Inspection report on compliance with HTA licensing standards
Inspection date: **23-25 May 2022**

University College London

HTA licensing number 12620

Licensed under the Human Tissue Act 2004

Licensed activities

Area	Storage of relevant material which has come from a human body for use for a scheduled purpose	Use, for the purpose of public display, of the body of a deceased person, or relevant material which has come from the body of a deceased person
Hub site **University College London**	Licensed	Licensed
Satellite site **Royal Free Pathology Museum**	Licensed	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.

Although the HTA found that the University College London ('the establishment') had met the majority of standards, one minor shortfall was found against standards for Premises, facilities and equipment.

The HTA has assessed the establishment as suitable to be licensed for the activities specified, subject to corrective and preventative actions being implemented to meet the shortfalls identified during the inspection.

Compliance with HTA standards

Minor shortfall

PFE1 The premises and facilities are secure and safeguard the dignity of the deceased and the integrity of human tissue		
a) Areas used for storage or public display provide an environment that is safe for staff and visitors and preserves the integrity of the material and the dignity of the deceased.	The pathology museum is located within the Royal Free Hospital. There are two windows which allow a view of anatomical specimens from a publicly accessible general corridor. There is a risk of causing distress to patients attending the hospital or hospital staff if they inadvertently view the specimens from this corridor.	**Minor**

The HTA requires the DI to submit a completed corrective and preventative action (CAPA) plan setting out how the shortfalls will be addressed, within 14 days of receipt of the final report (refer to Appendix 2 for recommended timeframes within which to complete actions). The HTA will then inform the establishment of the evidence required to demonstrate that the actions agreed in the plan have been completed.

Advice

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

Number	Standard	Advice
1.	GQ3 (b)	There is a documented induction programme and training for staff which includes the handling of human remains. The DI is advised to consider recognising and documenting past training she has undertaken in relation to her role. In addition, the DI is advised to continue to document any training given to existing or new staff.
2.	T1 (a)	The DI is advised to consider adding a second label to the acrylic pots for the specimens that have not yet been accessioned in case the current pen labelling fades over time or is accidentally rubbed off.
3.	T2 (a)	During the traceability audit of two teaching loan specimens at the Rockefeller building, the inspection team noted that whilst the excel spreadsheet recording specimen location was correct, the specimen database had recorded the specimens' previous location. The DI is advised to update the specimen database with the current location for the loaned specimens.
4.	PFE1 (d)	The DI is advised to risk assess and document assessment relating to the risk of flooding at the pathology museum.
5.	General advice	The DI is advised to formalise and document the contingency plans which cover staff changes and absences.

Background

The establishment has been licensed by the HTA since March 2015. This was the second inspection of the establishment; the most recent previous inspection took place in September and October 2014.

The establishment stores relevant material for the use for public display and for training and education to support teaching, research and public engagement. Relevant material is used during temporary exhibitions, demonstrations used during teaching and by medical staff as part of their learning.

The pathology collections are stored and displayed at the hub site at the Cruciform Library and the Rockefeller Building within the UCL Campus. The Octagon Gallery is a temporary exhibition space which is also on the same campus and was not in use during the inspection. This hub site also contains an Object Based Learning Lab where training and education is carried out. Pathology collections are also stored and displayed at the satellite site at the Royal Free Hospital.

Since the previous inspection, the following changes have been made to the licensing arrangements: the current DI was approved in May 2021 and a new Person Designated (PD) was added to the licence in August 2019. In addition, the activity of the use for public display was added to the satellite site in March 2022. The establishment subsequently decided to revoke the licence at one of the satellite sites (Whittington Hospital) and a revocation form was submitted prior to the inspection.

The inspection team visited the Whittington Hospital site and confirmed that licensable activities are no longer taking place at this site.

Description of inspection activities undertaken

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

Standards assessed against during inspection

31 out of 36 licensing standards were covered during the inspection (standards published 3 April 2017). Standards relating to consent procedures (C1(a), C1(b), and C1(c)) and standards relating to consent training (C2(a) and C2(b)) were not applicable as the establishment has not received any new acquisitions and does not directly seek consent from donors.

Review of governance documentation
The following documents were reviewed: policies and procedural documents relating to licensable activities, audits, risk assessments, adverse incidents, staff training records and codes of conduct for student and visitors.

Visual inspection
A visual inspection was conducted at the hub and satellite sites. This included storage, display locations and training rooms.

Audit of records
Six foreword and reverse audits were conducted at the hub site for relevant material (records to location and location to records). No discrepancies were found. Five foreword and reverse audits were also conducted at the satellite site. A minor discrepancy was found relating to the location of two loan specimens that were previously used for teaching in the same building. The excel spreadsheet recording all specimen locations had the correct location of the specimens in storage but the establishment's specimen database had not been updated and showed the previous specimen location (please see advice item 3).

Meetings with establishment staff
The inspection included discussions with staff carrying out processes under the licence. This included the DI, a PD and the Collections Manager (Care and Teaching).

Report sent to DI for factual accuracy: 21 June 2022

Report returned from DI: 22 June 2022

Final report issued: 22 June 2022

Completion of corrective and preventative actions (CAPA) plan

Based on information provided, the HTA is satisfied that the establishment has completed the agreed actions in the CAPA plan and in doing so has taken sufficient action to correct all shortfalls addressed in the Inspection Report.

Date: 19 July 2022

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.