

MINUTES

Date of Meeting	23/06/2016	Ref	16/03/MO'D
Meeting	IBTS Board		
Present	Prof Anthony Staines, Chairperson; Linda Hickey, Dr Liz Kenny; Brian O'Mahony; Deirdre Cullivan; Dr Julie Heslin		
Apologies	Simon Mills		
By Audio-link	Dr Jorgen Georgsen; Kate Williams; Dr Ronan Desmond; John Malone, Yvonne Traynor		
#	Item	Notes/Action	
1.0	Minutes of the Board meeting held on 11th April 2016		
1.1	The minutes were approved without amendment.		
2.0	Matters arising		
2.1	<i>Strategic Plan</i> – the CE advised the Board that he has been meeting staff around the country to consult on the next Strategic Plan.		
2.2	<i>DoH Governance meeting</i> – the CE confirmed the standing items on the agenda.		CE to circulate minutes of the DoH Governance meetings to the Board.
2.3	<i>ABC</i> – the CE confirmed that the DoH have agreed to push for this to be implemented in this budget cycle so that it is in place for January 2017.		
3.0	Chief Executive's Report		
3.1	Stakeholders		
3.1.1	<i>HPRA</i> – Their next inspection will be in Cork on 18/20 th July and in the NBC in November.		
3.1.2	<i>Limbal Stem Cells</i> – the M&SD briefed the Board on the first implantation of limbal stem cells in Ireland. The IBTS manufactured the cells for the implant to clinical grade standard under licence from the HPRA. This initiative was made possible by the bequest to the IBTS from Edith Ingram. The Chairperson congratulated the team in the Tissue Laboratory and Dr Murphy for their contribution to this major initiative.		
3.1.3	<i>Risk Register Update</i> - Audit & Compliance Committee reviewed the combined risk register at its meeting on 7 th June. A desktop exercise of the BCP is scheduled for 30 th June.		
3.2	Customer		
3.2.1	<i>Finance</i> – A reduction in the sale of red cells of 3.2% and 0.89% in platelets for the first 5 months of the year represents a loss of €796,000 in income. Current sales of red cells indicate a transfusion rate per 1,000 of the population of 25.4. Still hopeful that June figure might make budget, but overall these figures represent a drop of 2000 units on the same time last year. The out turn for the year end is currently looking like 117,000 units of red cells for the year. Budget parameters for 2017 currently looking at 116,000 units of red cells.		
3.3	Safe & Sustainable Supply		
3.3.1	<i>Blood supply</i> – the introduction of the venous hemocue at clinic has allowed us to recover about one third of those who fail the capillary hemocue test.		

3.3.2	<i>D'Olier Street Clinic</i> –the IBTS had received an offer for D'Olier Street which the landlord was prepared to accept. However, the timing of the offer was not right and it was agreed to revisit the proposal if it was put forward again in two years time.	
3.3.3	<i>Tuam Centre</i> – the IBTS has confirmed that it would still be interested in leasing the ground floor but is actively considering other options.	
3.4	Effective relationships	
3.4.1	<i>Risk management/emergency planning</i> – the CE and R&R Manager met the HSE Emergency Planning Coordinator to discuss IBTS role in the event of an emergency. Priority is to standardise terms and definitions used by the various bodies involved.	
3.4.2	<i>Cork Centre</i> – a drawing of the proposed space available in the new Centre in Cork was sent to the Board. The costings associated with this amount of space is €5m more than what is currently available. HSE and CUH have both confirmed they have no Capex available for this development. The CE is waiting for written confirmation from CUH that the proposed site is approved for this development . The Board expressed disappointment at the lack of progress and it was proposed that the Board agree a timeframe for progress and if there is none then options besides CUH be presented again to the Board. The Board approved that a meeting be held with officials from the DoH, CUH, Estates HSE and the Group CEO HSE South Hospitals Group setting out the IBTS concern about the lack of progress in this development and trying to agree a way forward. It was confirmed that the next Board meeting is on 12 th September, if substantial progress hasn't been made by that meeting, the Board agreed to consider its alternatives in terms of site location and service provision.	CE to arrange meeting between IBTS, DoH, HSE and CUH.
3.4.3	<i>Outsourcing/outsourcing IT</i> – the CE confirmed that a number of organisations have indicated their willingness to share their experience of outsourcing and outsourcing IT services.	
3.4.4	<i>M&SD post</i> – the CE advised the Board that approval had not yet been received from DPER to advertise this post. The CE advised that a substantial gap between the departure of the current M&SD and the appointment of a new one raised some governance issues that may concern the Board. The Board approved the advertisement of both the M&SD post and the Consultant Virologist post.	
3.5	Seal of the Board	
3.5	<i>Contract to attach seal of the Board</i> – the Board approved the seal of the Board on a contract for the provision of apheresis sets.	
4.0	Financial Statements 2015	
4.1	The Board approved the financial statements for 2015. The Financial Statements were signed by the Chairperson and the Chairperson of the Finance Committee, Linda Hickey. The Chairperson and Chief Executive signed the letter of representation. The draft management letter was also discussed by the Board.	
5.0	Marketing Strategy	
5.1	The meeting was joined by the National Donor Services Manager and representatives of both the Creative and the Media Buying Advertising Agencies. The experience of first time donors was discussed and the possibility of carrying out some research on this group was also discussed.	It was agreed that the same presentation should also be made available to

