



**One Hundred and Sixty Ninth Meeting of the NIBTS Agency Board
Thursday 18 May 2023 at 11.30am
Venue: Video Conferencing meeting**

Present: Ms Bonnie Anley – Non-Executive Chair
Mr David Small – Non-Executive Member
Mr Michael Graham – 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 Gladys McKibbin – Head of HR & Corporate Services
Mr Matt Gillespie – Head of Supply Chain & Testing Services

Mrs A Carabine – Minutes

1. Apologies
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 Eighth meeting of the NIBTS Agency Board meeting held on 2 March 2023 and action list
The minutes were agreed as an accurate reflection of the meeting and signed off by the Chair.

Action List:

Collection Strategy – the Strategy is tabled for this meeting.

All other actions have been completed.

4. Matters arising from the minutes of meeting held on 2 March 2023

Draft Annual Report & Draft Charitable Funds Annual Report

Ms Anley enquired of Mr Bell when she will receive the above-named reports. Mr Bell advised that both were currently with auditors. Mr Bell will forward to Ms Anley as soon as possible and these reports will be tabled at the June's Board meeting for approval.

5. Chair's Business

- Ms Anley welcomed Mrs McKibbin to NIBTS as the new Head of HR & Corporate Services.
- Remuneration & Terms of Service Committee – Ms Anley advised that the next meeting is scheduled for 22 June 2023 at 4.30pm.
- Interim NIBTS Chair – Ms Anley advised until a new Chair has been recruited, there will be an Interim Chair arrangement in place. The Interim Chair will be rotated between two NEMs.

6. Chief Executive's Report

Covid-19 – The number of staff required to self-isolate due to illness or contact is stable. Covid-19 infection remains on-going in the community and continues to be reflected in staff absence and donor availability.

General sickness – Sickness levels have dropped and stabilised (4%), which is below the target KPI, although slightly higher than this time last year. Sickness levels continue to be monitored with any impact on services mitigated where possible.

Industrial Action – this has impacted session delivery with some sessions having to be reduced or cancelled. NIBTS continues to engage with Unions to minimise the impact. No further strike dates have been received. However, Trade Union members are partaking in action short of strike.

Plasma for Fractionation (PFF) – The Memorandum of Understanding (MoU) between DHSC, NHSBT and devolved administrations is with DoH for approval, who are considering Northern Ireland's involvement in this programme. Monthly meetings with four nations' representatives continue.

Mr Graham enquired if DoH agree that PFF will not be progressed until funding is received. Mrs Jackson advised that they have. Mrs Jackson has appraised the DoH Policy Lead, on an update shared at the recent EBA meeting.

PULSE Replacement/Blood Production and Tracking (BPAT) Project – the tender for the project went live in early April 2023 and closed Friday 12 May 2023. The Gateway review has concluded which was very complimentary of the project. Mrs Jackson advised that there were currently no obvious barriers to progressing this.

UK Infected Blood Inquiry – There will be a confidential section following this Board meeting to discuss. However, the remaining Rule 9 will be responded to by 19 May 2023.

Head of HR & Corporate Services – Gladys McKibbin has been appointed as Head of HR & Corporate Services and commenced on 26 April 2023. Mrs Jackson welcomed Mrs McKibbin to NIBTS.

Infrastructure Upgrade – There has been no update received from DoH in respect of the draft 10-year capital plan.

Occult Hepatitis B Testing – Plans to deliver the look back exercise are on-going. One of the NIBTS consultants chairs a meeting with colleagues across the region to develop a plan to co-ordinate this.

Mr Small enquired if timings on the look back exercise had been identified. Mr Gillespie advised timings will depend on input from Trusts. However, there are no set timeframes. Mr Small further enquired if time is critical for the look back exercise. Mr Gillespie advised that testing is underway and the look back exercise will commence as soon as possible, but required funding. Ms Macauley advised that there are no donors in the high-risk group.

Medical Director Update – Dr Allameddine Allameddine will take up post on 1 June 2023.

On-line appointment system – The implementation of the on-line booking system will commence late May, early June 2023.

7. Blueprint Programme

The latest highlight report was tabled. Mrs Jackson advised that the SPPG Director of Commissioning (DoC) is currently reviewing the programme business case in response to a proposal from the Pathology Network and Pathology Commissioner to divert approximately £79k as a non-recurrent slippage, which requires DoC approval. Mrs Jackson also highlighted the risks associated with not receiving this funding.

Mr Garland enquired, given all the cuts that DoH are being required to make, would the funding be given. Mrs Jackson advised that DoH are reviewing all funding and are identifying priorities.

Mr Graham enquired if there was a pinch point and how far will the current funding take the project. Mrs Jackson advised of current funding already in the budget which will take the project up to March 2024.

Mr Small enquired of the implications if no more funding is received. Mrs Jackson advised that it will slow progress of the programme.

Ms Anley enquired when the funding decision will be made. Mrs Jackson advised that it is hoped that a decision will be made prior to the Programme Board meeting on 7 July 2023, but has received assurances that this extra £79k is a priority.

Mrs Jackson appraised the Board on the Programme activity and the shortlisting of four options to progress. Ms Anley enquired of Mr Small if he had comments regarding any issues from the Programme Board to bring to NIBTS Board's attention. Mr Small advised he hadn't, and the Programme Board will meet on 7 July 2023 to consider the outcomes from the Options Appraisal Workshop.

Mrs Jackson also appraised Board on the forthcoming Workshops where an independent consultant has done most of the presentations and will be providing independent Chairs for breakout rooms. Mrs Jackson further advised that between the Workshops and the Programme Board meeting, there will be meetings between

CEOs of Trusts, Trade Unions and Critical Friends. This will be brought to the Programme Board meeting on 7 July 2023.

Mr Graham enquired of the differences between Option 2 and Option 4. Mrs Jackson advised that it is a difference between funding, authority and autonomy. Mr Graham further enquired if NIBTS, as a Special Agency, was deemed a Trust. Mrs Jackson advised that it wasn't. However, Option 4 gives the most autonomy and employing authority for the workforce.

Mr Small enquired if the meetings with Critical Friends will continue. Mrs Jackson advised they will and, to date, there has been excellent input.

8. Audit Committee Update

Mr Small advised that the minutes from 9 February 2023 were ratified at the meeting on 4 May 2023 and were for noting.

At the meeting on 4 May 2023, BSO Internal Audit provided a year-end update on the two audits; Information Governance and Stock Taking which, both received satisfactory assurances and demonstrates good progress.

Internal Audit Strategy and Plan 23/24 – 25/26 - was tabled. 55 audit days have been allocated for 2023-24 and will provide audits in key areas.

HIA Annual Report – a very positive report was received with the overall opinion being Satisfactory which will inform the Governance Statement.

Shared Services – there were two audits completed. The audit in Recruitment received Limited Assurance which raised concern from the Audit Committee. Following a long discussion at the Audit Committee it was decided that the Chair of the Audit Committee should write to the Chief Executive of BSO highlighting NIBTS concerns over delays in recruitment and seek advice instead of accepting and noting the Limited Assurance.

There was a discussion on NIBTS writing to the BSO Chief Executive and it was agreed that Mrs Jackson would take this forward.

Draft Annual Report and Charitable Funds Annual Report – both were discussed at the Audit Committee. NI Audit Office (sub contracted to ASM) are currently carrying out their audit. Final versions will be presented to the Audit Committee on 15 June prior to be tabled at Board for approval on 29 June 2023.

Ms Anley enquired about the Limited Assurance from the Performance Management audit. Mr Small advised on the conversation about recommended dates. Mrs Jackson advised that a draft framework will be brought to the Governance & Risk Management Committee in August 2023 and if agreed will be brought to Board.

9. Finance Report

Revenue

Mr Bell presented the report for the year-end at 31 March 2023, which was consistent with the annual accounts presented for completeness to finalise the financial year. NIBTS financial performance objective was met and a breakeven position was achieved, showing a net surplus of £4k.

Both Mr Garland and Mr Small noted a good performance. Ms Anley formally noted the breakeven position in a difficult year.

Mr Bell advised that there was no further update on 2023/24 budget position, however, advised of a meeting with SPPG next week which will provide more clarity. NIBTS will need to adhere to the previously agreed financial plan and any DoH efficiency savings requirements.

Capital

A Capital Resource Limit (CRL) of £496k has been allocated by DoH for 2022/23. This comprises of £162k for General Capital and £334k for ICT projects.

Prompt Payment Policy

Compliance with Prompt Payment Policy continues to be a challenge and remains slightly below target 95% for the year-end.

Monitoring

The notional value of blood components issued to hospitals is 1.5% below the Service Level Agreement (SLA) value at year-end. Trusts are showing activity levels ranging from 6.4% above to 6.1% below SLA.

10. Governance & Risk Management Committee update

Mr Garland advised that the minutes from 25 January were ratified at the meeting on 25 April 2023 and were for noting.

During the meeting on 25 April 2023 all items in the Quarterly Report were discussed: Audit Calendar – reflects all the audits scheduled for the coming year and is on track. Governance Standards Action Plan – six actions did not achieve target. There are no significant risks to the organisation.

Corporate Risk Register – had ten risks; one extreme and nine high risks. There were no risks added and none deleted during the quarter.

Component Monitoring – was discussed with no issues and remain above target.

Donor Satisfaction – remains high at 99%.

Incidents – there were 82 incidents (0 Red, 4 Amber, 75 Yellow/Green)

Litigation – There were two Employers Liability cases settled and one Clinical Negligence case withdrew.

Ms Anley enquired if there had been any amendments to the Corporate Risk Register since the G&RM meeting. Mrs Jackson advised that there had been no change.

Mr Garland thanked Ms Macauley and her team for their hard work.

11. Corporate Risk Register

Mrs Jackson presented the Corporate Risk Register and advised going forward Mrs McKibbin would present.

The Corporate Risk Register has not been amended since the last Governance & Risk Management Committee meeting on 25 April 2023.

Ms Anley enquired if Mr Garland was content with the Register. Mr Garland advised he was, the Register had been fully discussed at the last meeting and there were no changes.

Board approved the Corporate Risk Register.

12. Quality Management System Report

Ms Macauley presented the Quality Management System report.

Documents – The target of 4% was not met for either SOPs or Policies, which are currently sitting at 5% and 13% respectively. Four departments (Quality, IM&T, Medical and HR & Corporate Services) account for a large percentage of the overdue SOPs. Overdue Policies are spread across a number of departments which has been discussed at the QIR meetings, with the need to address continuing to be emphasised. Although Policies overdue review have increased, Ms Macauley advised that they are not a significant risk to the organisation.

Incidents – Ms Macauley advised in response to a finding during the recent MHRA inspection, NIBTS have amended the process and targets for incident investigation and CAPA completion. Additional graphs have been included in the paper. For Critical (Red) and Major (Amber) incidents a target of 90% completion within the target date and 100% completion with target dates assigned with approved extension has been set for both Investigations and CAPAs. For Minor (Yellow/Green) incidents the target of 75% has been retained. The targets are effective as of January 2023. Ms Macauley further advised that the KPI targets will be changing and brought to the Governance & Risk Management Committee (G&RM) as part of the KPI review for discussion prior to being tabled at Board for approval. Mrs Jackson advised that RAG boundaries for KPIs were agreed at SMT level which will be brought to G&RM Committee in August 2023. However, this could be brought to the Board meeting in June for noting and discussion prior to G&RM Committee and then brought back to Board in September for approval. Ms Anley agreed with this approach.

Ms Anley enquired if there were any overarching challenges to meet the KPI targets. Ms Macauley advised that the targets have been set quite high but given that they were for major/critical incidents it would be difficult to justify a lower target, so far, the targets for investigations have been reached. Ms Anley noted the decrease in the minor/other conformance for investigations during March. Ms Macauley agreed, however, felt they should balance out over the year. Mr Small was pleased to see new targets were working but advised the need for caution that extensions are not overused.

Investigations – the new graph showed conformance with the new targets was good for critical and major incident investigations, although extensions were used during February and March 2023. CAPAs for critical and major incidents was satisfactory for January and March, but fell below target in February 2023. Conformance for minor incident investigations and CAPAs showed a decrease in March 2023.

Changes – The quality metrics produced for April 2023 indicate that the number of open changes and the number past the target date has been stable. The number of changes past target date increased during February, but has improved significantly during March and April 2023. Ms Macauley appraised Board on the Red and Amber changes.

Internal Audits – the audits scheduled during 2022 have been completed, and findings where appropriate. The 2023 audit schedule has been agreed and audits commenced during February 2023. All scheduled audits for February and March have been completed. At the time of production of the paper there were five audits scheduled for April of which one was complete and a further 3 started.

Mr Small noted that the audits appear to be slipping and queried if this will improve. Ms Macauley advised that since the producing the paper for Board, the April audits have been completed and on the schedule is on target.

MHRA Inspection – Action Plan – out of the 37 actions, 36 have been completed with one outstanding. This action remains within the target date of 30 June 2023.

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

13. Business Plan 2022-23 as at 31 March 2023)

14. Key Performance Indicators (KPIs)) – items taken together

Mr Bell presented the business plan outturn report and noted that most objectives had been achieved. Those not achieved were highlighted and discussed as part of the KPI report.

Mr Graham noted that the SDRs are still sitting at 56% and how was this going to be addressed. Mrs Jackson advised that all managers have been tasked to have a plan to resolve this issue by the end of May 2023. Mr Small noted that SDRs did not achieve target on any month and needs to be addressed. Mrs Jackson advised managers need to anticipate which staff are due an SDR and get dates in diaries. Mrs Jackson further advised that the target is a rolling 12-month target, which is the preferred way and the focus is cascaded to managers to be pro-active and complete.

Mrs McKibbin advised that the rolling 12-month target is there to make SDRs more achievable as staff commence at varying times of the year. Mr Small advised that these need to be tracked and SDRs completed.

Mr Small enquired if not achieving SDRs was a performance issue. Mrs Jackson advised that it does come into the Performance Management Framework and are objectives for line managers, how it is formalised and how priorities are managed.

Mr Graham noted Objective 5.6 – *Engage and Communicate with Donors* and enquired how donor engagement is measured. Mr Gillespie advised that this objective does require improvement, however, there is more resourcing in the Marketing Dept and donor engagement can be measured in surveys. Mr Graham advised that at the beginning of a 12-month period, the Business Plan should say what it intends to do and after 12 months, show what it has done.

Mr Small had an issue with the RAG position of Amber. Mrs Jackson advised that this objective was marked Amber as there were some items that could not be achieved. Mr Small advised the objective is either achieved or not achieved, so it can never be Amber.

Mr Small was concerned to note that 50% of the KPIs are red and expects the blood related KPIs to improve with the introduction of the Collection Strategy.

15. Corporate Business Continuity Management Plan

Mrs McKibbin presented the Plan and advised that there is a requirement to review annually. Since the last review there have been minor changes, of which Mrs McKibbin appraised Board.

Mr Garland enquired if the Chief Executive was deputised, would the deputy absorb the Chief Executive responsibilities. Mrs Jackson advised that would be the case. Mr Garland further enquired are there guidelines for a deputy. Ms Anley enquired if there was a specific list and if there was a need for Board to be included. Mrs Jackson advised that these can be included, however, the reality was that if there were any issues, Board would be advised and included.

Mr Garland noted references are to individuals and enquired if these should be changed to job titles instead.

Mr Small enquired how often the plan is tested and what would happen if NIBTS had to leave the current premises. Mrs Jackson advised that the Plan refers to BURPS which would be activated and is tested every two years. The Business Continuity Plan is tested every year. There are also regional plans that NIBTS are involved in. Mrs Jackson further advised if NIBTS had to leave the premises, product would have to be resourced elsewhere.

Board approved the Plan subject to the amendments. Mrs McKibbin will make the changes and appraise Board via email when it will then be approved.

16. World Blood Donor Day

Mr Gillespie presented the report and advised that this was a plan to promote and celebrate World Blood Donor Day on 14 June 2023. The proposal includes:

- NI Council support – they will light up their buildings in support.
- Partnership Pledge – working in partnership with organisations to make a pledge to register and make donations.
- Education via press – on the importance of blood donation.

- Recipient stories – using social media to encourage more donors.

Mr Gillespie advised that the on-line booking system will be in place prior to World Blood Donor Day and will be promoted on the day.

Ms Anley noted that there was not a role for Board and if there were plans to promote the day on TV / Radio. Mr Gillespie advised that there will be promotion on Cool FM.

Mr Garland noted some spelling errors in the document. Mr Gillespie advised that he will get these corrected.

Mr Graham noted that there was an opportunity to promote donors and was concerned about the lack of media and do we get organisations to champion NIBTS. Mr Gillespie advised that there is work on-going with other organisations to promote blood donation and NIBTS will be using paid media, not just social media.

