

MINUTES

Date of Meeting	14/09/2020	Ref	20/04/MO'D
Meeting	IBTS Board		
Present	Linda Hickey, Chairperson; David Gray; Dr Liz Kenny; Dr Satu Pastila; Brian O'Mahony; Deirdre-Ann Barr; Kate Williams; John Malone; Ronan Desmond; Deirdre Cullivan		
Apologies	Dr Sarah Doyle		
In attendance	Orla O'Brien, Chief Executive Officer; Dr Stephen Field, Medical & Scientific Director; Mirenda O'Donovan, Secretary to the Board.		
All participants via video conference			
#	Item	Notes/Action	
1.0	Welcome & apologies		
1.1	Dr Sarah Doyle has given her apologies. The Chairperson noted that there was still a vacancy on the Board and that she would continue to pursue this with the DoH.		
2.0	Conflicts of interest		
2.1	No conflicts of interest declared.		
3.0	Minutes of the Board meeting held on 15th June 2020		
3.1	The minutes were agreed without amendment.		
4.0	Items for discussion		
4.1	Chief Executive Officer's report		
	<i>Shareholder/Government</i> – a meeting with the HPRA has not yet been secured. The Cork Centre inspection didn't take place earlier this year. The NBC inspection usually takes place in November but this has not yet been confirmed. The next Governance meeting with the DoH takes place later this week. CEO will discuss the Cork centre development with them again at that meeting. A meeting with the Assistant Secretary of the Blood & Organ Transplant and Acute Hospital Service Planning Policy Unit will be arranged for later this year. A project plan for reopening the Eye Bank should be completed by the end of the year. SLA with MMUH for heart valves has been agreed. There have been 3 HSA reportable incidents.		
	<i>Excellence in Donor Services</i> – a re-audit of the Tissue laboratory has been completed. Demand for FRCCs is almost back at pre-COVID levels and demand for platelets is ahead of budget. Requests for non-emergency O negative is being referred to SPMOs. Legal advice has been sought regarding concerns about H&S and the common areas in D'Olier Street. IT connectivity is being maintained using the back up cable after the main cable was disconnected by the landlord in an adjacent premises.		
	<i>Safe & Sustainable supply</i> – securing appropriate venues is still a challenge. Donor attendance now also becoming problematic as life starts to normalise. No shows on the appointment system currently running at 8%		
	<i>Effective relationships</i> - CEO has been to the Cork Centre and had a number of meetings with the medical team there.		
	<i>Excellence in Services to Hospitals</i> – customer survey completed.		
	<i>Satisfy our clients and partners</i> - The annual meeting with the Sec Gen and CMO is unlikely to take place this year.		

	<p><i>Learning and Growth</i> – M&SD post has been widely advertised, however the NHSBT and the BBTS are also recruiting at this level at the same time. iLead has recommenced online having been suspended because of COVID-19. A Talent Management Framework is under development in partnership with UCC. A number of escalation teleconferences have taken place with MAK and progress has been made addressing some of the issues that were slowing down the Semester Patch project. The Managed Services tender is at an advanced stage and it is hoped a supplier will be in place by end of the year. There has been no confirmed case of COVID-19 among the staff as yet.</p>	
	<p><i>Central Treasury Notes</i> - The Board approved the proposal for IBTS funds to be placed with the NTMA and invested in Central Treasury notes.</p>	
4.2	<p><i>Medical & Scientific Director's Report</i></p>	
	<p><i>R&D</i> – Dr Alison Waters has joined the IBTS and the M&SD proposed that she present to the Board on the R&D strategy at the November or December Board meeting.</p>	
	<p><i>Social Behaviours Review</i> – M&SD still seeking an international expert on viral evolution – this has proven to be very difficult because of COVID-19. M&SD to ask his preferred expert to participate in one session with the wider group to focus on this specifically – hoping to get agreement on this in early October. M&SD also seeking a representative from the HPSC as local Epidemiological expertise will also be essential.</p>	
	<p><i>Malaria testing</i> – this test has been validated and is ready to go live. Donor selection criteria is the next stage and this will be looked at in a workshop being organised next month by Dr O’Flaherty.</p>	
	<p><i>Convalescent Plasma</i> – a licence to produce this product has been granted by the HPRA. An application for European funding for this project has been submitted.</p>	
	<p><i>Platelet safety</i> – there have been 2 incidents in recent months regarding platelets, one involved a pooled platelet with <i>Serratia marcescens</i> – this incident has been reported to the HPRA. The other involved a returned apheresis platelet with aggregates and when cultured this contained <i>Staphylococcus aureus</i>– this was also reported to the HPRA. A 12 hour hold on issuing platelets has now been implemented and a change to the bacterial culture system initiated. An independent expert has completed a report on a walk through of the relevant areas and the recommendations made are being implemented.</p>	

