

**UK TRANSPLANT  
SPECIAL HEALTH AUTHORITY**

**MINUTES OF THE TWENTYSEVENTH MEETING  
OF THE SPECIAL HEALTH AUTHORITY  
HELD AT 9:00 ON THURSDAY, 16 OCTOBER 2003  
IN CONFERENCE SUITE 1, UKT, BRISTOL**

<b>PRESENT:</b>	Gwynneth Flower	- Chairman
	Margaret Branthwaite	
	Martin Davis	
	Sue Falvey	
	Penny Hallett	
	Judith Mackay	
	Mike Mogford	(for item 4)
	Gilbert Park	
	Gurch Randhawa	
	Chris Rudge	(Items 1-3, 5.2 and 6.1 only)
	David Shute	
	Sue Sutherland	
 <b>IN ATTENDANCE:</b>	 Maureen Scargill	 - Secretary

The Chairman welcomed and introduced Mr David Mayer, liver transplant surgeon at Birmingham's QE and Children's Hospitals and Chairman of the Liver Advisory Group. Mr Mayer gave a very informative and interesting presentation covering the history of liver transplantation; the allocation criteria for waiting lists and transplants; and the outcome data for the Birmingham Unit.

**APOLOGIES**

Apologies had been received from Dr Neil Goodwin, Mr George Jenkins and Dr Alastair MacGilchrist.

**1 DECLARATION OF INTERESTS IN RELATION TO AGENDA**

- 1.1 Mr Rudge declared that he received funding from pharmaceutical companies from time to time for educational purposes. He confirmed that this did not, in his opinion, cause a conflict of interest with the agenda. No other Member present declared a conflict of interests in relation to the agenda.

**2 MINUTES OF 26TH MEETING OF SHA HELD ON 3 SEPTEMBER 2003 - UKT(M)(03)6**

- 2.1 With the following minor amendments to the minutes they were agreed as a true and correct record.
- 3.2.1 (5) Change second sentence to read "The Medical Director would produce national guidance on the screening ....."
- Add 7.1.3 Members noted that there was a possibility of using numbers of

publications as a performance indicator for statistics and audit.

## 2.2 **Action Points – UKT(AP)(03)6**

- 1 The Medical Director reported that criteria for all solid organ waiting list assessment protocols had been reviewed. Although contraindications were mentioned there was no reference to incompetent adults. The Advisory Groups would be asked to review these criteria.
- 2 A draft positive virology policy document had been produced and comments were currently being awaited from the Department of Health. This document would then be brought to the Board for information.
- 3 Producing a protocol for national guidance on screening for pregnancy in female potential donors was ongoing. Advisory Groups would be asked for comments on any protocol before the document was brought to the Board.
- 4 Details of all other Special Health Authorities had been circulated.
- 5 Revised dates for SHA meetings during 2004 had been circulated and were on the agenda.
- 6 A paper outlining proposals for streamlining the Audit, Analysis & Research Group had been prepared and was on the agenda.

## 3 **FINANCE AND BUSINESS PLANNING**

### 3.1 **FINANCIAL REPORT TO 31 AUGUST 2003 – UKT(03)68**

3.1.1 Members noted the August report which showed an overspend of £34K. An additional £390K of non-recurring funding would ease financial pressure during the current financial year and be used to fund the 3.225% increase on donation initiatives and any senior manager pay award. The Finance Director had updated figures to the end of September which indicated that there had been no change to the cash limit; that cash spending was on target; and there was an underspend of £16K. At this half way stage in the financial year it was intended to look more realistically at efficiency targets within directorates and to adjust budgets if necessary.

3.1.2 The August report showed a debtor figure of £430,475, this related to funds from other UK Health Departments which had since been received.

3.1.3 There had been discussion about the long-term funding of UKT that the Department of Health had verbally undertaken to provide, but as yet funds were not forthcoming. This issue would again be discussed at the quarterly review meeting between UKT and the DoH to be held in October. It was agreed that if the matter had not been resolved by the end of November that the Board would need to determine a course of action.

### 3.2 **ACTIVITY REPORT – AUGUST 2003 – UKT(03)69**

The Chief Executive reported that activity figures at this stage showed a 2% increase in solid organ donation over last year. Cornea donation had also improved by 5%. These figures were on target for achieving objectives set in the business plan.

*Mike Mogford joined the meeting for Item 4.*

## 4 PAPERS FOR INFORMATION

### 4.1 PAY MODERNISATION – AGENDA FOR CHANGE – UKT(03)70

4.1.1 Mr Mike Mogford, Personnel Advisor, highlighted work being carried out to enable implementation of Agenda for Change (AfC) which aimed to simplify and ensure equality in respect of the terms and conditions of employment for the majority of NHS staff and to support the modernisation agenda by enhancing flexibility in respect of roles and structures. He explained that as much of the content was targeted at Trusts, Special Health Authorities (SpHA) had set up a network of SpHAs Human Resource representatives to ensure that their needs would be met.

4.1.2 Actions recommended to prepare UKT for the implementation of Agenda for Change included:

- Comprehensive assessment of estimated impact of AfC including resource and financial implications where possible
- Presentations to raise staff awareness of AfC
- Discussions with unions to agree how partnership principles could operate at UKT
- Continued dialogue with SpHA HR colleagues to collaborate and jointly influence DoH if appropriate.

4.1.3 Training for the job evaluation and matching process had not yet been made available. However, many of the posts at UKT have not been evaluated nationally and will need to be subject to job evaluation at a local level.

4.1.4 Mr Mogford confirmed that when AfC was implemented present staff pay rates would be protected where appropriate but that new staff would be appointed to the new scales.

### 4.2 PAY UPLIFT FOR SENIOR MANAGERS FOR 2003/2004 – UKT(03)71

4.2.1 Members approved the recommendation that pay be uplifted by 3.225% with effect from 1 September 2003 for those staff on senior manager pay scales and the Directors, subject to the guidance in the advance letter: payment to be made with November 2003 salaries.

4.2.2 Members noted UKT's response to the recently issued DoH consultation document outlining proposed new pay and contractual arrangements for NHS chief executives and directors. It was agreed that the board would agree the principles of any new arrangements that would be dealt with in detail by the Remuneration Sub Committee.

*Mr Mogford left the meeting at this point.*

## 5 PAPERS FOR APPROVAL

### 5.1 UK TRANSPLANT HEALTH AUTHORITY DATES FOR 2004 – UKT(03)72

5.1.1 Members agreed the dates as outlined.

## 5.2 **THE AUDIT, ANALYSIS AND RESEARCH GROUP (AARG) – UKT(03)73**

- 5.2.1 The Audit, Analysis and Research Group had been set up in 2001 as part of a wide-ranging review of UKT's advisory group structure. Its role principally, was to provide a better process for linking clinicians and statisticians.
- 5.2.2 With the appointment of the Director of Statistics and Audit it was deemed that the role of AARG should be reviewed. It had been proposed that a more effective way forward would be for each organ specific advisory group to form their own audit sub-committee. These groups would include appropriate clinicians, any necessary external links and nominated UKT statisticians: they would meet at least twice yearly before their advisory group meetings. The main AARG would meet on an ad hoc basis when necessary and be chaired by UKT's Director of Statistics and Audit. It was felt that this would enable UKT to focus on issues of priority.
- 5.2.3 Members agreed that this would enable statisticians within UKT and the advisory groups to remain focussed on issues of priority.

## 6 **EXECUTIVE DIRECTORS' REPORTS**

### 6.1 **MEDICAL DIRECTOR – UKT(03)74**

- 6.1.1 The Medical Director reported that he had attended the Cardiothoracic Advisory Group meeting in September. Most items had been routine, however, detailed discussion took place about potential effects of the European Working Time Directive. There were real anxieties that this would have a severe impact on the NHS, particularly on small specialties with consistent out-of-hours commitments. A formal letter had been sent to the DoH and the National Specialist Commissioning Advisory Group alerting them to these concerns. The Chief Executive reported that she had heard from the DoH confirming that they would adhere to the terms of the Working Time Directive. This issue would be raised at the DoH review meeting in October.
- 6.1.2 Both the Medical Director and the Director of Donor Care and Co-ordination had attended the European Society for Organ Transplantation meeting in September. UKT had presented three papers. It had been reassuring to note that the UK and UKT were doing everything possible to improve transplant and outcome rates.
- 6.1.3 The Medical Director reported that he had attended the annual conference of HM Coroners in September. He had presented an overview of current activity, measures being taken to increase donor numbers and some of the issues surrounding non-heartbeating donation. Some anxiety was expressed by coroners at the apparent haste with which new legislation was being prepared.
- 6.1.4 The Medical Director had been invited to be a member of a review group established by the National Services Division of the Scottish Executive and chaired by Professor John Wallwork, to review current provision of cardiothoracic transplantation services in Scotland and to make recommendations about the future pattern of services required to meet the needs of Scottish residents. It was anticipated that the group would make its report by May 2004. The Chairman felt it important to make Dr Alastair MacGilchrist aware of developments as he was

UKT's Scottish representative.