Mr Graham advised contacting other public sector organisations to promote. Mr Small concurred with this approach. Mr Gillespie advised he would ensure that the Marketing Team contact public sector organisations.

17. Collection Strategy - Draft

Mr Gillespie presented the draft Strategy and advised that the document identified current demand and was predicting future demand, what this will involve and how it translates into the number of appointments and sessions required.

Mr Gillespie appraised Board on:

- Annual and weekly demand
- Demand for O Negative blood
- How much stock we need to hold
- How many donations needed to be collected
- How many donation sessions are needed inc. appointments and walk-ins
- Session staffing
- Donor Administration, Records Management and Donor Engagement
- Measuring what good looks like – if actions are delivering

Mr Garland noted that the document showed progress and highlighted some spelling errors. However, the number of unanswered calls causes concern and could these not be transferred to an answering service after a short period of the call being unanswered. Mr Gillespie advised that some changes had been made, e.g. more staff are being trained to take calls, the call script is being updated to make calls shorter and some phonelines are being transferred. Mr Gillespie also advised of vacancies which it is hoped will be filled by June 2023. Mr Gillespie advised of the industrial action short of strike which was having an effect on this service.

Mr Garland noted that the installation of the on-line booking system had been delayed due to contractors and can this be addressed. Mr Gillespie advised of current discussions with the providers.

Mr Graham noted the Stock Levels on page 4 of the document and enquired how the Trust manage these. Additionally, were these levels the same across the UK. Mr Gillespie advised that we are aiming for 7 days stock. Trusts calculate their own levels. NIBTS staff work on blood stock issue and Trusts on wastage. Once all this information has been collated, NIBTS will be agreeing stock levels with Trusts. Mr Gillespie further advised that Northern Ireland have a high use of O Negative at 16% compared to 12% across the UK.

Mr Graham enquired if there was a sense more donors are needed and how to recruit them. Mr Gillespie agreed more donors are required including how often they donate with younger donors being the priority.

Mr Graham enquired if the donor baseline was sufficient. Mr Gillespie advised that it was difficult to ascertain currently, however, due to the need to import, there were not enough donors. Mr Graham further enquired if Mr Gillespie’s figures of 25-26,000 donors accessed in the correct way were sufficient to have enough stock. Mr Gillespie felt it was and donor surveys have highlighted how donors would like to be contacted. However, the survey and what they collect does need to be improved. Mr Graham concurred and advised that tick box surveys will not always provide accurate answers.

Mrs Jackson advised that a key element to maintaining an active panel is to recruit new donors, which in turn leads back to marketing and stakeholders and how one engages. Mrs Jackson agreed that engaging with public service organisations, including education and large organisations, should provide new donors.

Mr Small noted the large amount of Actions and suggested starting with new actions that have not been tried before. Ms Anley noted that the actions were good, some are operational, some are at high level and some are aspirational. Ms Anley suggested that these should be better organised to highlight what is operational more than aspirational. Mr Gillespie suggested attaching an action plan categorising into short, medium- and long-term plans. Mrs Jackson suggested clustering actions into groups and years that they should occur, making all actions clearly visible.

Board discussed and felt that this draft was a good start and would like to be kept involved. Ms Anley enquired if the Strategy would be coming back to a future Board meeting. Mrs Jackson advised it would be, following consultations with staff and therefore, should be tabled at Board in September 2023 as the Board may need to review the governance of the Strategy.

18. Any other business

There was no further business.

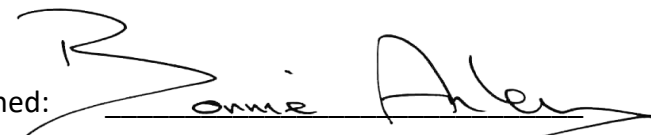
19. Action List

Action	Responsible Person
Chair of Audit Committee to discuss writing to BSO CEO with NIBTS CEO prior to the Chair of Audit Committee taking forward with BSO.	Mrs Jackson & Mr Small

RAG'd KPI boundaries for Board in June prior to G&RM in August.	SMT
Changes to the Corporate Business Continuity Management Plan – via email.	Mrs McKibbin
Collection Strategy to be tabled at September's Board meeting for review.	Mr Gillespie

**Date of next meeting:
Thursday 29 June 2023 at 11.30am
via video conferencing**

The Board meeting concluded and the Confidential Section commenced.

Signed: 
Dated: 29 June 2023