MINUTES

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| *Date of Meeting* | | 12/02/2018 | | ***Ref*** | 18/01/MO’D | |
| *Meeting* | | IBTS Board | | | | |
| *Present* | | Prof Anthony Staines, Chairperson; Yvonne Traynor; Kate Williams; Brian O’Mahony; Dr Satu Pastila; Simon Mills; Linda Hickey; Dr Liz Kenny | | | | |
| *Apologies* | | Dr Ronan Desmond; John Malone; Deirdre Cullivan | | | | |
| *In attendance* | | | Dr Stephen Field, A/Chief Executive and Medical & Scientific Director; Mirenda O’Donovan, Secretary to the Board | | | |
| **#** | Item | | | | | Notes/Action |
|  | The Chair expressed the Board’s condolences to the Finance Director on his recent bereavement. | | | | |  |
| **1.0** | **Minutes of the Board meeting on 11th December 2017** | | | | |  |
| **1.1** | The minutes were agreed subject to amendment. | | | | |  |
| **2.0** | **Matters arising** | | | | |  |
| **2.1** | TCD Professorship – the M&SD advised that this was being progressed but that there had been some delays. | | | | |  |
| **3.0** | **Chief Executive’s Report** | | | | |  |
| **3.1** | *Shareholder/Government* - The A/CE & M&SD went through the CE’s report. He confirmed that the new Director of Quality & Compliance commenced in post on 29/01 and takes up his position formally today. The RP will be the Medical & Scientific Director. Usage in red cells increased in 2017 and platelets usage was down by 3.7% the marketing strategy presented to the EMT on 30/11 is included in the Board’s pack. | | | | |  |
| **3.2** | *Excellence in Donor Services* - D’Olier Street/Mobile One split has been referred to the Labour court. Tuam Centre design has been awarded and final drawings are expected in the next few weeks. | | | | |  |
| **3.3** | *Safe & Sustainable supply* – the National Transfusion Committee will now be called the National Clinical Programme in Transfusion Medicine – this will be funded by the RCPI and the HSE – a business case has been submitted. Agreement has been reached on a new joint consultant appointment between IBTS and OLCHC. This post will be advertised internationally. The haemochromatosis question is now included in the HLQ for donors. The new scheme will be piloted in D’Olier Street and Cork. It is hoped that this will be fully implemented by September. | | | | |  |
| **3.4** | *Excellence in services to hospitals* – a sub-group on infectious diseases has been established. A paper on the TTI will be printed in Vox Sang and it will be open access. | | | | |  |
| **3.5** | *Building a high performance organisation* – an external consultancy has been tendered for to assist with the tender preparation process for managed services, outsourcing will be looked at as part of managed services. Sharepoint is being looked at for the organisation. A proposal from MAK to implement the semester patch is awaited. IT staff to visit Sanquin to see how they implemented it in 6 months as this is normally an 18 month process. The semester patch will enable the electronic HLQ to be implemented. Strategic review of IT was proposed by the Chairperson. The costs involved in transferring to a new blood banking system was discussed. It was noted that the migration of data to a new system is the biggest piece of work.  It was also noted that BOSS will no longer be supported by MAK. The A/CE advised that recruitment and retaining nursing staff is an ongoing issue. Chair asked for an update on this at the next Board meeting. A new supplier for archive storage has presented an opportunity to cull some of what is in storage and should not be held any longer to ensure compliance with GDPR. Archived boxes prior to 1988 will be destroyed with the exception of those related to Tribunals and medical records. A/CE confirmed that a retention policy is being developed. The recently appointed R&RM attended the last A,R&C Committee. Following recent bad weather in NI, the NIBTS requested assistance for some blood components, IBTS was in a position to provide some, but not all of what was asked for, but ultimately it wasn’t necessary. There was a fall in the number of new donors between 2015 and 2017, A/CE explained that there were a number of appeals in 2016, which usually gets a high degree of engagement from first time donors, but none in 2017. He also added that the 5 year deferral for STIs would have adversely impacted this age group. | | | | | HR to cut the GPTW data by professional group in the organisation, specifically nursing.  DPO or CE to give an update on GDPR preparation at April Board meeting.  R&RM and new Q&CD to meet the Board at its April meeting. |
| **4.0** | **Business Plan 2018** | | | | |  |
| **4.1** | A/CE confirmed that the major capital projects for the year are identified in the business plan. The Chair of the Finance Committee confirmed that they had reviewed the business plan at a recent meeting and were satisfied that it was aligned with the long term strategy. A/CE noted that there was no provision for Pathogen Inactivation in 2018 but that he would be looking at this for 2019. He added that the cost of this technology is decreasing and that if introduced the need to continue sampling platelets would need to be examined. It was noted that resources for implementing projects were scarce and tended to be the same people across many different projects. Compliance with the project management methodology was discussed. It was confirmed that approval has been sought from the DoH for the appointment of a project management specialist. The Chair suggested that this be raised at the DoH Governance meeting. The Business Plan for 2018 was approved by the Board. | | | | | A/CE/M&SD to complete an R&D strategy for the Board. |
| **5.0** | **Terms of Reference of the Performance Development Committee** | | | | |  |
