

Inspection report on compliance with HTA licensing standards  
Inspection date: **17 May 2024**



**Horizon Discovery Ltd**  
HTA licensing number 12638

Licensed under the Human Tissue Act 2004

**Licensed activities**

<b>Area</b>	<b>Storage of relevant material which has come from a human body for use for a scheduled purpose</b>	<b>Removal from the body of a deceased person (otherwise than in the course of an anatomical examination or post-mortem examination) of relevant material of which the body consists or which it contains, for use for a scheduled purpose other than transplantation</b>
Horizon Discovery Ltd Cambridge Research Park	Licensed	Not licensed

**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.

Horizon Discovery Ltd ('the establishment') was found to have met the majority of the HTA's standards. One minor shortfall was identified under one governance and quality system standard.

The HTA has assessed the establishment as suitable to be licensed for the activities specified.

### Compliance with HTA standards

GQ1 All aspects of the establishments work are governed by documented policies and procedures as part of the overall governance process		
e) There is a system for managing complaints	The establishment did not had system for managing complaints  <i>“The establishment submitted sufficient evidence to address this shortfall before the report was finalised.”</i>	<b>Minor</b>

### Background

Horizon Discovery Ltd (‘the establishment’) is licensed under the Human Tissue Act 2004 for the storage of relevant material which has come from a human body for use for a scheduled purpose. The establishment develops drug screening assays and cell lines, and stores small quantities of Peripheral Blood Mononuclear Cells (PBMCs) and Mesenchymal Progenitor Cells (MPCs) from third-party suppliers for specific research studies. Horizon Discovery Ltd has been licensed by the HTA since Oct 2015. This was the second inspection of the establishment; the most recent previous inspection took place in July 2016. Since the previous inspection, the establishment has appointed a new Corporate Licence Holder contact (CLHc) and new Designated Individual.

### 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

39 out of 47 HTA licensing standards were covered during the assessment (standards published 3 April 2017). Some standards relating to consent procedures (C1(a), C1(d), C1(e), and C1(f)) and standards relating to consent training (C2(a), C2(b) and C2(c)) were not applicable as the establishment does not directly seek consent from donors and PFE2(b) could not be assessed as the establishment does not store bodies or body parts.

#### Review of governance documentation

The assessment included a review of documentation relevant to the establishment's licensed activities. This included policies and procedural documents relating to licensed activities, including consent procedures and template consent forms, equipment maintenance records, risk assessments, arrangements for temperature monitoring for the storage units, staff training records, a review of the sample tracking spreadsheets and databases used to record and track relevant material, agreements, audits, and incidents.

#### Visual inspection

No site visit was undertaken as part of this inspection. The establishment provided images and remote tour of the storage facilities that allowed for assessment of security measures and the signage on the individual units.

#### Audit of records

There were no sample audits carried out. A number of audits carried out by the establishment staff, which included audits covering processes and traceability of specimens, were reviewed.

#### Meetings with establishment staff

The inspection included discussions with the CLHc,DI and other staff working under the licence. This included the Purchasing Lead,Quality Specialist and Scen Operations Scientist.

**Report sent to DI for factual accuracy: 30 May 2024**

**Report returned from DI: 10 June 2024**

**Final report issued: 10 June 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.