

**UK TRANSPLANT
SPECIAL HEALTH AUTHORITY**

**MINUTES OF THE THIRTY-NINTH MEETING
OF THE SPECIAL HEALTH AUTHORITY
HELD AT 11.00 AM ON TUESDAY, 12 APRIL 2005
IN CONFERENCE SUITE 2, UKT, BRISTOL**

PRESENT:	Gwynneth Flower	- Chairman
	Dave Collett	- Director of Statistics & Audit
	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
	Alistair MacGilchrist	- Non-Executive Director
	Judith Mackay	- Non-Executive Director
	Gilbert Park	- Non-Executive Director
	Gurch Randhawa	- Non-Executive Director
	Chris Rudge	- Medical Director
	David Shute	- Director of IT and Support Services
	Sue Sutherland	- Chief Executive
 IN ATTENDANCE:	 Kathy Cardwell	 - Secretary

APOLOGIES

Apologies were received from Margaret Branthwaite.

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 MINUTES OF THE 38TH MEETING OF THE SHA HELD ON
24 FEBRUARY 2005 - UKT(M)(05)2**

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

2.2 Action points – UKT(AP)(05)3

1 This item is noted at minute 5.5 below.

2.3 Matters arising, not previously identified

2.3.1 **Item 7.2.3** - The Medical Director reported on the meeting of Renal Unit Directors on 7 March 2005 to consider a proposal to develop a new national kidney allocation scheme. As a result of comments received at that meeting further work is being carried out on the proposal for consideration at the next meeting of the Kidney & Pancreas Advisory Group in May. The Chief Executive emphasised the importance of ensuring widespread consultation as the impact of any changes might result in some Trusts carrying out less transplants with the resultant increase in dialysis.

3 FINANCE AND BUSINESS PLANNING

3.1 Financial report to 28 February 2005– UKT(05)18

3.1.1 The Director of Finance reported an increase of £60k to the overall final agreed cash limit for 2004/05 following notification by the Department of Health. The additional monies are for Agenda for Change, distinction awards and other miscellaneous adjustments. An additional resource limit (only) of £454k has also been provided to meet the year-end provision for Permanent Injury Benefit (see minute 5.5 below). As at 28 February 2005 there is a reported underspend against routine budgets of £219k although a full level of spend is still predicted by the year-end. The provisional year-end position is showing only £666 remaining of the overall cash limit for 2004/05.

3.2 Transplant activity report – March 2005 (provisional)– UKT(05)19

3.2.1 The Chief Executive reported on the preliminary data relating to transplant activity until the end of March 2005. Activity in the first quarter of 2005 was lower than anticipated and has therefore significantly affected the gains reported at the end of December 2004. Although there were 4% fewer kidney transplants than last year these were caused by a decrease in transplants from deceased heartbeating donors. The number of live kidney transplants increased by 2% and transplants from non-heartbeating donors increased by 14%. With both liver and cardiothoracic transplants there was a slight decrease on last year's performance, whilst cornea transplants increased by nearly 1% and pancreas transplants increased by 34%.

A wide-ranging discussion took place around the reasons for these results and how these could be influenced going forward. The Medical Director agreed to give a report at the next Board meeting on the progress of the Organ Retrieval Working Group which was due to meet again on 4 May 2005.

4 PAPERS FOR APPROVAL

4.1 Financial framework & budgets 2005/06 – UKT(05)20

4.1.1 The Director of Finance reported that the Department of Health (DH) had recently confirmed full funding of the business plan for the current year. The revenue budget includes a small reserve for the impact of Agenda for Change and provision for pay and price inflation in 2005/06. A reduction of £400k against DH targeted savings requirements for the financial year had also been taken into account. Members noted that the cash and resource limits issued by the DH were for the full financial year, providing for separate and individual allocations for both UKT and the NBS. As a result it will be necessary to agree appropriate profiling and monitoring of cash and resource limits to reflect the establishment of NHS BT on 1 October 2005. Each organisation will be expected to fund its own transitional costs from the generation of additional savings and these will need to be agreed with DH with funding agreed on a case-by-case basis.

The financial framework and associated revenue and capital budgets for 2005/06 were approved by the Board and it was noted that a full risk assessment is being carried out of all risks associated with the reorganisation, together with the identification of appropriate action.

4.2 **Business plan & financial framework 2005/06 – UKT(05)21**

- 4.2.1 Members noted the final business plan for 2005/06 and the recommendation that the additional sum allocated for the fifth year of developments outlined in UK Transplant's Corporate Plan 2001-2006 be made available on a non-recurring basis to meet transition costs associated with the establishment of NHS BT this year.

Members discussed the continuity of direction in order to work towards the overall objective of increasing the number of transplants available and approved the business plan until 30 September 2005 with a recommendation that it continues to form the basis of the transplant component of NHS BT's work until March 2006. The Chief Executive advised that she would be agreeing with each Director what percentage of each of the planned objectives would need to be completed by the end of September 2005.

