MINUTES

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| *Date of Meeting* | 16/12/2024 | ***Ref*** | 24/07/MO’D |
| *Meeting*  | IBTS Board |
| *Present* | Deirdre-Ann Barr, Chairperson (via Zoom); Dr Sharon Sheehan; Ann O’Connor; Una Clifford; Dr Nina Orfali; Stephen O’Hare; Kevin Gregory, Noel Beecher; Dr Satu Pastila (via Zoom)  |
| *Apologies* | Peter Dennehy; Dr Sarah Doyle (sick leave) |
| **#** | Item | Notes/Action |
| **1.0** | **Welcome and Apologies** |  |
| **1.1** | Apologies from Peter Dennehy noted |  |
| **2.0** | **Private members time** |  |
| **2.1** | The Board met in private session |  |
| **3.0** | **Conflicts of Interest** |  |
| **3.1** | None declared |  |
|  | **For approval** |  |
| **4.0** | **Minutes of the meeting of the Board on 18th November 2024** |  |
| **4.1** | The Board discussed the minutes and asked that some changes in the detail of the minutes be made. Minutes of the Board meeting of 18th November to be resubmitted at the next Board meeting for approval. |  |
|  | **For Discussion** |  |
| **5.0** | **Chief Executive’s Report**  |  |
| **5.1** | Current issues |  |
|  | CE advised the Board on an issue of correspondence received from SVUH. Content of the correspondence discussed. Board noted that the CE and M&SD were dealing with the matter and would keep the Board updated as required. |  |
| **5.2** | **Strategy/Business Plan Update** |  |
|  | *Cork project* – tender for design team closed last Friday. Five tender responses were submitted. *Plasma* – Meeting with the CMO took place on 27/11 to discuss the possibility of collecting plasma for PDMP manufacture, IBTS has been asked to prepare a preliminary business case. It was noted that the last shipment of imported Octaplas had arrived this morning and the first shipment of Irish plasma for the manufacture of Irish sourced Octaplas has departed on the return journey. It was also noted that 6 to 7% of recovered plasma is not being used because of UK residency during 1980 to 1996.Strategy development – prioritised projects for 2024 highlighted. *Eye Bank* – SLAs with Beaumont, the Hospice in Harold’s Cross and the ODTI are drafted. Serum eye drops – demand has increased and there is now up to a 3 month delay in production. *Blood supply* – busiest Q4 in 10 years. First time donors just under 11,000. This KPI is to be reviewed for 2025 to focus more on blood group specific donors.  |  |
| **5.3** | **Corporate Update** |  |
|  | DoH Governance meeting took place on 11/12. The Minister for Health has approved the request to raise the IBTS establishment ceiling by WTE 26.85 Each post will require a specific business case to be submitted so that the formal sanction process is completed and approval is provided by the Department.Board vacancies discussed. It is hoped that the appointment to fill the current vacancy will happen in the New Year.Tripartite meeting between the DoH, IBTS and HPRA will take place on 16/01. The HPRA is seeking DoH approval and funding for 0.4 of a Consultant post.*Finance* – year end surplus currently forecast at €1.2m. Current deficit arising from hospitals withholding payment is at approximately €2m. HSE new financial management system also noted. Budget 2025 is with the Minister for approval. Audit planning letter has been received and the audit of the 2024 accounts will be carried out by the C&AG. *Quality* – HPRA inspections for 2024 now completed and responses to all inspection reports have been submitted. EQMS tender has been awarded. | CE to write to CEO of HSE regarding hospital payments. |
| **5.4** | **IT & Cyber resilience** |  |
|  | 90% of suppler categorisations will be complete by year end. A number of tenders have been completed with suppliers selected. The degree of progress made with Cyber/NIS2 compliance was noted by the Board. CE added that the prioritisation of strategic initiatives will be worked through by EMT at a specific workshop tomorrow. The delay in SAHH until the second half of 2025 was discussed by the Board. CE to revert to Dr Pastila regarding her query on historic phenotyping project. |  |
| **6.0** | **Strategy Development Process** |  |
| **6.1** | Laura Murphy, Head of Strategy, Planning and Performance joined the meeting for this item. HoSP&P went through a high level outline of the strategy development process and Board engagement and oversight in 2025 for developing the new organisational strategy. She confirmed that she would be adopting an iterative approach to workshops with stakeholders. The proposed timelines for strategy development was discussed. The Board suggested that she utilise the risk register to inform the strategic process. Communication with comparable blood services as part of strategy development was highlighted. HoSP&P confirmed that external stakeholders, including relevant advocacy groups, would form an important part of the consultation process. The Chair noted that the HoSP&P had only recently joined the organisation and wished her well in her role. |  |
| **7.0** | **M&SD Report** |  |
| **7.1** | **Blood supply**  |  |
|  | M&SD noted that issues still remain extremely high. He advised the Board that the second anticipated delivery of blood from the NHSBT arrived this morning. In relation to Hb deferrals, the solution is to adopt the EDQM standard. It is expected that this change will be ready to go live in January 2025 which will result in the recovery of some of those donors previously deferred. He confirmed that this change will be monitored closely for 6 months to ensure there is no adverse impact on donors. He has proposed to the Irish Haematology Society that RhD positive be used more frequently in emergencies for males and females not of child bearing age and this has been positively received. M&SD also added that some of these changes proposed need to be reviewed by NTAG to progress to changes in national policy and he hopes that a meeting of NTAG can be arranged in early 2025 to address these issues. |  |
| **7.2** | **IDRA & Compliance Study** |  |
|  | The IBTS participation in the UKHSA FAIR compliance study has progressed and the requisite documentation to run the survey with Irish donors is almost complete. An increase in the number of positive test results after the last appeal was noted. |  |
