

MINUTES

Date of Meeting	11/02/2019	Ref	19/01/MO'D
Meeting	IBTS Board		
Present	Linda Hickey, Chairperson; Deirdre Cullivan; Yvonne Traynor; Kate Williams; Dr Sarah Doyle; Dr Satu Pastila; Dr Liz Kenny		
In attendance	Andy Kelly, Chief Executive; Dr Stephen Field, Medical & Scientific Director; Mirenda O'Donovan, Secretary to the Board		
By Audio-link	John Malone		
Apologies	Dr Ronan Desmond; Simon Mills		
#	Item	Notes/Action	
1.0	Private Members Time		
1.1	Discussion at the MAC about the article in the Medical Independent was raised. The Chairperson noted that the terms of reference for the MAC were under review and this was an opportune time to include some scientific expertise.		
2.0	Minutes of the meeting on 10/12/2018		
2.1	The minutes of the Board meeting on 10/12/2018 were agreed without amendment.		
3.0	Matters arising		
3.1	<i>Irish Cornea Bank</i> – Ophthalmologist Dr Barry Quill presented to the MAC on the issues around supplying corneas to Irish patients via the current system and made the case for reinstating the Irish Cornea Bank. The Chairperson noted that at the meeting with the Secretary General of the DoH the issue of tissue services in Ireland had been raised by the CE and this is being followed up with the DoH.	M&SD to prepare a paper on a Cornea Bank for the Board. Dr Barry Quill to be invited to present to the Board at its April meeting.	
4.0	Chief Executive's Report		
4.1	<i>Shareholder/Government</i> – 6 limbal stem cells have been provided to date. The Consultant Ophthalmologist will be discussing this at a conference in February to increase the number of cases. A proposal for allogeneic tears was discussed at the EMT last week. Additional information on the costs is required before a decision will be made. In relation to fetal genotyping there has been an increase in the number of samples being sent to the IBTS, but there are still hospitals that are sending samples to the UK. The number of HSA reportable incidents for the year was discussed. It was agreed that the CE would rephrase the language around targets. BCP test feedback was discussed at the EMT last week, it was agreed that there would be a further test in Q3 2019.		

4.2	<p><i>Excellence in Donor Services</i> – 18% of all blood issued last week was O negative, the CE pointed out that this was not sustainable. Dr Pastila confirmed that in Finland too approximately 9% of all blood issued is O negative where the O negative population is just 4%. The response to the ACSLM letter to the Board is being prepared. The CE briefed the Board on an issue that had arisen with the introduction of new work practices on clinic. This issue is being managed.</p>	
4.3	<p><i>Safe & Sustainable Supply</i> - The CE confirmed that interviews for the joint SVUH/IBTS Consultant post will take place on 4th March. A plan to increase the use of the service by HH patients is being developed. The Chairperson confirmed that Dr Field has been accepted into the Royal College of Physicians .</p>	
4.4	<p><i>Build a high performance organisation</i> - the CE presented an overview of the GPTW survey results. A detailed presentation will take place later this week. The CE confirmed that a culture audit was carried out the last time the survey was undertaken, but not on this occasion. The IT Helpdesk service has not improved and managed services will be tendered in Q1. The Project Strategy Officer presented to the EMT last week. She will attend the strategy day with the Board in March.</p>	
4.5	<p><i>Deed of appointment of Member Trustees</i> – the appointment of new member trustees to the Pension Scheme was approved by the Board and the Seal of the Board applied to the Trust Deed amendment.</p>	
4.6	<p><i>Centres</i> – a previous proposal in relation to the Ardee Centre had received Board approval. This is now no longer proceeding. This change was approved by the Board. The CE confirmed that the tender for the refurbishment of the Tuam Centre has closed and the CE has proposed to the project sponsor that IBTS should appoint a part-time QS to manage the project on site.</p>	
5.0	<p>Review of Business Plan 2018</p>	
5.1	<p>The CE presented a paper reviewing the implementation of the Business Plan for 2018. The Chairperson asked that a donor satisfaction survey be carried out during 2019. The CE explained that issues had arisen with Dublin Airport Security around the transportation of stem cells by courier. The CE has written to the CE of Dublin Airport Authority to get clarity around clearance requirements and to ensure that couriers and stem cell donations have clear passage through security. Bidirectional interfaces between eProgesa and other technologies continues to be an issue. The CE has invited MAK Systems to Dublin to discuss the implementation of the Semester Patch and to agree a fixed price. EMT visits to the Centres are taking place twice yearly as agreed.</p>	

	<p>The second round of PD has commenced. An electronic health and safety reporting system is being implemented. The CE confirmed that CUMH is not sending its samples to the IBTS for fetal genotyping, the Chair asked if this should not be raised with the Hospital Group and the CE agreed. Know Your Type event took place in Dundalk last week. It has been decided to hold these events immediately before a clinic is due to take place as this has a better chance of converting participants to donors.</p>	
7.0	Brexit	
7.1	<p>The CE confirmed that contingencies are in place for suppliers. IBTS will hold an additional 2/3 weeks of critical stock items in the event of supply chain disruption post 29th March. The NIBTS have been in touch regarding IBTS support for particular specialist products and it has been confirmed that there is no change in that arrangement.</p>	
6.0	Cork Centre	
6.1	<p>The EMT has held a special meeting to look at the Cork Centre and to prepare a detailed response to the issues and concerns raised by CUH. The issues to be addressed are the Therapeutic Apheresis Service, the Diagnostics laboratory, management of platelets, the irradiation of red cells, reference serology work and ante-natal testing. The EMT will present a paper to the Board for discussion at the Strategy Day in March. It was noted that transferring TAS would probably be the most complex issue. The Chair of the MAC confirmed that the Mater Private Blood Bank is now not scheduled to open until Q4 2019. CE said that he had been informed towards the end of 2018 that the laboratory would open at end Q1 2019. He will contact the Mater Private.</p>	
8.0	Finance Committee meeting of 05/11/2018	
8.1	<p>The Chair of the Finance Committee briefed the Board on the overview of ABC costing presented by the Cost Accountant. Q3 financial accounts and the proposed budget for 2019 were also reviewed. The Finance Committee also met on 30/01/2019 and reviewed the Financial Statements before they went to the C&AG and the Department of Health. The Chair thanked the FD and his team for their work in preparing the accounts. The travel policy has been updated and approved. The 9 week timeframe for submitting expenses was pointed out to the Board. The changes to the pension levy that came into effect on 1st January were discussed.</p>	

10.0	Audit, Risk & Compliance Committee meeting of 04/12/2018	
10.1	The Chair of the A,R&C Committee briefed the Board on the meeting. The Management Letter was received. The Chairperson suggested that concerns over the delay in issuing the Management Letter should be conveyed to the C&AG in writing. The A,R&C Committee were briefed on the outcome of the BCP exercise and discussed the top 3 risks from the Risk Register, namely, shortage of blood, IT infrastructure and Brexit. A paper on vendor assurance was on the agenda and the Committee got an update on GDPR compliance. There was also an audit on Internal Financial Controls. The Chair noted that there were a lot of open issues on audits related to IT, particularly where the corrective actions required third party supplier cooperation. The CE confirmed that IT security has been outsourced and that a lot of the corrective actions identified are connected to the Semester Patch implementation. The high turnover of staff in Components was noted, the CE added that this would be addressed as part of the Components Review implementation plan and that once the required skills set is defined a training plan will be put in place. The Board confirmed approval of the Travel Policy and the Business Plan for 2019.	
9.0	MAC meeting minutes of 10/12/2018	
9.1	The presentation by the Consultant Ophthalmologist Dr Barry Quill on the Cornea Bank was discussed. The proposal for Allogeneic tears is to be properly costed, the service provided by UCHG is limited. M&SD to confirm the shelf life of the product. .25 of a Consultant post to be confirmed by both parties. R&D plan has been approved for development, it was agreed that from an oversight perspective there should be external experts involved. The policy to be discussed further at the Strategy Day. vCJD – Dr Richard Knight has agreed to come to speak to the MAC about his research and conclusions. The CE proposed that in order to make the best use of his visit that a workshop/seminar be organised to discuss vCJD and that the Board would be able to attend as well as the MAC. A structure including scientists which would meet 4 times a year is being considered to provide clinical governance. An extra MAC meeting will take place next month. M&SD confirmed that a BEST collaborative meeting will take place in Cork in April.	
10.0	Board Strategy Day Tuesday 26th March	
10.1	J Malone confirmed he would be in attendance and Dr Pastila gave her apologies.	
10.2	The Chairperson reminded everyone that the Donor Awards Ceremonies dates are included in their Board pack.	

11.0	Date of next meeting	
11.1	The next meeting of the Board will take place on Monday 8th April at 12 noon in the NBC.	

Signed: _____

Date: _____