

MINUTES

Date of Meeting	19/02/2024	Ref	24/01/PMcN
Meeting	IBTS Board		
Present	Deirdre-Ann Barr, Chairperson; Una Clifford; Dr Sarah Doyle; David Gray; Stephen O'Hare; Kevin Gregory; Dr Liz Kenny; Ann O'Connor; Dr Satu Pastila; Dr Nina Orfali; Dr Sharon Sheehan; Peter Dennehy		
Apologies			
#	Item	Notes/Action	
1.0	Private Members Time		
1.1	The Board met in private session.		
2.0	Welcome and apologies		
	The Chair welcomed all Board to the meeting and noted there had been no apologies. Ms McNally would be Acting Secretary.		
3.0	Conflicts of Interest		
3.1	There were no Conflicts of Interest declared. A member of the Board queried if the Board had a Conflict of Interest Policy and it was confirmed that there was a policy. It was agreed that the Secretary would include the Conflict of Interest Policy on the next Board Agenda for review.	Conflict of Interest Policy to be on Board Agenda in April for review	
For approval			
4.0	Minutes of the Board meeting of 18th December 2023		
4.1	The minutes of the Board meeting of 18 th December were agreed without amendment.		
5.0	Contract for Board Approval		
5.1	The CE updated the Board regarding a new contract with Octapharma for the supply of Fibrinogen following a procurement process. It was noted that the cost of contract was above the CE approval threshold and required approval and sign off by Board. There was a discussion regarding some minor typos and clarifications and subject to these being accepted the contract was approved by the Board, signed by the Chairperson, witnessed by Dr Sheehan and the Seal of the Board attached.		
6.0	Review of Internal Financial Controls & Internal Audit Annual Report 2023		
6.1	<p>The Chair of the ARCC noted that the Statement of Internal Financial Controls and Statement of Internal Controls report for 2023 was satisfactory, with no findings, and this has been reviewed and approved by ARCC. The Board expressed their thanks to the Finance Director and team for their work on this.</p> <p>The Internal Audit Annual Report 2023 was also discussed, There were seven internal audits last year and the internal auditors have given a reasonable assurance assessment on the IBTS internal controls. There were 10 "important" findings in 2023 and the CE confirmed that all findings were accepted by Management and actions agreed. The Review of Internal Financial Controls and Statement of Internal Controls were approved by the Board.</p>		

7.0	2024 Business Plan & Strategy Implementation Plan	
7.1	<p>Ms Laura Carrigan joined the meeting to present 3 reports closing out 2023 and two plans for approval: the 2024 Business Plan and the 2024 Strategy Implementation Plan.</p> <p>She outlined the close out of (i) 2023 Strategy, (ii) the 2023 KPI report and (iii) the 2023 Business Plan report. It was noted that 2024 Strategy Plan has 14 initiatives planned and all of these are carried over from 2023. These have been prioritised for delivery.</p> <p>She noted that the 2024 Business Plan had been reviewed and approved by the Finance Committee and includes the 14 Strategic initiatives along with 5 financial, 8 risk management and 6 capital initiatives (33 in total). There was a question in relation to how many of the proposed initiatives would be achieved and Ms Carrigan confirmed that most would be but noted that some were multi-year initiatives which will carry over into 2025. The proposed Board Strategy Day was also noted with a date to be agreed (possibly May). The Strategy Plan 2024 and the Business Plan 2024 were approved by Board.</p> <p>The Chairperson requested that an internal Board Evaluation exercise be scheduled and it was agreed that this would be discussed with the Secretary with date to be agreed.</p>	<p>Date for Board Strategy Day to be agreed.</p> <p>Secretary to organise internal Board evaluation</p>
8.0	Charities Regulator Record 2023	
8.1	<p>The Charities Regulator Compliance Record for 2023 was approved by the Board subject a number of clarifications requested by Board (links to evidence of action rather than referral to website and confirmation of Board Conflict of Interest Policy) which the CE will discuss with the Secretary of the Board. It was also agreed that in the future a tracked changes document would be provided with the papers to show changes from the prior years record for approval by Board.</p>	<p>CE to discuss clarifications requested by Board with Secretary</p>
9.0	Revised Terms of Reference for the M&SAC	
9.1	<p>The Chairperson of the M&SAC outlined the changes to the ToRs since they had last been approved by Board in 2019. She noted that the proposed ToRs have been revised to take into account the Medical Model of Care. One change to the revised ToRs was proposed and the ToRs were approved by the Board and signed Chairperson of the Board. These will be uploaded in the Board Manual Section in Decision Time and circulated to all members of the M&SAC.</p>	
10.0	Revised Terms of reference for the AR&CC	
10.1	<p>The Chairperson of the AR&CC outlined the changes to the AR&CC ToRs. It was noted that the ToRs were updated to include an amended quorum, Data Protection legislation (GDPR) and the cyber security directives. The revised ToRs were approved by the Board and signed by the Chairperson. These will be uploaded in the Board Manual Section in Decision Time and circulated to all members of the AR&CC.</p>	
For Discussion		
11.0	Chief Executive's Report	
11.1	<p>The Chairperson thanked the CE for getting the process to this stage. She noted this was a long process which required a lot of work / agreement between both organisations. She also asked for the Board's appreciation to be relayed to all involved.</p> <p><i>Blood supply</i> – collections have been very strong since the New Year.</p>	

