



**One Hundred and Eighty-Seventh Meeting of the NIBTS Agency Board  
Wednesday 14<sup>th</sup> January 2026 at 10.00am  
Venue: Lecture Room, NIBTS HQ**

**Present:** Mr Brendan Garland – Non-Executive Chair  
Mr Michael Graham – Non-Executive Member  
Ms Bernie Lunney – Non-Executive Member  
Mrs Karin Jackson – Chief Executive

**In Attendance:** Ms Angela Macauley – Quality & Regulatory Compliance Manager  
Mr Matt Gillespie – Head of Testing Services  
Mrs Verity Cochrane – Head of HR & Corporate Services  
Mr Eamon McCann – Head of Finance & IMT  
Dr Allameddine Allameddine – Medical Director  
Mrs Tamarra Harty - Minutes

**1. Apologies** Mr Noel Brady – Non-Executive Member  
Mrs Barbara Mullin – Head of Blood & Component Supply Chain

**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 Eighty-Sixth Meeting of the NIBTS Agency Board held on 4<sup>th</sup> December 2025 and action list**

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

**4. Matters arising from minutes of meeting held on 4 December 2025**

There were no matters arising which are not covered in the main agenda.

**5. Chair's Business**

Mr Garland noted that work continues on the implementation of the review of Senior Executive pay. He advised that he will be attending both the Southern Trust and South Eastern Trust Boards this month as an observer and will report his findings back to the Board.

## **6. Chief Executive's Report**

Mrs Jackson referred to her report and confirmed that there were no significant updates since it had been circulated.

### Industrial Action

No formal notification of potential industrial action or any issues were noted.

### Plasma for Fractionation (PFF) (Plasma for Medicines)

No further update. This is on the agenda for the Mid-Year Accountability meeting on 15<sup>th</sup> January 2026, which Mrs Jackson and Mr Garland are both attending.

### Infected Blood Inquiry

This item will be covered in the Medical Director's report.

### Infrastructure Upgrade

No further progress; NIBTS continues to engage with DoH regarding this and it will likely also be raised during the MHRA Inspection on 3-5 February 2026.

### EU SoHO Regulations

The NHSBT/JPAC post has been appointed, with a waiting list created. There is the potential to use the 2026/27 funding for a second post. This will be confirmed if Windsor Framework funding is approved by DoH up to March 2029. It is anticipated that the EBA proposal will be received soon.

### Staffing

Recruitment and interviews continue for a number of posts during February.

### MHRA Inspection

It was noted that this inspection is due to take place from 3rd-5th February 2026. It was also noted that the UKAS audit is due to take place the week before, on 29th and 30th January 2026. It has been confirmed that the two inspectors have conducted NIBTS inspections previously. Ms Macauley advised that she had spoken to her counterpart in the Scottish Blood Transfusion Service, who has experienced similar challenges in relation to QMS metrics. Ms Macauley advised that a position paper will be made available at the inspection, outlining overdue items and associated background information.

Mr Garland asked if the Board should attend the inspection. Ms Macauley confirmed that, historically, the Board has not been invited to the opening and closing meetings and that either Mrs Jackson or Ms Macauley will provide Mr Garland with a telephone update at the end of each day.

## **7. Plasma for Medicines update**

This will be discussed at the Mid-Year Accountability meeting on 15th January 2026.

Ms Lunney asked whether unspent project funding can be carried over into the following financial year. Mr McCann confirmed that funding allocated to projects that do not proceed cannot be carried forward into the next year's budget.

He further highlighted that a three-year budget and funding model would be more flexible, allowing expenditure to be managed across the full three-year period rather than requiring funds to be spent strictly within each individual year.

## **8. Blueprint Programme – Update**

Mrs Jackson referred to her report and highlighted the following:

### Progress Update

Following the request from Trade Unions to pause stakeholder engagement workshops, much of the Programme's time has been spent working with Trade Unions and Professional Bodies, recapping the work that has been done over the last three years.

The Programme Team met with Trade Unions on 9<sup>th</sup> January 2026 to provide updated information and reassurance about the limited potential impact on staff roles and locations of work. Following that meeting, the Programme received an email from Trade Union side indicating that they were unable to move forward with engagement on the current proposed model. While acknowledging that the proposed model was arrived at through an option appraisal, the Trade Unions indicated that this should be reviewed to take account of current concerns raised. Mrs Jackson highlighted that the outcomes of the programme to date have involved over 300 stakeholder engagement exercises, including workshops, which Trade Unions/Professional Bodies have been involved in. As an alternative, the Trade Union side suggested that additional powers be given to the current NI Pathology Network. However, Mrs Jackson advised that this is not a feasible alternative to an agency as an enhanced network with responsibility for managing its funds would require an accounting officer and, in practice, would require the same legal framework as an agency. Mrs Jackson indicated that there is a concern that the transition to the agency is imminent, whereas there remains a considerable amount of work to do before a final decision is reached. Trade Unions are invited to be part of his work.

The Programme Team continue to develop comprehensive responses to Trade Union side questions and these will be shared at the February Blueprint Programme Board meeting. It is hoped that work will recommence and workshops will be scheduled in the next few weeks.

The Programme recovery plan is being updated based on an assumption that work can proceed following Trade Union receipt of responses.

Mr Graham acknowledged the considerable work, enthusiasm and focus from the Programme Board in light of these challenges and advised that the Chief Medical Officer continues to support the Programme.

#### Data Gathering

Data gathering for the national review of pathology services continues. It was noted there has been a delay in submission of data from Trusts to the Programme Team, which was due on 17th October 2025. Finance and staffing data have been received from four Trusts and NIBTS, activity data is due to be submitted by all organisations in January 2026.

