

MINUTES

Date of Meeting	12/09/2022	Ref	22/04/MO'D
Meeting	IBTS Board		
Present	Deirdre-Ann Barr, Chairperson; Deirdre Cullivan, Dr Liz Kenny; Dr Satu Pastila; John Malone; Dr Sharon Sheehan; Dr Sarah Doyle; David Gray		
Apologies	Dr Ronan Desmond; Kate Williams; Brian O'Mahony		
In attendance	Orla O'Brien, CE; Dr Tor Hervig, Medical & Scientific Director; Mirenda O'Donovan, Secretary to the Board; For item 10 on the Agenda; Catherine Hughes, CIO		
#	Item	Notes/Action	
1.0	Welcome and apologies		
2.0	Private Members time		
3.0	Conflicts of interest		
3.0	None declared		
4.0	Minutes of the Board meeting held on 13th June		
4.1	The minutes of the Board meeting held on 13 th June were agreed without amendment.		
4.2	Matters arising		
	No matters arising noted.		
5.0	Board Governance		
5.1	A number of documents were considered for Board approval following changes arising from recommendations of the IA on Governance and the Board external evaluation. The Board Operating Protocol to be amended to reflect the new Board membership term reducing from 10 to 8 years in total. It was also proposed that the review of Board sub-committee ToRs be regularised to a 3 year interval. This was agreed. The proposal was approved by the Board. queried whether Board approval was necessary, Secretary to the Board agreed to check the Code of Practice for Good Governance.	Board Sec to check Code of Practice re: query on external sub-committee members appointments.	
6.0	Chief Executive's Report		
6.1	This was taken as read. The CE highlighted a number of areas for Board attention.		
6.2	<i>HCW payment</i> – the initial response from the DoH to the IBTS request to be included was not successful. The IBTS has since responded with further information to make the case for IBTS frontline staff to be included for payment. The CE noted that a quarterly governance meeting with DoH would be taking place at the end of September and this matter will be raised again if there has been no further communication from the DoH in the interim.		
6.3	<i>Strategy implementation</i> – the CE noted that 65 initiatives had been identified for 2022. At this point 18 are completed. The donor appointments system, pathogen reduction and plasma use have all been pushed out from their original timeframe, though significant progress is being made. M&SD confirmed the timeline for the introduction of malaria testing in early 2023. CE advised that planning on initiatives for 2023 is ongoing but the intention is to reduce the number of initiatives identified for completion in 2023.		
6.4	<i>Blood supply</i> – the national appeal in June was noted and it successfully boosted attendance at clinics over the Summer months		

	so the blood supply is currently stable. The number of new donors is steadily increasing and is currently over 25% for the same time last year, however it remains well below pre-COVID-19 numbers. The Haemocue 301 was introduced on clinics earlier in the Summer and some adjustments were needed post introduction to address borderline Hb issues.	
6.5	<i>Operations</i> – the CE noted that there were only 2 COVID-19 positive cases this week. Absenteeism excluding LTSL and COVID-19 related absence is at 3.9% It was noted that the Chair has requested a presentation to the November Board on issues relating to recruitment and turnover. It was further noted that the new phone system was successfully installed across all centres over the Summer and this has had a significant positive impact on operations and donor recruitment. A special clinic for SJH staff will be held in the NBC on Monday 19 th September. Donor awards ceremonies will be recommencing in 2023.	
6.6	<i>New products/services</i> – allogenic serum eye drop production has commenced and demand is expected to be high.	
6.7	<i>Legal issues</i>	
6.8	<i>Finance</i>	
6.9	<i>Staffing issues</i> – There have been two recent Consultant retirements. Blended working arrangements have been approved by EMT recently and training and implementation for this new policy will commence next month. It was further noted that the pre-Haddington Road working hours arrangements have now been restored.	
6.10	<i>Regulatory</i> – HPRA inspections for the Cork Centre and Cork mobile will take place at the end of September and in November at the NBC. The draft EU Directive on Human Blood and Tissue is in the consultation phase. Q&CD will make a presentation to the Board on the key changes to the EU Directives at the November Board.	
6.11	<i>Defence Forces Gala Concert</i> – the CE reminded all Board members to confirm with if they were planning to attend on 22/10.	
7.0	Cork Centre	
8.0	Medical & Scientific Directors Report	
8.1	<i>Blood supply</i> – M&SD confirmed that the blood supply is stable at the moment.	
8.2	<i>SBRG implementation</i> – M&SD confirmed that the IBTS met last week to update her on progress with the implementation plan and the wording for the IDRA questions under consideration.	
8.3	<i>Pathogen Reduction</i>	
8.4	<i>Plasma</i> – a meeting with the leading Irish users is scheduled for October.	
8.5	<i>R&D</i> – a number of significant research projects have commenced and Board members were reminded that the BloodHIT conference takes place on 10 th and 11 th November. enquired about the nature of the research projects and the M&SD confirmed these were looking at cold storage of platelets and the treatment of patients with massive haemorrhage.	
9.0	Presentation of SBRG implementation	
9.1	M&SD gave an overview of the work undertaken to date to implement the recommendations of the SBRG. The CE clarified the	