## 6.2 **CHIEF EXECUTIVE – UKT(03)75**

6.2.1 The Chief Executive reported that a non-heartbeating conference held in Scotland had attracted a large audience. Presentations had been made by teams experienced in running non-heartbeating programmes. Further work would need to be undertaken before a Scottish non-heartbeating programme could be put into place.

6.2.2 The Chief Executive and Medical Director had attended the Scottish Transplant Group meeting on 1 October. A public relations campaign on organ donation in Scotland was being organised and there had been some concern that UKT had not been contacted during the planning. The Chief Executive explained that although campaigns were matters of devolved responsibility for each health administration, it was disappointing that UKT had not been involved. Assurances were made by the Scottish Transplant Group that UKT would be contacted before further work was undertaken to ensure consistency and avoid possible duplication. A letter outlining concerns had been sent to Mr Will Scott, Policy Lead at the Scottish Executive.

6.2.3 A DoH workshop on the Human Tissue Act had been held in September. The workshop outlined progress of the new Act which would take the place of the current legislation and confirmed that a Human Tissue Authority would be established to deal with licences and other issues. The proposed legislation appeared to cover all issues commented on by UKT during the formal consultation on 'Human Bodies – Human Choices'.

6.2.4 The Chief Executive and Medical Director had attended the European Forum – Alliance for Organ Donation, in Frankfurt. A joint declaration that the six countries in attendance would work more closely together had been issued but not endorsed by the UK who nevertheless committed to consider the proposal further.

## 6.3 **DIRECTOR OF STATISTICS AND AUDIT – UKT(03)76**

6.3.1 Members noted the range of topics which the statistics and audit directorate covered. These included advisory group papers, allocation schemes, and external enquiries and requests. Some discussion took place about what safeguards were in place to prevent UKT-produced data from being misused and whether all data should be available. Assurances were made that patient confidentiality was kept at all times and that the Data Protection Act adhered to. It was confirmed that when the new Freedom of Information Act was implemented the Authority would be obliged to make available all data that was not covered by exemptions.

## 6.4 **DIRECTOR OF COMMUNICATION/PR REPORT – UKT(03)77**

6.4.1 A meeting between UKT and nineteen organisations with an interest in publicising organ donation and transplantation had taken place in September. Although, unfortunately, there were no representatives from Wales, Scotland or Northern Ireland Health Departments, the meeting proved useful and a number of themes emerged for future discussion.

## 6.5 **DIRECTOR OF DONOR CARE AND CO-ORDINATION – UKT(03)78**

- 6.5.1 The Director of Donor Care and Co-ordination reported on a conference held in Birmingham to discuss religious perspectives and organ donation. Almost 200 hospital chaplains and bereavement workers attended. Presentations were made on the whole organ donation process followed by presentations by the six main religions within the UK. Delegates had found the day interesting and informative and work needed to be done to build on the links forged within these communities.
- 6.5.2 The first meeting of the revised Transplant Co-ordinators' Advisory Group had been held in September. The group had agreed on methods of improving the reporting of donor blood groups and that the donor transplant co-ordinators would be responsible for ensuring that all specimens were labelled correctly at retrieval.

## **7 ANY OTHER BUSINESS**

### **7.1 CIPFA Booklet**

An excellent publication had been received from CIPFA which could be circulated to non-executive directors. It was agreed that Dr Gilbert Park would receive the booklet first.

- 7.2 Members were informed that the case against a driver being prosecuted for speeding whilst delivering an organ for transplant had been discontinued.

## **8 DATE OF NEXT MEETING**

- 8.1 The next meeting of the SHA would be on Tuesday, 25 November, 2003 at UKT, Bristol.