5 **PAPERS FOR INFORMATION**

5.1 **Annual risk report – UKT(05)22**

- 5.1.1 The Director of IT & SS advised on the annual risk report including a summary of the changes to the risk register during 2004/05. The Board approved the revised risk management policy in April 2004 and a new risk register was introduced during the year, categorising risks into high, medium and low priority. Members noted a total of 20 risks on the register as at March 2005, of which two are categorised as high. The overall increase from 16 risks at the beginning of 2004 to 20 risks is as a result of the ALB review and the implementation of Agenda for Change (AfC). The work required to implement AfC to meet the end of September deadline is significant and all staff below Director level will be involved.

5.2 **Information Governance report – UKT(05)23**

- 5.2.1 The Authority was previously required to produce a formal annual report around Caldicott Guardianship issues. The Director of IT & SS advised that this had now been subsumed into an Information Governance report, which relies upon the use of a self-scored toolkit. There was no specific toolkit for special health authorities and UKT had been instructed to complete the version designed for strategic health authorities, which was not entirely appropriate as some questions related to a strategic health authority's responsibilities for local NHS organisations. Members noted that the overall score for UKT was 80% based on 66 questions, giving the authority a green rating.

5.3 **Abolition of UK Transplant/establishment of NHS BT – UKT(05)24**

- 5.3.1 The Chief Executive reported that a formal project plan for the abolition of UKT and NBS and the establishment of NHS BT was underway. The overall project manager for this plan was recently confirmed as Patrick Mulcahy, Head of Performance Management at UKT and the most recent version of the project plan was noted.

It was also noted that no appointment had been made to the role of Chairman of NHS BT following recent interviews and that head-hunters had been brought in to make a recommendation. The recruitment of the Chief Executive is to be ring-fenced for existing Chief Executives and interviews are likely to take place in early May.

5.4 **Clinical audit plan**

5.4.1 **Report on outcome of the clinical audit plan 2004/05 – UKT(05)25**

5.4.1.1 Members noted the outcome of each of the action plans for 2004/05, the majority of which had been completed in the required timescale and the results disseminated to the transplant community. The Director of Statistics and Audit highlighted various reports and discussion took place on the potential donor audit and the relationship between the organ donor register and the relative refusal rate. The report on analyses based on the ODR was completed six months' late due to delays in obtaining the ACORN database, which is needed to align postcode information with indicators of socio-economic status.

5.4.2 **Clinical audit plan 2005/06 – UKT(05)26**

5.4.2.1 The Director of Statistics and Audit summarised the plan for 2005/06 for members' information.

5.5 **Award of permanent injury benefit (PIB) to a former employee – UKT(05)27**

5.5.1 The Chief Executive reminded the Board of previous discussions regarding this award and reported on the two issues highlighted, which were whether the regulations were correctly applied, and whether the regulations were flawed and capable of challenge. In response to Counsel's advice the Authority's lawyers wrote to the NHS Pensions Agency on 23 March highlighting the areas in which it is believed the regulations have been incorrectly applied. An acknowledgement has been received but a response is still awaited. This matter has also been formally raised with the National Audit Office, which has carried out an audit of the process, the results of which will not be shared with UKT. On the second point the Counsel's view is that the regulations are drawn up in response to policy decisions and the most appropriate course of action would be to direct the challenge to the Department of Health (DH) rather than through judicial review. The DH has been informed of the issue and the potential financial consequences.

5.6 **Health & Safety report – UKT(05)28**

5.6.1 The Director of IT & SS outlined the health and safety report for the period April 2004 to March 2005. Members noted that four safety incidents were reported during the period, three of these being minor incidents. One serious incident occurred when a member of staff fell outside the main entrance to the building, sustaining a hairline fracture to their ankle. None of these cases were caused by unidentified or inadequately controlled hazards.

6 **EXECUTIVE DIRECTORS' REPORTS**

6.1 **Director of Communications' report**

6.1.1 The Board noted details of the BBC organ donation season during week commencing 22 August 2005. The season will include a series of five, 30-minute documentaries that will run across the week, culminating in a joint episode of Holby City/Casualty, with transplantation storylines running throughout. Members discussed the risks and rewards involved with this type of venture and the arrangements for dealing with the expected high volume of calls.

The Director of Communications reported on the launch of the radio advertising campaign in February. Included in this campaign were 17 live radio interviews as well as on-line advertising, five new TV fillers and coverage in the national and local press. The Organ Donor Line received an average of 387 calls per day

between 28 February and 27 March, compared with the normal daily average of 80 - 100 calls, whilst visitors to the website increased by 103% during March 2005. As yet it is too early to assess what percentage of these ODL calls and web registrations resulted in new registrants or whether the campaign influenced relative refusal rates.

Public opinion research carried out before and after the campaign, showed that awareness of the improvement that a donated organ can have on someone's life and the recognition that there were not enough organ donors increased after the advertising. This also highlighted people's requirement to be asked to donate, thereby allowing them the opportunity to respond, such as in the DVLA campaign.

7 ANY OTHER BUSINESS

- 7.1 The Chief Executive advised that the reappointment of the non-executive directors' until the end of September is to be referred to the Appointments Commission this month.

8 DATE OF NEXT MEETING

- 8.1 The next meeting of the SHA will be held at 11.00 am on Wednesday 25 May 2005 in Conference Suite 2, UKT, Bristol.