

MINUTES

Date of Meeting		26/04/2021	R	?ef	21/02/MO'D	
Meeting		IBTS Board				
Present (via Zoom)		Linda Hickey, Chairperson; Deirdre Cullivan; Deirdre-Ann Barr; Brian O'Mahony; John Malone; Dr Satu Pastila; Kate Williams; Dr Sarah Doyle; Dr Sharon Sheehan; Dr Liz Kenny; David Gray; Dr Ronan Desmond				
In attendance		Orla O'Brien; CEO; Dr Stephen Field, Medical & Scient Mirenda O'Donovan, Secretary to the Board			& Scientific Director;	
By Au	dio-link					
#	Item				Notes/Action	
1.0	Welcome and					
1.1	The Chairperson welcomed everyone to the meeting. No apologies noted.					
2.0	Private Board					
2.1	The Board met in private session.					
3.0		Conflicts of interest				
3.1	No conflicts of interest declared.					
4.0		oard meeting held on 15/0				
4.1	The minutes of subject to amo	of the Board meeting held o	n 15/02/2021 w	ere ap	proved	
5.0	Chief Execut					
5.1		ficant issues				
<u> </u>			have been s	chedule	ed for	
	Approximately 85% of IBTS staff have been scheduled for vaccination. A task force has been established to start planning for					
	recovery. Post vaccination deferral has been applied on clinics since					
	last week. The draft SLA with the HPRA on governance					
	arrangements for the NHO is being progressed.					
5.2						
		The CEO reported on the progress of various deliverables for Q1 and				
		hat are currently ongoing				
		d on 22 nd April. The ICT S				
		egy will be ready for the	ne Board in	June.	2022	
	deliverables will be planned in Q3.					
5.3		erations update		· -		
		or donor ID has been app				
		ams should be completed				
	Semester patch has been implemented the online appointments					
	•	system can be actioned. Distribution of donor awards has				
	commenced and all those outstanding should be delivered by the end of June. The Eye Bank plan will be completed by the end of June.					
	There has been acknowledgement by the management company that					
		ier Street need to be addre	•			
	significantly on previous years, this will continue to be an issue while					
	public health restrictions are in place. Over 250,000 calls have been					
	made by donor services since the appointment system came into			ne into		
	operation last March. The current 1850 number will be ceasing in			sing in		
		waiting to hear from Voc				
		n increase in hospital active red cells and platelets.	vity has led to a	an incre	ease in	
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5.4	Corporate update	
	There have been personnel changes in the Blood Policy Unit of the DoH. The quarterly governance meeting took place in March. A meeting with all health state agencies has been scheduled for later this week with the new Secretary General. PDA and Oversight agreements are being progressed. It was noted that the UK Blood Establishments will be introducing risk based assessment in June. The A,R&CC reviewed the Risk Register at its April meeting.	PDA and Oversight agreements will be placed in DT for Board members to access once finalised with DoH.
5.5	People & Culture	
	The M&SD post will be readvertised on the week beginning 4th May. The CEO was advised that the International Plasma Fractionation Association are holding an annual meeting next week and the medical consultant community will be well represented at it, and it will therefore be an opportune time to advertise this post. CEO and HRD are meeting the Consultants this week to discuss succession planning for the medical staff. Transition to Managed Services provider to be completed by July.	
5.6	Quality & Regulatory Update	
	Tissue audit taking place this month and report expected in May. All HPRA reports for 2020 have been closed out. eProgesa semester patch has been implemented. One outstanding issue to be resolved which is being worked on with the supplier.	
6.0	Medical & Scientific Director's Report	
6.1	M&SD reported on the publication of the R&D Strategy. The Chair and the Board expressed their appreciation of the work that went into devising the strategy. M&SD confirmed that the R&D Committee is to convene its first meeting shortly and that already the possibility of a partnership with TCD and SJH on cellular therapies is being explored. It was confirmed that the R&D strategy is being distributed through multiple social media platforms, targeting various groups specialising in R&D. It was suggested that the IBTS consider hosting an annual symposium on R&D.	
6.3	PR – this is in process under procurement rules.	
6.4	Eye Bank – project plan is progressing and the appointment of a part-time Consultant Ophthalmologist is proceeding.	
6.5	CP – there has been no real demand for this. Ten units are being collected and this will confirm that the process is in order in the event that it does need to be collected in the future. The EU monies that are unused will be returned.	
6.7	Consultant resignation – it was noted that Professor Hann is resigning and will finish working with the IBTS in June. The Board thanked him for his contribution.	
7.0	Cork Centre Update	



Seirbhís Fuilaistriúcháin na hÉireann

The HRD joined the meeting for this item. She outlined the impact of COVID-19 on staff over the last 12 months and while there have been no IBTS transmitted cases, there has been a COVID-19 absence rate of 4.81% and an outbreak in one clinic team where	
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obsence rate of 4.81%and an outbreak in one clinic team where	
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ransmission was not connected to the workplace. The 3 phases of	
he COVID cycle for IBTS were identified as: react and respond,	
stabilise and integrate and emerge and recover. The key lessons	
Bank mandate approvals	
he Board approved the changes on two bank mandates.	
Review of Internal Financial Controls	
The Board approved the Review of Internal Financial Controls. It was	
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lune.	
	earned were identified people first – safe, supported and connected, adership – communication and engagement, listening and language in the internation and data for decision making. She outlined the trategic direction for people and culture with the emphasis on cross-unctional partnerships. The four strategic pillars identified are nriching our culture; shaping our future workforce; improving eople's experiences and putting health and safety first. Key nitiatives under these pillars have already commenced or are due to ommence shortly. The critical success factors identified are buy-in, assources, learning and capability. HRD confirmed that KPIs for the IR strategic implementation journey will be developed. HRD also onfirmed that there will be some resourcing issues to implement it, ut that this will be progressed. The Chairperson thanked the HRD or her detailed and informative presentation. CT Strategy Update Grant Thornton joined the meeting for this item to give an interim rogress update on the work done so far on the ICT strategy. It was oted that the final strategy will be coming to the Board in June. ECO confirmed that the final ICT strategy will come with very clear ecommendations to the Board. CECO confirmed that the final ICT strategy will come with very clear ecommendations to the Board. CECO confirmed that the final ICT strategy will come with very clear ecommendations to the Board. CECO confirmed that the IRTS intends to be procurement controls. It was oted that the IA annual report for 2020 was satisfactory. C&AG (COVID-19 guidance document was circulated by the C&AG last autumn. A,R&CC asked for a report from the IBTS on the guidance ocument. It has been confirmed that no internal controls lapsed uring 2020 and that all risks were managed appropriately. The CEO onfirmed that the IBTS intends to be procurement compliant for PPE y year end. CHINTERIOR OF A,R&CC of 9th February 2021 CHE minutes of A,R&CC of 9th February 2021 CHE minutes of the A,R&CC meeting on 9th February were taken as ead.



13.0	Minutes of the M&SAC of 15/02/2021	
13.1	The Chairperson of the Committee updated the Board on the meeting. Major items discussed were PR, the lack of demand for CP and the tissue bank. The sero-prevalence study had been extended to include February donor data. Donor ID was also discussed and it was noted that the destruction of the virology archive was now almost complete. M&SD confirmed that the IBTS has been accepted as members in the Blood Genomics Consortium and we are awaiting the terms of acceptable before formally joining.	
14.0	AOB	
14.2	The CEO confirmed that the technology update for the Board room was progressing.	
15.0	Date of next meeting	
15.1	The next meeting of the IBTS Board will take place on Monday 14 th June at 12 noon.	

Signed:	Date: