

# Minutes of the meeting of the Human Tissue Authority (HTA) Board

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**Date:** 7th December 2023

**Time:** 10.00 – 12.30 hours

**Venue:** By Teams

**Meeting Number:** 106

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## Attendees:

### Board Members

Lynne Berry, HTA Chair (LB)

Mhairi Anderson (MA)

Tom Chakraborti (TC)

Gary Crowe (GC)

Helen Dodds (HD)

Ellen Donovan (ED)

Andy Greenfield (AG)

Dave Lewis (DL)

David Lock KC (DLKC)

Jessica Watts (JW)

### HTA Executive

Colin Sullivan, Chief Executive (CS)

Louise Dineley, Director of Data,  
Technology and Development (LD)

Nicolette Harrison, Director of  
Regulation (NH)

Tom Skrinar, Director of Finance and  
Resources (TS)

John McDermott, Deputy Director for  
Performance and Corporate  
Governance (JMD)

### *Supporting officials in attendance*

Aidan McIvor, interim Board Secretary  
Nicola Fookes, Finance Manager, for  
item 7.

Anjeli Kara, Head of Policy and  
Development, for item 8.

### *Observers*

Matthew Atkinson, Head of IT  
Victoria Carey, Regulation Manager  
Natasha Brosnan, Corporate Service  
Officer

### *Department for Health and Social Care*

Amanda Davies, Deputy Director  
Health Ethics

Jacky Cooper, Policy Lead, Health  
Ethics Team

## **Item 1 – Welcome and apologies**

1. The Chair welcomed all to the 106<sup>th</sup> meeting of the HTA's Board, including Mhairi Anderson, David Lock KC, and Jessica Watts, who were newly appointed to the Board by DHSC Ministers on 1<sup>st</sup> December 2023.
2. At the invitation of the Chair, the three new Board members introduced themselves, briefly outlining their careers to date.
3. The Chair advised that the discussion of item 8 would be brought forward, as Tom Skrinar, Director of Finance and Resources, had also to attend the Audit Committee of the Human Fertilisation and Embryology Authority (HFEA).
4. No apologies were received from Board members.

## **Item 2 – Declarations of interest**

5. The Chair asked Members to let Private Office know if they have any personal or pecuniary interests and to make sure the Private Office is kept informed.

## **Item 3 – Chair's Report**

6. The Chair gave the following update, which centred on the following.
  - Meetings with the Chairs and Chief Executives of Arms-Length-Bodies (ALBs). These partly considered ALBs' reviews and some of budget-related issues, and how regulatory bodies can collaborate better.
  - Involvement with the response to the Fuller Inquiry.
  - Board appointments - The Chair said she was delighted the Welsh Government had reappointed Ellen Donovan as the Welsh Member on the HTA Board. Ellen Donovan's second term of appointment will run from 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2027. As regards appointing a representative from Northern Ireland, the Board noted that, with the absence of a Devolved Government, discussions continue with officials in Northern Ireland.

## **Item 4 – Update from Department of Health and Social Care (DHSC) Sponsor Team**

7. Amanda Davies (AD) gave an oral update which centred on the following.
  - (i) *New Ministers*: On 13th November, the Rt. Hon. Victoria Atkins MP was appointed Secretary of State, along with Rt. Hon. Andrew Stephenson CBE MP as Minister of State for Health and Secondary Care, and Rt Hon Andrea Leadsom MP as Minister for Public Health, Start of Life, and Primary Care.
  - (ii) *Staff movements*: Dylan Parrin, formerly of the Sponsorship Team, has left DHSC on promotion. Josie Oyinlola's secondment from DHSC to HTA will end soon. It was noted such secondments have proved mutually beneficial and DHSC would be happy to discuss future opportunities and longer secondments.
  - (iii) *Business planning for 2024/25*: DHSC is heavily focussed on business planning for 2024/25, which will be a challenging year, with the request of policy cost neutral bids. DHSC thanked HTA for the quick turnaround on many items of work, including additional requests on Duty to Report, as well as further work on the Fuller Inquiry.
  - (iv) *DHSC Audit and Risk Assurance Committee met* jointly with the HTA and the Human Fertilisation and Embryology Authority (HFEA) on 4<sup>th</sup> December. It was noted the feedback from ARAC on the HTA was most positive.
8. The Chair thanked AD for the report, which was noted by the Board.

