

**UK TRANSPLANT
SPECIAL HEALTH AUTHORITY**

**MINUTES OF THE THIRTY-THIRD MEETING
OF THE SPECIAL HEALTH AUTHORITY
HELD AT 12.30 PM ON MONDAY, 5 JULY 2004
IN CONFERENCE SUITE 2, UKT, BRISTOL**

PRESENT:	Gwynneth Flower	- Chairman
	Margaret Branthwaite	- Non-Executive Director
	Martin Davis	- Director of Finance
	Sue Falvey	- Director of Donor Care & Co-ordination
	Neil Goodwin	- Non-Executive Director
	Penny Hallett	- Director of Communication & PR
	George Jenkins	- Non-Executive Director
	Judith Mackay	- Non-Executive Director
	Gilbert Park	- Non-Executive Director
	Chris Rudge	- Medical Director
	David Shute	- Director of IT and Support Services
	Sue Sutherland	- Chief Executive
	IN ATTENDANCE:	Kathy Cardwell

APOLOGIES

Apologies were received from Dave Collett, Alistair McGilchrist and Gurch Randhawa.

1 DECLARATIONS OF INTEREST IN RELATION TO THE AGENDA

- 1.1 No Member present declared a conflict of interest in relation to the agenda.

2 REPORT BACK FROM AUDIT COMMITTEE HELD EARLIER

- 2.1 George Jenkins summarised the discussions from the Health Authority Audit Committee and reported that under SAS610 (Communication with those charged with governance) there are no matters that require attention. No specific accounting policies were identified as requiring to be changed and a small overpayment of £2k was noted, which will be redressed. The auditors had made comments on weaknesses in the system although no specific examples could be identified. They therefore agreed to report back on these statements in more detail. The issue of auditors' fees was again raised and the Committee was advised that fees are calculated on an hourly rate although NAO could not reveal the detail of these calculations. Overall it was a good audit report and there were no issues the Committee wished to bring to the Board.

**3 MINUTES OF THE AUDIT COMMITTEE MEETING HELD ON
1 MARCH 2004 – UKTAUDIT(M)(04)1**

- 3.1 The minutes of the Audit Committee Meeting held on 1 March 2004 were accepted. The Chairman referred to minute 5.1 and asked how UKT could manage the relationship with NHS Trusts where funded schemes have been placed

in order to reduce risk to the performance of UKT. The Chief Executive explained that robust performance management measures are in place to manage this risk.

4 MINUTES OF THE 32ND MEETING OF THE SHA HELD ON 1 JUNE 2004 - UKT(M)(04)4

4.1 The Minutes of the meeting were agreed and signed as a true and correct record.

4.2 Action Points – UKT(AP)(04)5

- 1 The Medical Director reported on discussion at the recent Ocular Tissue Advisory Group (OTAG) on uniform criteria for patients requiring an ocular transplant. The problem with producing uniform criteria is based around the fact that visual acuity may not apply uniformly to each patient. There are clinical criteria from the Royal College of Ophthalmologists but it would be difficult to set uniform criteria for ocular tissue in the same way as for solid organs. However, members of OTAG had agreed to review the available data with the Statistics and Audit Directorate at UKT in order to identify common patterns. Margaret Branthwaite stressed the importance of addressing this lack of consistency with the solid organ groups.
- 2 The Medical Director confirmed that a date had now been scheduled in August to meet with ICNARC re liaison on the potential donor audit using data from June 2004 to June 2005. An update would be available at the next meeting.
- 3 The Director of Communications reported that a response from a NHS hospital Trust was still awaited re a pilot to enclose organ donation information with hospital appointment information. It was hoped that a response would be received in due course.
- 4 In reponse to concerns regarding comments from Moorfields Eye Hospital on the lack of corneas for transplantation, the Medical Director had contacted Moorfields and this matter had been resolved.
- 5 A report on the use of livers from non-heartbeating donors for Group 2 patients had been presented to the Audit Committee earlier today.
- 6 The controls assurance report, including detail on the reasons for the shortfalls indicated in each category, had been presented to the Audit Committee earlier today.

4.3 Matters arising, not previously identified

4.3.1 There were no further matters arising from the minutes of the previous meeting.

5 FINANCE AND BUSINESS PLANNING

5.1 Financial Report to 31 May 2004 – UKT(04)53

5.1.1 A summary of the financial report to 31 May 2004 was reported by the Director of Finance, with a total of £2.15 million drawn down to date and a month end bank balance of £181k. An underspend of £44k against routine activities was noted, which represents 0.4% of routine budgets. The overall underspend, taking into account reserves, non-recurring expenditure and capital, is £129k, which represents 0.9% of the total budget. Four additional non-heartbeating schemes were allocated funding recently, thus ensuring that the budget for Donor Initiatives is spent fully by year end.

5.2 **Adoption and approval of annual accounts – UKT(04)54**

- 5.2.1 The annual accounts of the Health Authority were reported and considered for approval. The accounts had been presented to the National Audit Office prior to the deadline of 14 May and the agreed amendments incorporated.

Margaret Branthwaite queried the inclusion of details on the Arms Length Bodies review as this had previously been of a confidential nature. The Finance Director explained that the auditors are obliged to draw attention to matters that may affect the future of the organisation and the Chief Executive added that as this proposal is now in the public domain there is no issue regarding its inclusion in the document. The Authority programme expenditure was also discussed and the Finance Director explained that the higher expenditure figure on eye banks during 2002/03 was due to one-off capital expenditure relating to accreditation. The increase in agency staff expenditure in 2003/04 over the previous year was due to problems experienced in recruitment as well as the practice of taking on staff on a temporary basis with a view to a permanent position.