### **9. Blood Production & Tracking (BPAT) – Update**

#### Project Status

Mr Gillespie reported that significant positive progress has been achieved in the past few weeks. MAK Systems has been very responsive and a revised go-live date of 8th June 2026 has been agreed.

OQ testing has commenced, with documentation and script writing well advanced. Although the timeline is tight, the team is confident that all testing will be completed. Data migration and interfacing continues to go well.

Mr Garland asked whether there are financial risks associated with the new go-live date. Mr Gillespie confirmed that the project finances would not be impacted.

Mr Garland thanked Mr Gillespie and his team for their continued hard work.

### **10. Finance Report**

Mr McCann referred to his report to the end of 30 November 2025 and highlighted the following:

#### Revenue Position

In late December 2025, when this paper was completed, it was reported that a breakeven position for the year had been forecast. However, we have since had confirmation from the Permanent Secretary that the pay award for 2025/26 will not be fully funded by the DoH. The unfunded amount for NIBTS is likely to be approximately £208,000, which will have an impact on our overall year-end financial position. This has the potential to result in qualified year end accounts, subject to confirmation by the auditors. Mr McCann will continue to discuss this with the NIAO.

## Income

Income is £326k over recovered against the budgeted position excluding Surplus Plasma. Surplus Plasma income received is £433k.

## Capital

The Capital Resource Limit (CRL) for 2025/26 is £1,172k. This relates to funding for the BPaT project of £736k and General Capital of £436k. Business cases will be brought to the Board for approval in due course in relation to the General Capital allocation.

### **11. Minutes from Governance & Risk Committee**

Verbal update from Ms Lunney on the last Governance & Risk Committee on 29<sup>th</sup> October 2025 was provided at the Board meeting on 4<sup>th</sup> December 2025. The next meeting of the Committee is scheduled for 28<sup>th</sup> January 2026. Mr Garland asked to be notified of papers and arrangements for this meeting.

### **12. Quality Management System Report**

Ms Macauley updated the Board on the following:

**Documents** – A small number of SOP and Policy documents remain overdue review by a significant period. Discussion at QIR regarding those documents which are past review by a period of greater than 6 months has indicated that this does not pose any significant risk.

**Incidents** – There has been a lot of activity in this area and the figures have improved slightly since October 2025.

**Changes** – The quality metrics produced for the December 2025 QIR meeting indicated that the number of open changes has remained constant during the last 3-month period. An increase was noted in the number of changes past target date in November.

**Audit** – These have shown slight improvement, with additional evidence expected from upcoming MHRA inspection.

Ms Macauley noted that a new SLT-level dashboard system has been developed which is hoped to provide additional insight into the specific risks, challenges and priorities in each department.

Ms Lunney advised that discussions have taken place at Governance & Risk Committee regarding a risk analysis and action plan and will report back to the Board once complete. Ms Lunney acknowledged the development of dashboard and hoped that it would improve the level of reporting.

Mr Garland acknowledged staff efforts and sought assurances about the Quality Management System. Ms Macauley advised that she gives her assurance.

### 13. Quality Staff Resources

The reported was noted.

Ms Macauley to draft an additional report that outlines:

- Where we are and where we are going;
- Before and after organisational charts;
- Funding considerations – how will additionality be funded in the long-term.

Mr Graham noted that this should be incorporated into the 2026/27 business planning process.

### 14. Medical Director's Report

Dr Allameddine referred to his report and provided updates on the following:

#### Blood Stock Management

Blood stocks have generally been average to good, particularly O-negative, since the stand down of the pre-amber alert on 3<sup>rd</sup> November 2025. No blood has been imported since May 2023. Although platelet wastage is high at 17%, this is an improvement from the previous year.

#### The Northern Ireland Blood Transfusion Strategy (2025-2029) and Blood Oversight Group (NIBOG)

The first meeting, originally scheduled for mid-December, was postponed due to the unavailability of the DoH representative (Chair). The meeting will likely be rescheduled for the end of January depending on Chair availability.

#### SoHO

A recruitment exercise is ongoing for a consultant with experience in transfusion medicine, with interviews taking place next week.

#### Fetal DNA

There has been no progress since the last report. This matter will be escalated at the Medical Directors' Forum.

### 15. KPIs

Mrs Cochrane presented the KPI figures for November/December 2025, referring specifically to those areas which were amber/red.

Mrs Cochrane is finalising the new Complaints Policy and Procedure for discussion at the next Governance & Risk Committee.

A temporary Senior HR Manager/Business Partner has been appointed and will work with Managers on attendance management, in particular the roll out of the new HSC regional Attendance Management policy which is due to be implemented in April 2026.

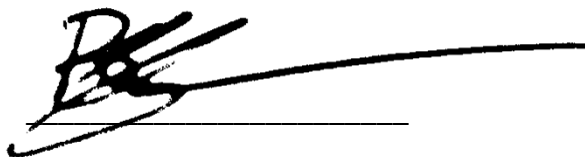
#### 16. AOB

There were no items under any other business. Mr Garland thanked everyone for their continued hard work on reporting, effort and candour.

Action	Responsible Person
Mr Gillespie to update Nos 20 & 21 in the BPaT risk register to include risk mitigation actions.	Matt Gillespie
Mr Gillespie to confirm MAK timelines.	Matt Gillespie
Ms Macauley to draft before and after visual report (org chart) to be presented at the February Board Meeting.	Angela Macauley
Mr Graham to be invited to any future Blueprint Programme workshops.	Board Secretariate

**Date of next Meeting:**  
**26<sup>th</sup> February 2026 at 10.00 am**  
**Venue: NIBTS HQ**

Signed:



Dated:

26 February 2026