



**One Hundred and Thirtieth meeting of the NIBTS Agency Board
Thursday 18 October 2017, 1.00pm
Venue: Lecture Room, Northern Ireland Blood Transfusion Service**

Present: Mr Jim Lennon - Chairman
Mr Ian Henderson – Non Executive Board Member
Mrs Lorraine Lindsay – Non Executive Board Member

In attendance: Mrs Karin Jackson – Chief Executive
Dr Kieran Morris – Medical Director
Mr Ivan Ritchie – Head of HR & Corporate Services
Mr Glenn Bell – Finance & IM&T Manager
Ms Angela Macauley – Quality & Regulatory Compliance Manager
Mrs Alison Geddis – Laboratory Manager & Interim Donor Services Manager

Mrs Alison Carabine – Minutes

1. Apologies

Mr Philip Cathcart – Non Executive Board Member

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

There were no declarations of interest.

3. Chairman's Business

Pathology Review

There has been no further update from the Department of Health.

Payment to the Board

The position remains the same, still awaiting ministerial approval.

Self-Assessment

This has been updated and is in for final review by the Chairman. When complete the Chairman will circulate for information.

4. Minutes of One Hundred and Twenty Ninth meeting held on 7 September 2017 and action list

The minutes were agreed as an accurate account of the meeting and signed off by the Chairman.

5. Matters arising from minutes of meeting held on 7 September 2017

Report on Business Continuity

Mr Ritchie advised that the report on the Business Continuity exercise has now been circulated to Board members

6. Report from Chief Executive

MHRA Inspection

MHRA closed out the inspection report on 28 September 2017. Progress on actions arising from the inspection continue to be monitored by SMT until completion. An interim compliance report will be submitted to MHRA during January 2018. The next inspection will be due in 2019.

The event on 4 October 2017 for staff recognising hard work prior to and during the inspection was successful and well received. Dates still need to be agreed to host an event in Omagh.

Media Story

The Chief Executive has contacted the co-ordinator of the event on two occasions; to-date there has been no response. The Chief Executive will write again re-iterating the offer and NIBTS will be reflecting on the learning outcomes.

New Media Interest

'The Detail' investigative news website is intending to run a story covering donated blood wastage. NIBTS have received Freedom of Information requests regarding donated blood and component issue. The Chief Executive and Laboratory and Donors Services Manager had agreed to meet with the journalist to advise on a number of inaccuracies in the draft article they have provided. However, this meeting was cancelled at short notice by the journalist. An Early Alert had been forwarded to the Department of Health. When a further meeting is scheduled, the Chief Executive will provide an update at the next Board meeting.

Review of Pathology Services

There is no further update on the next steps available.

Blood Mobile

The anticipated delivery date remains November 2017, however, the Chief Executive wants to delay delivery until the end of the fiscal year and launch an event in April 2018.

Plateletpheresis in the West

NIBTS are still awaiting feedback from the Western Health & Social Care Trust regarding potential locations.

PULSE Replacement

This continues to be considered as part of the regional LIMS project. A number of different options are being considered for future blood tracking software, for example, Savant visiting NIBTS to explore options. A business case will be completed by

February 2018, which could have financial implications for NIBTS if remaining with Savant.

7. Report from Medical Director

Following on from a previous report – ‘Where Does The Blood Go?’ the Northern Ireland Transfusion Committee completed a survey of all red cell components transfused for the two week period beginning 20 February 2017. The key findings were a 14% reduction in the expected number of red cell components transfused. The Northern Ireland Transfusion Committee has applied to the RQIA for funding for an integrated clinical audit and improvement work stream which is projected to reduce the requirement for red cell component issues from NIBTS by 8% in the five year period concluding 2021/22. This is taken from a baseline figure 45,000 and achieving a 41,500 result in the final year. The NIBTS whole blood collection strategy may have to be realigned to meet this potential future development.

8. Finance and IM&T report from the period 01/04/2016 – 30/09/2017

Revenue

The cumulative revenue position for the 6 months ended 30 September 2017 shows a net surplus of £425k (excluding haemophilia), mainly due to vacant posts. Staff vacancies have improved in nursing but not in other areas. There followed a discussion regarding vacancies, waiting lists and recruitment with BSO. The situation in BSO Recruitment has improved but is not operating at a level that it should.

Capital

The Capital Resource Limit (CRL) of £280k has been provided to NIBTS in respect of the new Bloodmobile and IT equipment.

Mr Bell was able to advise a forecast end of year breakeven position with no issues for attention.

Prompt Payment Policy

Compliance with the prompt payment policy for 6 months to 30 September 2017 remains at 96.4%. Mrs Lindsay enquired about Prompt Payments, Mr Bell advised an audit of findings discovered a small number of incorrectly classified payments which has now been adjusted and corrected.