The Chief Executive also clarified the inclusion of provision for a claim for injury benefit from a former employee. Members expressed concern that the Authority has no right of appeal against this judgement and the Chief Executive agreed to pursue the principal of the claim process with the Human Resources Advisor and report back to Members.

Following consideration of the annual accounts by the Audit Committee earlier today, Board Members agreed to formally adopt the accounts.

5.3 **Activity Report – May 2004 – UKT(04)55**

- 5.3.1 The Board noted the number of transplants undertaken in the financial year to end of May 2004 compared to those in the previous year; and the performance against the Business Plan. Activity rates are showing significant improvement on last year, especially in relation to transplants from the organs of deceased donors. An increase in the number of heart/lung transplants was highlighted with a decrease in the number of lung only transplants.

6 **PAPERS FOR APPROVAL**

6.1 **Final annual report 2003/04 – UKT(04)56**

- 6.1.1 The Director of Communications reported on the text of the annual report for 2003/04. The link between the living transplant storyline and the role of UK Transplant had now been strengthened and Members agreed that this had improved the overall effect of the report. The latest transplant figures had been included within the report and showed that the total number of transplants carried out last year were the highest recorded to date. Subject to a few minor amendments highlighted the Board endorsed the report and praised the Communications Directorate on production of an excellent annual report.

7 **PAPERS FOR INFORMATION**

7.1 **Arms length body review: proposal and position statement – UKT(04)57**

- 7.1.1 The Chief Executive introduced a paper on the recent proposal relating to the arms length body review in which a new national donor authority would be

established. In response to a request from the Minister at a meeting with the Chairman, a position statement had been prepared highlighting the advantages and disadvantages of the potential merger with the National Blood Authority. This report is now in the public domain. At most 10% of the activity of the new authority would overlap both authorities and offer opportunities for synergy.

The importance of outlining the programme of work, at a high level, in anticipation of implementation of this proposal was raised. The Chief Executive confirmed that she had already met with the Chief Executive of the NBA to consider the issues that would need detailed work.

It was understood that other Health Administrations in Wales, Northern Ireland and Scotland had expressed concern over the different geographical cover of both Authorities.

8 EXECUTIVE DIRECTORS' REPORTS

8.1 Medical Director's Report – UKT(04)58

8.1.1 A meeting of the British Transplantation Society in June discussed the crisis in recruitment to renal transplant surgery and identified a number of factors that may contribute to this. Following discussion the BTS Executive would be putting together an action plan in an attempt to address this problem.

8.1.2 Following the position statement agreed by the Board on living liver donation, the Medical Director reported that he had heard informally that the National Specialist Commissioning Advisory Group feel that the identified risks to the potential living donor outweigh the likely benefits of living donor liver transplantation. Therefore, at this time they are not prepared to commission this service for NHS patients.

8.1.3 The Medical Director reported on the recent meeting of the Patients' Forum which had focussed on the development of processes by which the Forum may wish to become more proactive in developing positions and perspectives on a number of key issues. The reduced involvement of George Jenkins in future meetings had also been discussed and there were concerns regarding arrangements for chairing the meetings and co-ordinating the agenda. The Medical Director advised that he would be liaising with George Jenkins in order to address these concerns. Members also noted that a possible ethnic minority nomination for the Forum had been received.

8.1.4 In light of the proposal to combine the work of UK Transplant and the National Blood Authority, the Medical Director reported on comments received on the process from members of the British Transplantation Society.

8.2 Director of Communication's report – UKT(04)59

8.2.1 The Director of Communications gave an update on the joint campaign with the Council of Ethnic Minority Voluntary Organisations (CEMVO). The Save a Life campaign will be launched on 20 July to highlight the need to substantially increase the donor base from ethnic minority communities. This will be followed by a Leadership Dinner on 22 July to encourage debate and mutual learning, and at which the Chief Executives of both CEMVO and UKT will be speaking. Further events will be hosted locally by CEMVO regional offices.

8.2.2 To mark the 10th anniversary of the NHS Organ Donor Register, UK Transplant is planning a year of anniversary events and initiatives from 6 October 2004 to 5 October 2005. Activities will seek to attract positive media coverage; encourage the public to talk about organ donation with their friends and families; encourage people to join the NHS Organ Donor Register; and encourage donorcard holders to register. Margaret Branthwaite suggested that the 'convert a card' theme should be particularly high profile as many cardholders were unaware of the need to register. It was confirmed that agencies have been asked to pitch ideas for the 'convert a card' theme and UKT will be looking to attract national media coverage for many of the anniversary events during the year.

8.3 Director of Donor Care & Co-ordination's Report – UKT(04)60

8.3.1 The strategy for the delivery of Business Plan objectives for the Donor Care & Co-ordination Directorate was outlined. Members noted the agreed action plan for 2004/05, the key objective of which is to reduce the relative refusal rates nationally. During discussion on the action plan Judith Mackay commented that the plan should also include an element of integrating the work of related organisations into the plan. This would include obtaining feedback from Trusts and securing their buy-in to this work. The Director of Donor Care & Co-ordination and Judith Mackay agreed to liaise to discuss the document outside the meeting.

8.3.2 The Director of Donor Care & Co-ordination reported on the 2nd International meeting on Transplantation from Non-Heartbeating Donors, which was partially sponsored by UK Transplant. Presentations took place on the significant developments, both clinically and in the area of research, in this type of transplantation.

9 ANY OTHER BUSINESS

9.1 No matters of any other business were raised.

10 DATE OF NEXT MEETING

10.1 The next meeting of the SHA will be held at 11 am on Wednesday 1 September 2004 in Conference Suite 2, UKT, Bristol.