

University of Hertfordshire
Proposed HTA licensing number 12805

Application to be licensed under the Human Tissue Act 2004

Activities

Premises/area	Storage of relevant material which has come from a human body for use for a scheduled purpose	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
University of Hertfordshire (College Lane) (Hub site)	Application made	Application not made
Institute of Sport (Satellite site)	Application made	Application not made

Summary of findings

The HTA found the proposed Designated Individual (DI) and the proposed Licence Holder (LH) to be suitable in accordance with the requirements of the legislation.

The HTA had found that University of Hertfordshire ('the establishment') had met all HTA's standards.

Advice

The HTA advises the proposed DI to consider the following to further improve practices:

Number	Standard	Advice
1.	GQ1(b)	Under the document control system, any amendments to documents would be recorded on a document control spreadsheet. The DI should also consider adding the revision history to the document so that this information is readily available to staff.
2.	T1(c)	The establishment has an audit approach that identifies whether a research study is still active. To strengthen tracking and oversight further, the DI is advised to develop a central register of all research studies with Health Research Authority (HRA) research ethics committee (REC) approval and those being undertaken under the governance of the licence.

Background

The proposed establishment is a University which has applied to operate under a hub and satellite licensing arrangement. They intend to store blood bodily fluids (saliva), faeces and human skin from living donors, including healthy volunteers. The satellite site specialises in the running sports science courses where blood samples collected from students and volunteers with consent will be stored for research in a designated area.

Description of activities undertaken

The HTA's regulatory requirements are set out in Appendix 1. The Regulation Manager covered the following areas during a desk-based assessment and site visit:

Standards assessed

Of the 47 HTA licensing standards, 46 were covered during the assessment (standards published 3 April 2017). Standards PFE2(b) is not applicable as the establishment does not intend to store tissue from deceased donors.

Review of governance documentation

Local policies and procedural documents relating to licensable activities, contracts for servicing of equipment and records of servicing, the audit schedule, risk assessments and plans for ongoing staff training were reviewed.

Visual inspection

The visual inspection included the sample storage areas at the hub and satellite site where human tissue would be stored. A review of the suitability of the premises including security access to the building was undertaken.

Meetings with establishment staff

A roundtable meeting was held with the proposed DI and the Health and Safety Lead.

Report sent to proposed DI for factual accuracy: 1 October 2025

Report returned from proposed DI: 2 October (with comments)

Final report issued: 8 October 2025

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, and;
- 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, or;
- 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 site visit.

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, or;
- 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.