	<p>sequencing of any further decision making – the MSAC will report to the Board on project progression. While initially Individual Donor Risk Assessment (IDRA) will be introduced on paper rather than electronically, the timeline for implementation remains unchanged. asked about consideration regarding recipients about the changes. M&SD confirmed that he would be engaging with patient groups. added that SaBTO have agreed that 1: 1m risk is acceptable. The IBTS will introduce the FAIR questions as well as additional questions on monkeypox and an IDRA Safety Monitoring Committee It was queried whether the SCA needed to be notified of the proposed changes and that the DoH be kept informed. SAHH and its impact on compliance was discussed.</p>	
10.0	Presentation on ICT Strategy implementation	
10.1	<p>CIO joined the meeting for this item. This is a 6 month review since commencing in post. She presented a strategy recap and the objectives for year one and two of the ICT strategy were discussed. The Chair noted the substantial work that had been undertaken so far. Resourcing of the IT Department was discussed. CIO confirmed that she was comfortable with the degree of implementation at this point, although some objectives have been moved out to 2023 and others have been grouped together and brought forward. It was noted that a detailed report to the ARCC on ICT including outstanding IA recommendations was included in the Board pack for members information. The Chair thanked the CIO for her presentation and the ongoing work by her and her team to address many of the issues identified in the ICT Strategy.</p>	
11.0	Minutes of the ARCC meeting on 07/06	
11.1	<p>The minutes of the ARCC meeting on 07/06 were taken as read. The meeting was updated on progress regarding the GIS. The Committee had a presentation on the audit on the Financial Statements – there were no issues or management letter from the C&AG. ARCC met the external auditors with no Executive present and no issues were identified. The Risk Register was reviewed. HPRA/Compliance issues were reviewed with the Q&CD, there were no areas of concern. IA reports on Governance, H&S systems, external communications and clinical governance were reviewed – all were satisfactory. The ARCC Chair raised the issue of the ARCC’s ToRs and the need to identify 2 external members for the Committee and the vacancy created by the Chair’s appointment. The Board Chair said that all sub-committee ToRs would be reviewed in line with the agreed timelines approved earlier in the meeting and that work on the ARCC committee external member vacancy had already commenced.</p>	
12.0	MSAC meeting of 08/06	
12.1	<p>The minutes were taken as read. The Chair of MSAC highlighted the discussion at the MSAC on the introduction of IDRA and the risk assessment which was in progress at the time. This will be a substantive item on the MSAC agenda on 06/10. Monkeypox was discussed.</p>	
13.0	Finance Committee meeting of 25/05	
13.1	<p>Minutes taken as read. highlighted the various items of expenditure not budgeted for 2022 which were having an impact. At this point the</p>	

	year end deficit could be between €100,000 and €1m going from best case to worst case scenario. It was also noted that 442 staff have been identified by IBTS as eligible for HCW payments and that provision would also have to be made for this. A recast 2022 budget for the remainder of the year is also being prepared.	
14.0	AOB	
14.2	<i>Defence Forces Gala Concert</i> – the Chair reminded Board members to respond to about their attendance on 22/10.	
15.0	Date of the next Board meeting	
15.1	The next Board meeting will take place on Monday 14th November at 12 noon.	

Signed: _____

Date: _____