Inspection report on compliance with HTA licensing standards Inspection date: **17 January (remote) and 23 January (site visit) 2024**



University of Liverpool HTA licensing number 12022

Licensed under the Human Tissue Act 2004

Removal from the body of a deceased person (otherwise than in the course Storage of a body of a of an anatomical examination or post **Carrying out** deceased person or Storage of an of an mortem examination) of relevant relevant material which anatomical Area anatomical material of which the body consists or has come from a specimen which it contains, for use for a human body for use for examination scheduled purpose other than a scheduled purpose transplantation University of Licensed Licensed Licensed Licensed Liverpool

Summary of inspection findings

The HTA found the Designated Individual (DI) and the Licence Holder (LH) to be suitable in accordance with the requirements of the legislation.

The HTA found that University of Liverpool ('the establishment') had met all of the HTA's standards.

Licensed activities

Compliance with HTA standards

Advice

The HTA advises the DI to consider the following to further improve practices:

Number	Standard	Advice
1.	GQ2(b)	Findings from the internal audit and corresponding Corrective and Preventative Actions (CAPAs) are reviewed during the quarterly HTA governance meetings and overseen through meeting proceedings. Other audits have separately documented action plans. To ensure consistency, the DI is advised to document action plans for all audits.
2.	PFE2(d)	The establishment is currently in the process of renewing the contingency plan for the next business year and has new informal agreement in place. The DI is advised to formalise the contingency plan prior to start of new business year.

Background

University of Liverpool is a facility that provides teaching of human anatomy to undergraduate and postgraduate students, and provides surgical training. University of Liverpool has been licensed by the HTA since 2007. This was the third inspection of the establishment; the most recent being a site visit in December 2018. Since the previous inspection, the DI has been changed and there have been no other significant changes to the licence arrangements or the activities carried out under the licence.

Description of inspection activities undertaken

The HTA's regulatory requirements are set out in Appendix 1. The Regulation Manager covered the following areas during the inspection:

Standards assessed against during inspection

All 47 HTA licensing standards were covered during the assessment (standards published 3 April 2017).

Review of governance documentation

Policies and procedural documents relating to all licensed activities, including standard operating procedures and traceability systems, were assessed. Documents detailing staff training, adverse events, incidents, governance meetings, risk assessments and audits were also reviewed.

Visual inspection

The inspection included a visual inspection of the anatomy suite including the areas where staff receive and store embalmed bodies, prosections and relevant material, and the areas where relevant material and anatomical specimens are used for training, anatomical examination and dissection.

Audit of records

An audit was undertaken of records and labelling for five embalmed bodies in the storage area and five prosections. There was full traceability for all material.

Meetings with establishment staff

The inspection included discussions with the DI, PDs and technicians carrying out processes under the licence.

Report sent to DI for factual accuracy: 08 February 2024

Report returned from DI: 13 February 2024

Final report issued: 13 February 2024

Appendix 1: The HTA's regulatory requirements

Prior to the grant of a licence, the HTA must assure itself that the DI is a suitable person to supervise the activity authorised by the licence and that the premises are suitable for the activity.

The statutory duties of the DI are set down in Section 18 of the Human Tissue Act 2004. They are to secure that:

- the other persons to whom the licence applies are suitable persons to participate in the carrying-on of the licensed activity;
- suitable practices are used in the course of carrying on that activity; and
- the conditions of the licence are complied with.

Its programme of inspections to assess compliance with HTA licensing standards is one of the assurance mechanisms used by the HTA.

The HTA developed its licensing standards with input from its stakeholders. They are designed to ensure the safe and ethical use of human tissue and the dignified and respectful treatment of the deceased. They are grouped under four headings:

- consent
- governance and quality systems
- traceability
- premises facilities and equipment.

This is an exception-based report: only those standards that have been assessed as not met are included. Where the HTA determines that there has been a shortfall against a standard, the level of the shortfall is classified as 'Critical', 'Major' or 'Minor' (see Appendix 2: Classification of the level of shortfall). Where HTA standards are fully met, but the HTA has identified an area of practice that could be further improved, advice is provided.

HTA inspection reports are published on the HTA's website.

Appendix 2: Classification of the level of shortfall

Where the HTA determines that a licensing standard is not met, the improvements required will be stated and the level of the shortfall will be classified as 'Critical', 'Major' or 'Minor'. Where the HTA is not presented with evidence that an establishment meets the requirements of an expected standard, it works on the premise that a lack of evidence indicates a shortfall.

The action an establishment will be required to make following the identification of a shortfall is based on the HTA's assessment of risk of harm and/or a breach of the Human Tissue Act 2004 (HT Act) or associated Directions.

1. Critical shortfall:

A shortfall which poses a significant risk to human safety and/or dignity or is a breach of the HT Act or associated Directions

or

A combination of several major shortfalls, none of which is critical on its own, but which together could constitute a critical shortfall and should be explained and reported as such.

A critical shortfall may result in one or more of the following:

- A notice of proposal being issued to revoke the licence
- Some or all of the licensable activity at the establishment ceasing with immediate effect until a corrective action plan is developed, agreed by the HTA and implemented.
- A notice of suspension of licensable activities
- Additional conditions being proposed
- Directions being issued requiring specific action to be taken straightaway

2. Major shortfall:

A non-critical shortfall that:

- poses a risk to human safety and/or dignity, or
- indicates a failure to carry out satisfactory procedures, or
- indicates a breach of the relevant Codes of Practice, the HT Act and other relevant professional and statutory guidelines, or

• has the potential to become a critical shortfall unless addressed

or

A combination of several minor shortfalls, none of which is major on its own, but which, together, could constitute a major shortfall and should be explained and reported as such.

In response to a major shortfall, an establishment is expected to implement corrective and preventative actions within 1-2 months of the issue of the final inspection report. Major shortfalls pose a higher level of risk and therefore a shorter deadline is given, compared to minor shortfalls, to ensure the level of risk is reduced in an appropriate timeframe.

3. Minor shortfall:

A shortfall which cannot be classified as either critical or major, but which indicates a departure from expected standards.

This category of shortfall requires the development of a corrective action plan, the results of which will usually be assessed by the HTA either by desk-based review or at the time of the next inspection.

In response to a minor shortfall, an establishment is expected to implement corrective and preventative actions within 3-4 months of the issue of the final inspection report.

Follow up actions

A template corrective and preventative action plan will be sent as a separate Word document with the final inspection report. Establishments must complete this template and return it to the HTA within 14 days of the issue of the final report.

Based on the level of the shortfall, the HTA will consider the most suitable type of follow-up of the completion of the corrective and preventative action plan. This may include a combination of

- a follow-up inspection
- a request for information that shows completion of actions
- monitoring of the action plan completion
- follow up at next routine inspection.

After an assessment of the proposed action plan establishments will be notified of the follow-up approach the HTA will take.