| **5.1** | These TORs were revised at the PD Committee meeting on 30/01. The Chairperson confirmed that the PD Committee meet twice a year and the next meeting will be in April before the next Board meeting. The Chair confirmed that he was looking for a new external member to replace the current external member and asked for Board members to bring any possible candidates to his attention. The TORs for the PD Committee were approved by the Board. | | | | |  |
| **6.0** | **MAC meeting of 11th December** | | | | |  |
| **6.1** | The change of name for the NTC was noted. The Chair confirmed that the MAC was actively looking at testing for malarial antibodies. The IBTS deferred 3,000 people last year for travel to malarial areas. The deferral is currently for one year. Testing would reduce this deferral to 3-4 months. The A/CE confirmed that the IBTS also needs to look at ethnic minorities who are currently deferred. This is in relation to the increasing needs of sickle cell patients. It was noted that the current platform used for CMV testing could be used for malaria testing, but that the new platform is not suitable. Joint post with OLCHC sanctioned to be filled.  A medical & scientific manpower plan for the future is under discussion at the MAC. The A/CE said that R&D strategy will make it more attractive to consultants and in this context the emphasis should be on cellular and regenerative medicine. The Chair added that the Irish Clinical Oncology Group are doing a lot of clinical trials and there may be synergies there. It was agreed that the R&D strategy should also look at whether there is a role for nursing. It was noted that the decision log is working well and the HPRA have raised no issues with it. The MAC were proposing to the Board that the frequency of MAC meetings be aligned with those of the Board, so that the MAC will meet every 2 months. It was confirmed that in the event a meeting was required at short notice, this could be arranged. Deferrals are under constant review. A/CE confirmed that those who had been deferred for 5 years under the previous STI deferral policy are being advised of the change. | | | | | Sec to confirm whether the MAC TORs need to be amended to reflect new frequency of meetings. |
| **5.0** | **PD Committee minutes continued** | | | | |  |
| **5.1** | The minutes of the PD Committee meeting on 20/10/2017 were circulated. These were noted. It was confirmed that the targets for the CE would be on the agenda for the next PD Committee meeting in April. | | | | |  |
| **7.0** | **Finance Committee meeting 02/11/2017** | | | | |  |
| **7.1** | The minutes of the Finance Committee meeting on 02/11 were noted. The Chairperson of the Committee went through the management accounts and noted the surplus at year end. She explained that accounting for the pension deficit has an impact on the accounts but it does not accurately reflect the operating position. The pension deficit stood at €83m at the end of 2017. In this context the Chairperson explained the ‘Going Concern’ paragraph in the accounts. These were approved. She also added that the SPSPS issue has been raised with the DoH, but this has yet to be resolved, and she briefed the Board on an issue regarding procurement in HR. | | | | |  |
| **8.0** | **Audit, Risk & Compliance Committee meeting 05/09/2017** | | | | |  |
| **8.1** | The Chairperson of the Committee explained that the Committee had met again in January. The R&RM attended the meeting and went through the reviewed Risk Register. The Committee expected a proposal for the testing of the DR site at its next meeting. It was noted that the draft management letter was not yet available and the FD has followed this up with the C&AGs office. The IBTS Fraud Policy was updated. The attempted phishing incident was discussed and it was noted how the incident was identified early and procedures were followed correctly. The Internal Audit Review of Internal Financial Controls was approved by the Board. | | | | |  |
| **9.0** | **Cork Centre** | | | | |  |
| **9.1** | Correspondence between the HSE and IBTS noted. The Chair advised that he did not believe that our application for a site for a new centre in SFH would be successful.  The Chair of the MAC said she had discussed this at length with the consultants in CUH. The IBTS proposal of a single merged laboratory was discussed. The A/CE raised the issue of Therapeutic Apheresis.  The Chairperson noted that what was involved in the IBTS proposal was outlined to the HSE and the SSWHG at a meeting in January, but he had no issue with putting this in writing again to the relevant parties. It was agreed that the Board’s first duty is to the IBTS while taking other stakeholders into account within reason. It was agreed that if a site on SFH is not available then the IBTS will move ahead with sourcing an alternative location. The Board confirmed that its original decision made in October regarding the future development of the Cork Centre remained unchanged. | | | | | M&SD to discuss progressing an alternative site with OpsD.  A detailed specification of what is proposed to be transferred to CUH to be prepared for CUH.  The specification of what IBTS is proposing for SFH site to be prepared and sent to the Community Health Office which is responsible for SFH. |
| **10.0** | **Board effectiveness review** | | | | |  |
| **10.1** | The Chairperson reminded everyone to complete the interview and the survey for the Board effectiveness review and noted that the IOD Guide on Governance for Directors on State Boards had been circulated to all. The date of the Board effectiveness review workshop was confirmed for Monday 5th March at the NBC at 10am. | | | | |  |
| **11.0** | **Date of next meeting** | | | | |  |
| **11.1** | The next meeting of the Board of the IBTS will take place on **Monday 16th April at 12 noon in the NBC.** | | | | |  |

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_