	There was a broad ranging discussion on the new creative and the promotional campaigns underway and planned. The Chair thanked the two companies for their research and presentation and looked forward to improved recruitment of new donors.	staff.
6.0	Minutes of the MAC meetings of 14/03/2016, 11/04/2016 and 09/05/2016	
6.1	It was noted that up until the May MAC meeting 47,000 people had been tested for HEV and 34 cases had been identified as positive. These have been notified to the HPSC. Monitoring of Zika virus is ongoing and the discussion on the likelihood of sexual transmission was discussed. It was agreed to await the outcome of the next EBA EID-Monitor communication. The outcome of the MSM conference in April was discussed and the MAC agreed to hold a special meeting on 13/06 to discuss the matter in full.	
7.0	Minutes of the A&C Committee of 04/05/2016	
7.1	Annual accounts were reviewed and signed off by the A&C Committee. It was noted that a desktop exercise for the BCP is scheduled for 30/06. The A&C Committee met the C&AG without the Executive present and the Chairperson reported that the C&AG raised only minor matters with the Committee. It was agreed that the TORs of the A&C Committee and the Finance Committee would go on the respective Committees agenda for review. The Risk Register was discussed and it was agreed that the R&R Manager would report to the Board on the top 5 risks. It was noted that the A&C Committee Annual Report was not included in the papers. The Chair of the A&C Committee is to meet the Secretary to the Committee to discuss the agenda and a formal review of the TOR will be scheduled.	Secretary to the Board to circulate A&C Annual Report
8.0	Minutes of the Finance Committee meeting on 03/02/2016	
8.1	The BECS project was formally signed off at this meeting and the Project Manager attended to give a full report on the project. The costs associated with the withdrawal of the Haemospect were discussed and the future funding of the closed pension scheme was also discussed.	
9.0	Deed of amendment of the Superannuation Fund	
9.1	The deed of amendment of the Superannuation Fund was approved by the Board and the Seal of the Board applied.	Trustees to review the Trust Deed before the end of the year.
10.0	Correspondence	
10.1	Letter received from the Trustees regarding the past deficit. It was noted that the next actuarial evaluation is due in May 2017.	
11.0	MSM Policy	
11.1	The Chairperson outlined the matter before the Board for discussion. The Board's recommendation will be sent to the Minister when the Board meeting concludes. The M&SD went through the content of his report and highlighted 3 key issues, HIV risk, emerging infections and STIs in the heterosexual population and the risk associated with that. The Chairperson of the MAC went through the discussion at the MAC and on the Conference presentations and the M&SDs report.	Executive to bring a costed proposal for donor research to the September Board

	<p>The MAC believe that the HIV risk is covered by a one year deferral but a number of MAC members do not believe that the threat from emerging infections would be adequately covered by a one year deferral. The MAC agreed that a lifetime deferral was disproportionate and no longer acceptable. Therefore, the issue at stake was what period would be deemed appropriate to deal with emerging infections. There were many views on this and what cohort of the population presented the greatest risk. Following an evaluation of the issues involved it was agreed that the appropriate response to dealing with emerging infections was that all donors who have had a sexually transmitted infection will be deferred from donating for a period of five years from that infection. It was agreed that in line with the recommendation in the M&SD report the IBTS would commission some research in partnership with an academic institution to understand compliance behaviour among donors. It was noted that the DoH has its own research fund and that the Board could apply for funding for this research. It was agreed that a communications plan for the various stakeholders would also need to be developed. After further discussion the Board agreed that MSM will be deferred from donating blood for a period of one year since their last sexual encounter with a man. All donors who have had a sexually transmitted infection will be deferred from donating for a period of 5 years from that infection. A comprehensive engagement process will begin as soon as the Minister has made a decision on these recommendations to explain the changes in practice and the implications of these for donors. The IBTS will commission high grade academic research so that we better understand how people choose to donate or to exclude themselves from donating blood. It was agreed that the Chairperson would write to the Minister after the meeting outlining this recommendation and attaching a copy of the M&SD's report.</p>	
12.0	Date of next meeting	
12.1	The next meeting of the Board of the IBTS will take place on Monday 12th September at 12 noon.	

Signed: _____

Date: _____