## **Item 5 – The Chief Executive's Report**

9. The Chief Executive, Dr Colin Sullivan (CS) presented highlights from the Chief Executive's report. For the benefit of new Board members, CS said the purpose of the report was to outline strategic and topical issues. These included:
10. Fuller Inquiry – The Phase 1 of the Inquiry's report was published on 28th November. CS asked that the minutes record the seriousness which the HTA, its Chief Executive and the senior executive team are treating the report's

findings. The HTA are considering these findings and developing a response. The HTA is very keen to play its part, along with other interested parties within the 'health family', in improving practice and to guard against anything similar happening again. Meanwhile, the HTA continues to support Phase 2 work led by Sir Jonathan Michael, which will most likely report in late 2024.

11. Updates were also given on Winter pressures on mortuaries, Living Organ Donation, and the roll-out of HR shared services.
12. 2023/24 Business Plan – CS asked the Board to agree to the proposed in-year changes to the Business Plan due to other pressures and a resulting reprioritisation of activity.
13. The Chair thanked CS for his report. The Board noted the challenges faced by the mortuary sector during winter. The Chair noted the value of Board members shadowing HTA staff on mortuary inspections (Ellen Donovan had recently been on an inspection) whilst highlighting that the HTA is not primarily an inspectorate. The Board considered and endorsed CS's concerns about managing current future and work streams, e.g., Phase 2 of the Fuller Inquiry, within a constrained financial envelope. Recognising the increasing demands on the HTA, coupled with reduced Grant-in-Aid funding, the Board advised that, where possible, the HTA should continue to prioritise and be willing to 'push back' on certain new requests. Accordingly, the Board agreed to the in-year changes to the Business Plan and formally noted the report.

## **Item 6 – HTA Performance Report**

14. Colin Sullivan (CS) introduced the report and provided highlights to Members of Performance in Q2 against the HTA's objectives and operational delivery targets. Appended to the report were summaries from the monthly Portfolio Management approach and the Strategic Risk Register. During the update, CS outlined the rating of the Key Performance Indicators for operational delivery and the projects.
15. The Board thanked CS for the report. The Board noted the pressures around staff resourcing, which have improved. Ellen Donovan asked about resourcing issues and in particular the transition of HR services to the Care Quality Commission (CQC). Tom Skrinar explained discussions continue with the CQC

around the outsourcing of HR services, and explained what needs to be done, for example, around aligning HR policies and procedures.

16. The Board asked about Artificial Intelligence (A.I.) and its implications for the HTA, and whether it was being used by the establishments the HTA regulates. Louise Dineley explained the HTA was cognisant of and following work in this area, with an internal workshop having taken place earlier in the week. Whilst mindful of other pressing priorities, the Chair said it would be helpful to have a roadmap on A.I., which could be considered by ARAC, after which an update would come to the Board.

17. The Board concluded by noting the report.

## **Item 7 – Fees Review**

18. Tom Skrinar (TS) presented a review of the HTA’s funding requirements going forward and subsequent fee modelling, which included recommended proposals for fee changes for the financial year 2024/25.

19. The Chair thanked TS for his paper, classed “confidential” at this stage, and went on to invite comments and questions. The Board asked for clarification about what funding raised from fee increases would not cover. TS explained that certain HTA activities, such as Live Organ Donation process and ‘Duty to Report’ would not be funded through fees, as these are covered by Grant in Aid (GIA). Historically, HTA’s fee increases have been below the rate of inflation, and fees were not raised during the pandemic; but due to notable inflationary pressures and a revised business model with reduced Grant in Aid, there was now no alternative but to incorporate a notable increase to fees. CS added that the HTA is a small and lean organisation that covers six sectors.

20. The Board asked about the funding from the Devolved Governments. TS explained that, while GIA from DHSC would be reduced, the relatively small income (combined total around £120K per year) from the Devolved Governments would remain unchanged. TS explained the income from the DAs covers the HTA’s costs for LOD approvals arising from living donations carried out in those nations. This is managed through contracts. Ellen Donovan advised that in the interests of fairness and transparency, the HTA should have discussions about the HTA’s funding with Devolved Governments, so that they are kept informed of developments. TS welcomed the suggestion, which he would act on.

