

Minutes of the Meeting of the Board of the Irish Blood Transfusion Service held on Monday 17th September 2012 at 1.00pm in the Barry Room, St. Finbarr's Hospital, Douglas Road, Cork.

Present: Professor Anthony Staines, Chairperson
Ms. Jane O'Brien
Dr. Paolo Rebullia
Dr Lelia Thornton
Mr Brian O'Mahony
Dr Hilary O'Leary

Apologies: Dr Conor McGrane

Also in attendance: Mr. Andrew Kelly, Chief Executive
Dr. Ian Franklin, Medical & Scientific Director
Ms. Patricia McNally, Acting Secretary to the Board

1. Minutes of the meeting of the Board on Monday 23rd July 2012.

The minutes of the meeting of the Board on Monday 23rd July were approved without amendment.

2. Matters arising

Risk & Resilience Officer

Ms. O'Brien asked about the current status of this post. The CE confirmed that it had been put on hold but will be advertised internally before Christmas.

Appointment of members to sub-committees of the Board

The CE confirmed that he had been in contact with the Department of Health but as yet there are no new appointments to the Board of the IBTS.

Pension Fund

The CE noted that he had written to the Trustees of the Scheme requesting that the Trustees give consideration to amending Clause 8 such that the financing of the scheme is agreed by the parties rather than the current arrangement whereby the obligation falls on the employer. The request would be discussed at the next meeting of the Trustees.

The CE also noted that the Unions had requested a meeting to discuss the IBTS pension situation and the proposed new Public Service Single Scheme. The Unions informed the CE that they had written to the Minister for Public Expenditure and Reform requesting that the IBTS be exempted from the terms of FEMPI and to use his discretion under the Act

This is also a substantive item for discussion on the Board Agenda.

MSM

The CE informed the meeting that there was a lot of social media attention on this issue and required careful managing. It was noted that this is a worldwide issue and the Board agreed not to change policy but to keep this issue under regular review by the MAC.

3. Chief Executive's Report

Blood supply

It was noted that supply was very difficult in the past couple of months. This was down to the new policy in relation to haemoglobin. The result of this was that the deferral rate in clinics had increased from an average of 15% to 22% which had a major impact on supply. A discussion took place regarding this issue and it was noted that while no elective surgery had been affected, supply to hospitals had been very tight during this period. The CE noted that the IBTS had been in discussions with the IMB and had agreed a planned deviation to enable the taking of blood from female donors of between 12 and 12.4 and males of 13 and 13.4. These donors will be actively managed by the IBTS and a quarterly report will be sent to the IMB. This planned deviation will last for 1 year by which time the IBTS should have a multi-faceted plan to be compliant with the EU Directive.

Platelets usage for August was 2.5% below budget and 5.4% lower than August 2011.

Finance

The finance position remains positive. However, the CE noted that non-pay savings were beginning to fall back. It was noted that a meeting had been held with the Minister for Health and representatives from the Department in April at which restructuring proposals had been presented. There has been no response from the Minister or the Department on these proposals. The Chairperson told the meeting that in his view, it was the Board's responsibility to decide, and we should advise the Department of our plans. It was agreed that the Executive Management Team will present the restructuring proposals, including contingency, to the October Board Meeting.

It was agreed that the Chairperson would sign the contract for the Research Grant with NUIG.

Pension Fund

The CE confirmed that he was seeking a meeting with the relevant official in DoH, regarding the proposed new Public Service Single Scheme which the IBTS has been informed will include any new staff in the IBTS. This proposal will have a significant impact on the current pension scheme.

Regulatory / Compliance

The online ordering system is working very well with no problems reported.

The Quality Assurance Manager position is to be discussed with the DoH for progress and advertising.

HR

The Director of HR will make a presentation to the Board. However, it was noted that there had been agreement at the LRC on accumulated hours which enables the IBTS to move forward with restructuring of the transport function.

Diagnostic Service

The CE updated the Board on his meeting with HSE South on this issue.

Recruitment of Staff

The proposal by the CE that the IBTS can recruit up to the ceiling for WTE was agreed by the Board.

4. HR Presentation

Mr. Nessian Rickard, HR Director, made a presentation to the Board which included an overview of Service, brief organisation history / perspective, change agenda (past & present) and the challenge ahead. The Chairperson acknowledged all the achievements to date by the EMT. He raised the issue of funding which was set aside for a new building in Cork. A discussion took place regarding what would be in the new building and where it would be located. Dr. Franklin confirmed that the IBTS had looked at putting stem cells in the new centre to support Munster services. However, according to the HSE Director of Cancer Care, this would not be an option as there were already two sites in Ireland, namely St. James's Hospital and Galway. Ms. O'Brien noted that there had been a presentation to the January 2012 Board Meeting on Cost Saving Measures and she felt it would be opportune for the new Board members to have an update on this presentation. The Chairperson requested input from the MAC on potential services to be included in the Cork Centre. This will be an agenda item for discussion by the MAC at the October meeting and for further discussion with the Department of Health.

5. Pension Scheme

The CE updated the Board on the current position in relation to the pension scheme. He noted that a meeting had been sought with the Department to discuss this issue and in particular the new Public Service Single Scheme which will have significant impact on the current IBTS scheme. The CE noted that a meeting had been organised for 12th October with the group of unions to discuss this issue. He confirmed that he will convene a meeting between the actuary of the scheme and our solicitors to put together funding proposals which can be discussed with unions. The High Court Case is due for mention on 8th October and the CE confirmed that the IBTS would be looking for an early date for the hearing but it will most probably be in 2013.

6. Cost Saving Measures

This was discussed under Item 4 on the Agenda.

7. Traceability Directive / National Haemovigilance Office

A discussion took place regarding the contract negotiations between the IBTS and IMB on this issue which are currently at an impasse. The CE noted that this issue needs to be resolved as the proposal for the IBTS and IMB to receive reports simultaneously did not resolve the issue from the IBTS perspective. Dr. Franklin felt that clearer lines of responsibility need to be agreed between the two organisations. The NHO SI will need to be amended also. It was agreed that the CE and Dr. Franklin would review the issue and present a proposal for agreement between the IMB and IBTS to the October Board Meeting.

8. Update of MAC meeting 17th September 2012

Dr. Thornton noted that the MAC had discussed Hepatitis E and emerging threats including WNV, malaria and dengue. The MAC had also received an update on the Hb project.

9. Minutes of MAC meeting of 21st June 2012

The minutes were noted.

10. Risk Registers

A copy of the Clinical, Organisational and ICT Risk Registers were circulated to the Board. The Chairperson noted that once new members had been appointed to the Board and an Audit & Compliance Committee (A&CC) formed this would be the committee who would review all registers. As there is no A&CC it was agreed that the Board would review the registers to ensure that risk is being monitored and managed in the IBTS. There was much discussion by Board members, in particular on the Clinical Risk Register. It was agreed that all registers would be reviewed to ensure that the risk and levels attached were correct. It was also agreed that the Secretary would circulate, by email, a copy of the ICT Risk Register for Board members to review.

11. Strategy Development

The CE circulated a draft Strategy map 2013 – 2015. It was noted that more meetings are taking place with the facilitator of the programme and it was agreed that time would be set aside at the November Board meeting for an information session on the programme with the Board.

12. Date of next meeting

The next meeting of the Board will take place on **Monday 15th October at 1pm** in the **National Blood Centre**.

Signed: _____

Date: _____