

Inspection report on compliance with HTA licensing standards
Inspection date: **22 March 2023**



International Centre for Life
HTA licensing number 12644

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 International Centre for Life	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 International Centre for Life ('the establishment') had met the majority of the HTA's standards one minor shortfall was found against standards for Governance and quality systems. This was in relation to having an overarching policy for the management of the exhibit.

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 Shortfalls

Standard	Inspection findings	Level of shortfall
GQ1 All aspects of the establishment's work are governed by documented policies and procedures		
a) There are collections management policies and procedures, or equivalent, governing the storage and public display of bodies and human tissue which give due regard to the dignity of the deceased.	Whilst there are collections management policies and procedures in place, information on the storage and display of human tissue is not detailed within these documents.	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)	The DI is advised to identify and train other individuals in the management and care of the exhibit on display to ensure there is resilience for management of this item in the absence of the DI.

2.	GQ6(b)	Whilst the exhibit is held securely in secure premises, the DI is advised to expand the risk assessments to include detail of the mitigation in place for security of the exhibit.
3.	PFE2(d)	The DI is advised to review contingency plans in place to ensure they contain sufficient information on relocation of the exhibit in the event of an emergency.

Background

International Centre for Life has been licensed by the HTA since February 2016. This was the second inspection of the establishment; the most recent previous inspection took place in May 2016.

Since the previous inspection, there have been no significant changes to the activities carried out under the licence. A change of DI took place in October 2017.

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

29 out of the total 36 standards (standards published 3 April 2017) were assessed as part of this inspection. The following were not assessed as these standards are not applicable to the establishment: C1(a), C1(b), C1(c), C2(a), C2(b), PFE2(a) and PFE2(b). The establishment do not seek consent for Public Display so the consent standards are not applicable, furthermore, due to how the exhibit is preserved two PFE standards are also not applicable.

Review of governance documentation

The inspection team reviewed policies and procedural documents relating to licensed activities, risk assessments, and staff training and induction policies.

Visual inspection

A visual inspection was not undertaken. This inspection was completed as a 'Virtual Regulatory Assessment'.

Audit of records

The establishment only have one item of human origin on public display, this exhibit has been static since 2016, therefore, an audit of traceability was not required as part of this inspection.

Meetings with establishment staff

The inspection team met with the Designated Individual who is the person with sole responsibility for management of the exhibit.

Report sent to DI for factual accuracy: 03 April 2023

Report returned from DI: 19 April 2023

Final report issued: 19 April 2023

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: 4 September 2023

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.