	<p><i>Platelets</i> – planning for targeted recruitment is being developed and implemented as collections have reduced.</p> <p><i>Donor web portal</i> – 34,000 donor accounts have been created since go live.</p> <p><i>Donors of African heritage</i> – there has been no formal response to the paper submitted to DoH last year seeking funding support for a targeted recruitment campaign. It will be on the agenda for discussion at the next Governance Meeting in March. The Chairperson asked what the IBTS would do if funding is not approved by DoH. The CE confirmed that re-directing internal funding may be considered and if so would be discussed with the Finance Committee.</p> <p><i>Staffing Update:</i> sick leave has increased with both COVID-19 and the usual virus season affecting staffing on clinics but is being managed and while it has been tight no clinics have been cancelled.</p> <p><i>DoH Governance meeting</i> – the next meeting is confirmed for 28th March.</p> <p><i>Risk & Resilience</i> – this will be dealt with under item 14 on Board Agenda.</p> <p><i>Finance</i> – year end results and January 2024 updates were noted. These were discussed at the recent Finance Committee Meeting.</p> <p><i>Critical recruitment</i> – the new M&SD has verbally accepted the role and visited the IBTS on Thursday 15th February and met EMT and the IBTS medical Consultants. It is hoped that he will start in June/July 2024 and a business case has been submitted to the DoH for approval for a crossover period with Prof Hervig when the new M&SD commences in the role.</p> <p><i>Environmental, Health and Safety System</i> – information requested by Board in relation to legal cases was attached to the report.</p> <p><i>Sick Leave</i> – the sick leave rate for full year 2023 was 6%. This figure includes LTSL.</p> <p><i>HPRA inspections</i> – there is still one outstanding report to be closed from 2023 as the HPRA had requested further information. The Tissue Establishment inspection has been closed. It was noted that there was a 2 day GDP inspection in January and the report is awaited.</p> <p><i>IT</i> – work is on-going in relation to SAHH and the NCSC self-assessment and remediation plan which has to be submitted by 26th February.</p> <p><i>Data Protection</i> – it was noted that there had been two data breaches. One breach was reported to the DPC and is under investigation. The other breach was assessed by the DPO and it was determined it did not reach the threshold for notification to the DPC.</p> <p><i>Climate Action</i> – the new company engaged to carry out the energy audit commenced in January with a report in June as previously advised. The sustainability post has been advertised and is included in the Strategic Workforce Plan submitted to the DoH late last year.</p>	
12.0	Cork Centre	
12.1	Work is continuing on the Development Brief for the new centre in Cork. An update will be provided to the April Board meeting.	
13.0	Medical & Scientific Director's Report	
13.1	<p><i>Blood Supply</i> – this has been covered in the CE report.</p> <p><i>Reintroduction of Irish Plasma</i> – progress on the implementation of the reintroduction of Irish Plasma is continuing.</p>	

	<p><i>IDRA</i> – monitoring of IDRA continues with no issues being reported. It was noted that a compliance study proposal was presented to the M&SAC earlier in the day and was approved subject to further work on questions for Irish donors. The Board will be kept informed on this important study.</p> <p><i>Malaria Testing</i> – this has been very successful with approximately 200 people being accepted as donors as a result of this testing.</p> <p><i>Frozen Blood Bank</i> – the feasibility of establishing a “frozen blood bank” is being considered. A “frozen blood bank” would allow the IBTS to stock 200 – 300 units of O Rh negative red cells which could help when supply is tight.</p> <p><i>Military collaboration</i> – collaboration between the IBTS and the Army was noted. The IBTS may be required to provide some supply support to the IDF from March.</p>	
14.0	Presentation by Risk & Resilience Manager	
14.1	<p>Ms Helen O’Shea joined the meeting to present on Risk Management. She outlined the risk appetite in the IBTS and noted that the IBTS is committed to ensuring that no unnecessary or unacceptable risks are taken which might expose the IBTS or any of its stakeholders to potential harm or jeopardise the overall achievement of its Strategic Plan. She outlined how risks are identified, assessed and managed.</p> <p>She gave a “live” demonstration of one red risk through the Decision Time Risk module. She encouraged all Board members to access the Risk Register on DT. She confirmed that all RED and AMBER risks are reviewed by the EMT and AR&CC at their meetings with any serious risk requiring escalation to Board for discussion. She noted that she will be organising a training session for all Board members on the Risk Register via Zoom which will require attendance by all new Board members. The Chairperson thanked Ms O’Shea for her informative presentation and welcomed the proposed training. The Chairperson also asked that a risk session be incorporated in the Board away day later this year.</p>	
	For Information	
15.0	Minutes of the MSAC 13th November 2023	
15.1	Minutes taken as read. Chair updated the Board on the most recent M&SAC meeting which had (i) approved participation in the Compliance Study, (ii) had a presentation on SAAH and (iii) had a presentation on the progress of the eye bank.	
16.0	ARCC minutes of 12th December 2023	
16.1	Minutes taken as read. The Chair updated the Board on the recent AR&CC meeting which had (i) a presentation / update on NIS D reporting (ii) update on Internal audit including the 2023 Statement of Internal Financial Controls and the IA annual report, (iii) update on Risk & Resilience including a review of the top risks, (iv) compliance update including HPRA inspection reports, (v) review of AR&CC ToRs and (vi) review of 2023 expenses for M&SD and CE.	
17.0	Finance Committee Minutes 1st November 2023	
17.1	Minutes taken as read. The Chair updated the Board on the most recent Finance Committee meeting which had reviewed (i) Annual Leave report, (ii) the updated treasury policy and (iii) the revised fixed asset policy.	
15.0	Date of next meeting	
15.1	The next meeting of the Board will take place in the NBC on Monday 22nd April at 12 noon	

Signed: _____

Date: _____