

Human Tissue Authority

Board Meeting Conducted in Public

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Chief Executive's Report

Purpose of paper

1. To inform the HTA Board of key or current issues from the CEO's perspective.

Action required

2. The HTA Board is asked to note and comment on the issues raised.

Update on Quarter 4

3. During Quarter 4, we continued to progress our regulatory and related activities against the Key Performance Indicators, sought to progress the 22/23 business plan, and responded to matters arising.

One of the most noteworthy changes from previous years was the increase in the target number of inspections in the 22/23 business plan. Whilst recognising this was a stretch target, the number for completion per year increased from 140 in 21/22 to 210 in 22/23. I am pleased to report we achieved the target by year end, 31st March. In addition to completing an increased number of inspections, we also undertook a further 43 inspections linked to license applications assessments (LAAs). This category was previously counted within the overall inspection figure. My thanks to all staff involved, not least, those across the Regulation Directorate for achieving this notable stretch target and showing what is possible. It is a significant achievement.

4. The purpose of the target was: -
 - To stimulate rapid innovation in-year to make inspections more risk-targeted and proportionate, without the need for a change programme to achieve this aim;
 - To drive increased management focus on differentiation in the targeting of inspections; and
 - To give greater sector coverage (whilst being more proportionate and targeted) to provide greater overall assurance.

5. In response, in-year and without a dedicated project team, colleagues developed several innovative approaches which helped to achieve the revised target, with minimal additional expenditure. These innovations included: -
 - Identifying more inspections suitable for a solo inspector.
 - Trialling the use of video tours for certain parts of the visual inspection of human application premises.
 - Changing the approach to what we look at onsite.
 - Increasing the number of geographically linked inspections to reduce time spent travelling.
 - Where possible, removing the need for large, multidisciplinary roundtable discussions – which reduces the footprint of an onsite audit by several hours for hospitals that undertake living and deceased donor transplants.
 - In the HA sector, the two inspection report templates being used for HA-only and HA/Act combined inspections have been consolidated and made easier to complete - reducing the amount of time spent on the quality assurance step of the report sign-off process.

6. The recently commenced Review of Inspections project seeks to further develop innovative approaches whilst reviewing our own homegrown developments. This work is consistent with the DHSC Reform and Efficiency initiative which we are supporting. In addition, to reforming how we undertake our regulation responsibilities we have also focused on reducing costs and developing greater resilience in our support services. In March, the CQC Board agreed in principle to a shared services arrangement with HTA. We have subsequently been refining a cutover plan for shared services in Human Resources which commences roll-out from 1st July 2023.

7. During Quarter 4, the HTA continued to give full support to the Independent Inquiry led by Sir Jonathan Michael into the issues raised by the David Fuller case. We are responding as promptly as we can to regular requests for information and will provide any further advice, as requested, to the DHSC SoS on related matters.
8. I have previously drawn attention to the levels of staff turnover in 2022/2023, not least in Quarter 2. I am pleased to highlight that in Quarter 4 it was down to 8.6%, down from a high of 20% in the summer of last year.
9. In Quarter 4, my external engagements included the first meetings of our new stakeholders' forums. These covered four of our six sectors, namely, Post-Mortem, Human Application, Research, and Organ Donation and Transplantation (ODT). I also attended the BTS / NHSBT Congress in Edinburgh during March. This was an important opportunity to meet with many of the key players in the ODT sector.

Current Issues

10. On 1 June, the introduction of deemed consent for deceased organ and tissue donation for transplantation in Northern Ireland (NI) came into effect. To mark the occasion, the NI Department of Health hosted an event in the Long Gallery, Parliament Buildings, Stormont for organ donation champions. I attended on behalf of the HTA. The HTA has supported this work by revising Code of Practice F (Part 2 for deceased organ and tissue donation). Those excluded from deemed consent legislation are children under 18, people who lack the mental capacity to understand the change in law and visitors to NI and temporary residents. This brings NI in line with the other UK countries, whilst noting the different legislative framework for Scotland.
11. In parallel to the notable revision of Code F for deemed consent in NI, the HTA has also been updating its other Codes of Practice for several very minor changes (which reflect updates to corresponding guidance or legislation) as opposed to any substantive changes. We have been working with DHSC on this and it is anticipated that these can be published over the summer.
12. I attended the Welsh Transplant Advisory Group (WTAG) on 14 June. This brings together the key health sector stakeholders in ODT in Wales and serving Wales.
13. At recent Board meetings, I have mentioned the new Portfolio Management approach which monitors progress against our approved business plan. The same team are also responsible for development of the new business plan with input from colleagues all across the organisation.

You will recall that the draft Business Plan for 23/24 was presented to the Board for approval at the March meeting. We then submitted it for consideration by DHSC. I am pleased to report that during May, the department confirmed approval of the 23/24 HTA Business Plan.

14. DSPT (Data Protection and Security Toolkit) - over the last 6 months the HTA has been preparing for its annual assessment against the Data Protection and Security Toolkit (DSPT). During 22/23, considerable time has been spent on producing evidence of greater compliance and we have engaged the services of an Information Governance Lead and a Project Manager. Activity has included an interim assessment that was completed at the end of February and the collation of evidence in preparation for the internal audit fieldwork during May. This work has been monitored at ARAC meetings. Whilst field work is ongoing and the report is not due until the end of June, the early indications are that HTA has made good progress with a notable improvement in the number of standards being met or partially met compared to last year.
15. We launched a data collection exercise in June to improve and update the data we hold for establishments. We have asked establishments in the Anatomy, Post-Mortem, Research, Public Display and Organ Donation & Transplantation sectors to complete a short questionnaire with simplified answer options. The responses received will inform our assessment allocation and prioritisation and will also inform our understanding of risks and activities within establishments and sectors. The closing date for returns is set for early July, when we will be analysing the data and information provided.
16. The HTA supported the police investigation of the Ekweremadu case that resulted in a trial at the Old Bailey and subsequent convictions under the Modern Slavery Act (2015) for people trafficking for organ donation. The HTA's Head of ODT gave evidence at the trial as an expert witness. In light of these developments, we have responded to several press enquiries including providing material for a BBC Radio 4 File on Four programme. I believe we have robust systems in place, as verified by our auditors, whilst also being open to further refinements to our approach, as exemplified by the paper on today's agenda.
17. As Board members will be aware, a member of the Senior Management Team the HTA's Director of Finance and Resources, Richard Sydee, has recently moved on after six and a half years in post. I am grateful for the considerable contribution that Richard made to the HTA over a sustained period including during the Covid pandemic. We wish him well in his new role with the National Lottery Heritage Fund.

Recommendation

18. The HTA Board is asked to note and comment on the issues raised.