| **7.3** | **Medical Model of Care** |  |
|  | As a result of constraints regarding joint IBTS/hospital appointments, M&SD is reviewing the MMOC and a revised report with a different approach will come to the Board in April.  |  |
| **7.4** | *Diagnostics Cork* – issues regarding resourcing and 24 hour service have been resolved. |  |
| **7.5** | *ISO15189* – preparatory work for the next audit in March is ongoing. |  |
| **7.6** | **Tanzania Blood Service** |  |
|  | M&SD advised that the decision has been made not to progress with this partnership. Other research activities can and will be pursued. |  |
|  | **For approval** |  |
| **8.0** | **Proposed amendment to IBTS retirement policy** |  |
| **8.1** | The recommendation is to change the Board’s retirement policy regarding retirement events. After some discussion it was agreed to defer this item until the February meeting when the FD has provided some additional information requested by the Board. |  |
| **10.0** | **Appointment of Chair of the Finance Committee** |  |
| **10.1** | N Beecher absented himself from the meeting for this item. The Chair advised the Board that N Beecher has agreed to Chair the Finance Committee. This was approved by the Board. The Board also approved the recommendation that N Beecher would sit on the ARCC on a temporary basis until the current Board vacancy is filled. |  |
| **10.2** | The Chair withdrew from the meeting as she was unwell and A O’Connor agreed to Chair the remainder of the meeting. |  |
| **9.0** | **Presentation on Sustainability and Climate Action Plan** |  |
| **9.1** | Finance Director Noel Murphy, Graham Healy Facilities Manager (FM) and Kevin Barron, Climate and Sustainability Lead (CSL) joined the meeting for this item. The CE confirmed that the IBTS is not required to comply with the new CSRD. Independent advice had been sought on this when the Chair raised the matter. The FM and CSL presented the key objectives of the sustainability strategy and the climate action plan. They were both confident that the strategy and climate action plan as outlined would deliver IBTS’s compliance with emissions reduction targets by 2030 and this has been independently verified. It was noted that almost 90% of total organisation emissions are from the NBC. The projects listed were discussed. The boiler replacement and the LED light replacement will take place in 2025. The FM confirmed that the boiler replacement project will not impact on production. Grants available for some of the projects listed discussed. It was noted that the roadmap will be reviewed annually by the Board, with the next review due June 2025. FD confirmed that oversight on progress will be through the Finance Committee. Second phase (post 2027) proposed projects discussed. The Board raised concerns regarding lead in times and risks associated with these projects. These were addressed by FM and CSL. They also confirmed that reporting obligations to the SEAI on targets and data are already in place and will continue. Additional reporting will be included in the organisation annual report. CSL confirmed that the IBTS puts zero waste in landfill. Route planning for clinic teams and transport emissions discussed. Obsolete computer equipment is also captured in WEEE waste. Claiming mileage for cycling was raised by the Board. Initiatives at other IBTS sites also discussed. FD confirmed that the projects prioritised for 2025/2026 are included in the budget. FM confirmed that there is a regulatory requirement for annual Board oversight as well as more frequent Finance Committee oversight. It was proposed that a foreword be included in the strategy prior to publication. The Sustainability Strategy and the Climate Action Plan were approved by the Board. The A/Chair thanked the Facilities team for their work on the plan and congratulated them on a substantial piece of work.  |  |
| **11.0** | Presentation by Director of Production and Hospital Services  |  |
| **11.1** | DoP&HS Barry Doyle joined the meeting for this item. He presented on strategic initiatives in Production/hospital services including the reintroduction of recovered plasma for manufacture into Irish Octaplas. He also noted that a validation of whole blood was also undertaken following initial interest from one hospital. A survey is underway at the moment in the hospitals regarding potential new product developments in the future. DoP&HS acknowledged that the support of many departments across the organisation made it possible to deliver the project to reintroduce Irish plasma for therapeutic use. The Board thanked B Doyle and his team for all of their work to get the project delivered, |  |
| **12.0** | **Minutes of MSAC 16th September**  |  |
| **12.1** | Approved minutes noted. The Chair of the MSAC outlined the issues for discussion at MSAC which included the Hb deferral thresholds and discussion on infectious diseases. The Chair also noted the importance of undertaking the Compliance Study (with NHSBT). |  |
| **13.0** | **Minutes of the ARCC 10th September**  |  |
| **13.1** | Approved minutes noted. In the absence of the ARCC Chair, A O’Connor updated the meeting. It has been confirmed that the C&AG will audit the 2024 accounts. The significant progress made on cyber security was acknowledged by the ARCC. It was noted that the NIS2 legislation has still not been enacted. The Risk Register was reviewed by the ARCC and the BCP report was reviewed. Audit plan for 2025 approved. INAB audit progress noted by the ARCC. The CE confirmed that a risk based approach to HPRA inspections will be included on the agenda for discussion with the DoH and HPRA.  |  |
| **14.0** | **Minutes of the PD Committee 9th September**  |  |
| **14.1** | Approved minutes noted by U Clifford. |  |
| **15.0** | The A/Chair thanked the Board and the Executive for their work throughout the year and wished everyone a happy and peaceful Christmas. |  |
| **16.0** | **Date of next meeting** |  |
| **16.1** | The next meeting of the IBTS Board will be on **Monday 17th February 2025 at 12 noon. It was requested if the meeting could start a little later. Same to be discussed with the Chair.**  |  |

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