Monitoring

In overall terms, the notional value of blood components issued to hospitals is 12.3% below the Service Level Agreement (SLA) value at the end of September 2017. The Southern Trust (-14.5%); Western Trust (+6.5%); Northern Trust (-10.9%) and the Belfast Trust (-19.0%) are outside the SLA tolerance limit. An adjustment will be agreed with each Trust at the year-end as appropriate.

Shared Services

NIBTS payment, income and payroll services are all provided by BSO Shared Service Centre (SSC). A monthly monitoring report is received from BSO on these services and services are being delivered in accordance with the SLA. A number of governance issues arising from previous internal audits of BSO SSCs are currently being addressed by BSO.

Mr Lennon enquired about Public Sector Shared Services. Mr Bell advised that further validation work was on-going on the baseline data that would inform the business case that was being developed.

Trust Funds

Mr Bell provided an update on the arrangement, closure and transfer of funds from the Cord Blood Fund. The Medical Director will provide a report to the Board at December's meeting on the Bone Marrow Fund.

9. Audit Committee update

Mr Henderson chaired today's Audit Committee and provided an update to the Board and advised that there were no material issues. BSO's Progress Report and audits presented no issues for NIBTS. NIAO Report to Those Charged with Governance report highlighted one minor in Prompt Payments which has already been addressed by Mr Bell in the Finance Report.

10. Quality Improvement Report

Open Incidents

There are a total of 21 open incidents. Any laboratory incidents which are greater than 60 days overdue are dependent on external input to allow closure. Laboratory incidents are largely focused in Hospital Services. SMT continue to review delays with individual departments. NIBTS KPI, 75% quality incidents closed within 30 days remains challenging. The target was achieved for one month only during January – September 2017.

SOPs Beyond Review Date

There are no policies overdue and compliance with SOP review targets continue to be satisfactory.

Change Control – Past Due Date

Newer Changes are progressing very well. However, there are still some issues regarding the closure of older Changes. Mrs Jackson advised that this would be discussed at the forthcoming SMT 'away day'. Mrs Lindsay suggested getting individual departments to look at changes, Ms Macauley advised this is currently happening with findings being brought to the attention of the SMT. There was a discussion regarding highest risk Changes and plans to target them. Both Mrs Jackson and Ms Macauley informed the Board that patient safety is never, nor has ever been compromised due to open Changes.

Audit – Scheduled Audits Completed

The schedule is slightly behind, however, measures are in place to address this. Ms Macauley advised that the follow up visit by UKAS will now occur in March 2018.

Other Issues

Ms Macauley advised the Board that the two current risks are being prioritised by NIBTS. This first is around transport of components to Hospitals and ensuring the storage conditions are maintained. Potential solutions to this issue are being

considered, these being purchase of new transport boxes, the use of a temperature controlled (refrigerated) vehicle or a combination of these. There is a meeting scheduled with relevant parties to discuss the best way forward which may include a possible significant spend.

The second risk is around delays in recalling product. A number of instances have been noted where recall has not been performed in a timely manner. The actual risk associated with the instances is very low due to the nature of the recall, however, NIBTS are performing a look back from November 2016 to ensure no further omissions have occurred. Several other measures have been taken to prevent recurrence.

11. Complaints

There were two complaints logged for the second quarter of the year. NIBTS has written apologies to both complainants from the medical team with follow up phone calls from the nursing team.

12. Key Performance Indicators (KPIs) – monitoring form

Mr Ritchie advised that all areas are on currently track for the projected year end and will be kept under review by SMT. Each department clarified their 'red' projected year end. Mr Lennon queried the Staff Absence figures and Mr Ritchie advised the return and expected return of staff members on long-term sickness and therefore green should be achievable by end of year.

13. Mid-Year Assurance Statement

This document was included in all papers sent to Board members prior to the meeting. Due to timing a draft copy has previously been sent to the Department of Health. Board members discussed and approved the report.

14. Any Other Business

- Equality Action Plan & Disability Plan

This document reflected the amendments required by the Board and had been previously e-mail to all Board members. Board members had the opportunity to read and discuss the Plan which was subsequently approved.

- Change of start times – Audit and Board

Following on from previous discussion, Mrs Jackson explained the origin and rationale behind this request. After further discussion it was agreed by the Board to move the start times of both Audit and Board meetings to the following:

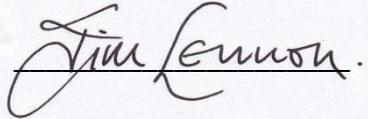
- Audit Committee – 10.00am
- Board Meeting – 11.30am

15. Action list from meeting held 18 October 2017

Action	Responsible Person
Circulate Self-Assessment document to Board members	Mr Jim Lennon
Update on meeting with 'The Detail'	Mrs Karin Jackson
Report on closure and transfer of funds from Cord Blood	Mr Kieran Morris

16. Date of next meeting: Thursday 7 December 2017 at 11.30am – Lecture Room

Signed:



Dated:

7 December 2017