	<p><i>Pathogen Reduction</i> – a scientific paper is almost complete and a workshop will be organised to discuss the findings in due course. M&SD noted that this technology is very expensive and savings will need to be generated elsewhere to make it a viable option. Switzerland, France, Belgium and the American Red Cross are already using this technology. Dr Pastila confirmed that in Finland platelets are done in pools and investigations are carried out into possible contamination once or twice a year.</p>	<p>The Board agreed that a proposal for funding pathogen reduction be submitted to the DoH.</p>
<p>4.3</p>	<p>Operations KPIs Q2 2020</p>	
	<p>P McKinney, Operations Director joined the meeting for this item. Substantial changes have been introduced to meet the challenge of COVID-19 in terms of maintaining the blood supply. An appointments system has been put in place to manage the throughput of donors and maintain social distancing. Meeter/greeters at the entrance to the clinics are triaging donors. Transporting clinic teams now requires additional buses to maintain social distancing. There has been a drop in new donors of 50%. Hospital demand for O negative is at 15.34%. Dr Kenny advised that HSE guidance has changed from 2ms to 1m social distancing for Outpatient clinics. Dr Desmond asked about the impact of remote working and the CEO confirmed that this was still very much part of the IBTS response and for those who can work from home this would remain the practice for the near future. OpsD added that despite the challenges posed by COVID- 19 KPI's were only marginally behind target for O positive – 6 days supply of O positive 88.5% of the time and 4 days supply of O negative 95.6% of the time. He also added that complaints on clinic management have dropped dramatically since the appointments system was introduced and that the time commitment for donors under the new system is significantly reduced. A customer survey of hospitals was recently completed with an 88% response rate and the feedback from the hospitals has been very positive and useful. On behalf of the Board, the Chairperson thanked the OpsD and his staff for the commitment and flexibility they have shown in rising to the challenges they were confronted with. CEO added that she had written to Civil Defence leaders to thank them for their support and assistance on clinics. A discussion was held about the ongoing commitment required of staff and various options were considered for demonstrating appreciation for the work done so far. CEO said that she would discuss this further with the EMT about what might be feasible. J Malone asked if there was anything that the OpsD would do differently? OpsD said that initially he was working to the flu pandemic plan and while it had some useful guidance, it didn't incorporate everything, e.g. the need for PPE for staff. He also said that the flu pandemic plan was for a 6-month period and didn't really have a longer-term vision. He added that IBTS representation at national fora where decisions are made that impact directly on the business is also crucial. The Chairperson thanked the OpsD for his detailed and informative presentation.</p>	<p>Chair to issue communication to all staff thanking them for their work during the pandemic.</p>

4.4	Strategy Briefing	
	<p>L Carrigan, Project & Strategy Officer (P&S) joined the meeting for this item. She outlined the work that had been undertaken so far on preparing the Strategy for the next 5 years. Consultation workshops with senior managers have been held, focus groups with donors are currently under way and stakeholder engagement interviews are also taking place. The relevance of the Strategy pyramid and the importance of revisiting the mission, vision and values of the organisation was discussed. The 3 strategy pillars and the 4 strategy enablers were outlined. She confirmed that consultation with all staff on the draft strategy will also take place before it is finalised. The Chairperson asked if other blood services had been looked at to see what constitutes good strategy? P&S Officer confirmed that the CBS and ABS had been looked at in detail as had other national agencies. It was also noted that feedback from EBA members would form part of the stakeholder engagement process, while a customer survey has been completed with the hospitals. B O'Mahony suggested that patient groups might also be consulted. The CEO added that the timeline was ambitious but this would be looked at to see what might be possible. The Board/EMT combined strategy day on 8th October was discussed. The Chairperson thanked L Carrigan for her detailed and informative presentation.</p>	
5.0	Items for decision	
5.1	Cork Centre	
	<p>The CEO reported on her visit to Cork and meeting with the Chief Officer, Cork Kerry Healthcare Community Area. He confirmed that he was fully supportive of the IBTS building a replacement centre on St Finbarrs campus. The CEO has undertaken to provide an evidence-based position paper outlining what exactly the IBTS wants to include in the new Centre. The CEO confirmed that a meeting with Dr Power and the M&SD is scheduled for 22/09. The Board approved the CEO's approach as outlined.</p>	
6.0	Items for information	
6.1	Minutes of the Audit, Risk & Compliance meeting of 9th June 2020	
	<p>The minutes were taken as read. Two audit reports, one on GDPR and one on Blood Continuity Process, both received satisfactory ratings. Issue tracking in relation to the number of open and overdue issues from previous audits was discussed. The CEO added that a number of outstanding issues, particularly in relation to IT would be addressed as part of the managed services IT solution. J Malone suggested that a detailed work programme with timelines on the outstanding issues be prepared. The R&RM presented on risk and compliance. The Chair of the Committee noted that there was not yet any management letter from the C&AGs and that the Finance Director would be writing again to the C&AGs on this so that the audit can be closed out. Three IA reports were presented at the Committee meeting last week, all were given a satisfactory rating.</p>	<p>CEO meeting IA with a view to finding a method to close out the open and overdue issues.</p>

6.2	Minutes of the M&SAC meeting of 20th April 2020	
	The minutes were taken as read. Dr Waters is now in post and is devising the project plan for the Eye Bank to reopen. It was noted that the HRB declined to fund the CP project which was disappointing, but it is hoped this project can now progress as EU funding is being sought and the HPRA have given approval. The value of NTAG was also noted.	
6.3	Minutes of the Finance Committee of 27th May 2020	
	The minutes were taken as read. The FD is working on moving the IBTS general insurances to the NTMA where possible. A submission has been made in relation to this. Both COVID related claims lodged to existing insurance provider were declined. The Committee believes it would be timely to get some independent advice on our insurance cover regarding any gaps. The deficit for Q1 was €539,000 and at €1.3m YTD. It was noted that additional costs were incurred because of COVID. The bank mandates have been updated to include the new CEO. The purchase of new buses has been postponed. The Actuary's report on the pension scheme is also due before year end.	
7.0	Date of next meeting	
7.1	The next meeting of the Board will take place on 9th November 2020 at 12 noon.	
7.2	Proposed meeting schedule for 2021	
	The proposed schedule of Board and Sub-Committee meetings for 2021 were noted. The Chairperson asked if anyone had issues with the proposed dates to contact the Secretary to the Board directly.	

Signed: _____

Date: _____