Workshop to discuss statutory function changes and accountability for Board with the Blueprint Programme.	Mrs Carabine <i>Post meeting note – dates issued to Chair, CEO & NEMs</i>
Presentation of an action plan regarding Active Donor Base to Board on 20 September 2022	Mr Gillespie

**Date of next meeting:
Tuesday 20 September 2022, 2.00pm – 4.00pm
via video conferencing**

Signed:



Dated:

20 September 2022