21. The Chair noted that the HTA's relationship with DHSC was one of sponsorship, while those with the Devolved Administrations was contractual. The Chair said she would like – at a future date – for the Board to consider the HTA's relationship with the Devolved Administrations more widely.
22. The Board went on to ask about engagement with the HTA's sectors. The Board noted that stakeholders are aware of plans to increase fees, but further engagement cannot take place until discussions with DHSC about GIA have concluded, as well as the Board's consideration of the fee's paper. The Board noted the discussions with DHSC will include the resource implications for the HTA of the Fuller Inquiry findings and the roll out of Duty to Report in 2024/25.
23. Having discussed the fees' paper at length, the Board concluded by endorsing the proposals set out at para. 23 of the paper and the adoption of the revised fees as set out in Annex C of the paper.

**Action:** Tom Skrinar to keep the Devolved Administrations informed about developments around fees.

## **Item 8 – Assessing our impact**

24. Louise Dineley (LD) presented the findings of a recent assessment of the HTA which was undertaken by Kaleidoscope Consultants. Overall, the report concluded that the HTA's activities are impactful in the regulation of human tissue, cells and organs. The report's findings identified HTA's strong reputation as an expert regulator; its ability to maintain the trust of licensed establishments; and its ability to facilitate collaboration.
25. The Board thanked LD for the paper, and noted the value of the report, especially in view of anticipated work around the forthcoming HTA Strategy for 2024-27 and the possible Public Bodies' Review. Moreover, the staff workshops which had helped inform the report had proved most helpful. The Board also noted the considerable time and resource implications that would result if all the report's findings were to be implemented. By contrast, it was appreciated that the HTA's executive would need to prioritise amongst the recommendations. The Board concluded by asking that copies of the full report be shared with the Board after the meeting for background reading.

**Action:** AMCI to circulate copies of the full report after the Board meeting.

## **Item 9 – Audit and Risk Assurance Committee update**

26. Professor Gary Crowe (GC), Chair of the Audit and Risk Assurance Committee (ARAC), gave an update on the ARAC meeting which was held on 19<sup>th</sup> October 2023. GC also updated the Board on a meeting he, along with Colin Sullivan and Tom Skrinar, attended with DHSC's ARAC on 4<sup>th</sup> December. The following highlights from both meetings were given.

### *HTA ARAC meeting of 19<sup>th</sup> October*

- ARAC was assured of the adequacy of the HTA's systems and controls. Two internal audit reports were received, which were both rated "satisfactory".
- ARAC had a deep dive which focussed on the risk relating to staff effectiveness and resourcing specifically. ARAC thought the risk remained high and asked the Executive to develop an action plan. This will be monitored by the Remuneration Committee.
- ARAC also considered the risks rated above 'tolerance' level. ARAC had some concerns about the delay in delivering some projects due to prioritisation, in particular, IT activity, but it welcomed the appointment of a new Head of IT, who is now in post.

### *DHSC ARAC meeting of 4<sup>th</sup> December*

- The DHSC ARAC had an opportunity to review the HTA and HFEA in a joint meeting. The feedback was very positive: the HTA has an appropriate risk management practice and an appropriate Risk Register.
- The DHSC ARAC noted that HTA's resourcing challenges were being managed by the HTA's senior team and the DHSC Sponsor Branch.

27. The Chair thanked GC for the report and noted the Board can take comfort that risks are being considered and managed effectively, which was an assessment supported by DHSC's ARAC. In conclusion, Members formally noted the update from the Chair of ARAC.

## **Item 10 – Minutes of 21<sup>st</sup> September 2023**

28. The minutes of the Board meeting on 21<sup>st</sup> September had been distributed to Members, with a deadline of 24<sup>th</sup> November for any amendments or changes.

29. Members accepted the minutes as a true record of the Board meeting.

### **Item 11 – Matters arising from 21<sup>st</sup> September 2023**

30. The Board noted that Standing Orders, with changes to Annexes A and B, were adopted at the Board meeting of 21<sup>st</sup> September.

### **Item 12 - Any other business**

31. None was tabled.

Date of next meeting: 7<sup>th</sup> March 2024 at 2 Redman Place.