

# Governance and transparency

**Strategic delivery:**     Setting standards     Increasing and informing choice     Demonstrating efficiency economy and value

## Details:

Meeting                      Authority

Agenda item                9

Paper number              HFEA (15/03/2017) 829

Meeting date                15 March 2017

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## Output:

For information or decision?              For decision

Recommendation              The Authority is asked to:

- note the committees' annual reviews

Resource implications              Minimal

Implementation date              1 April 2017

Communication(s)              N/A

Organisational risk               Low                       Medium                       High

Annexes                        Standing Orders

## 1. Introduction

- 1.1. For the HFEA to be an effective and trusted regulator, we must have high quality decision making processes which are clear to clinics, patients and the wider public. To achieve that, we have a number of committees, with clear instructions from the Authority about how they should make decisions. The rules governing decision making is set out in our Standing Orders and explained on our website.
- 1.2. The Authority is committed to an annual review of our governance structures, consisting of:
  - a review of each committee's effectiveness; and
  - a review of our Standing Orders.

## 2. Annual review of committee effectiveness

- 2.1. All committees are required annually to assess their own effectiveness. Generally, the feedback is positive. Committees have been through a period of consolidation, following changes in committee membership.
- 2.2. The committees which make licensing and authorisation decisions are attended well. The biggest risk to quoracy has been IT issues in Spring Gardens, but these connectivity issues have peaked with meetings rooms now being booked offsite for more reliability. We have taken expert advice on these issues and expect to resume meetings in Spring Gardens shortly.
- 2.3. The table below summarises the feedback from each committee.
- 2.4. The areas for improvement identified will be considered over the coming year.

Committee	Positives	Areas for improvement
<b>Licence Committee</b>	<p>The committee business is managed well by the Executive with ample committee time scheduled to discuss business properly.</p> <p>The scientific expertise within the committee has enabled the committee to function without the attendance of external advisers.</p> <p>The committee has retained oversight of tougher licensing decisions.</p> <p>Member attendance is good and quoracy is not an issue at the moment.</p> <p>The Chair intends to continue being present as this works best when other members are attending via V/C or</p>	<p>Technical problems have still been an issue which has meant that sometimes conversations have to be repeated to ensure all members are involved in the discussion.</p> <p>Papers are still being tabled, thus meaning members have less time to absorb the content. The committee agree that this should be avoided where possible.</p>

teleconference.

<b>Statutory Approvals Committee</b>	<p>Following feedback from SAC the Executive met with the Genetic Alliance (GA) to discuss expectations from their opinion papers. Since the meeting the GA papers have been outstanding in conveying the patient perspective. The committee now find the GA opinion papers a key part of an application for PGD.</p> <p>The Chair of the committee has continued to effectively chair the meeting and gives members of the committee ample time to express their opinions and raise questions.</p> <p>The committee agreed that any expressions of disagreement faced by members was fully explored to ensure collective ownership of decisions.</p>	<p>Work needs to be completed in respect of applications for special directions for import or export. The committee felt that consistency regarding the information provided by centres/Executive for special directions could be improved.</p> <p>The committee felt that work needed to be completed in respect of conditions with familial inheritance and X-linked conditions and how clinics are licensed to test for these conditions.</p> <p>Keeping the committee up to speed with new technologies and techniques and feedback from the sector via the inspection team. The committee has been informed that a PGD workshop is planned.</p> <p>SAC agreed that ongoing IT issues have disrupted some meetings and the committee were looking forward to these issues being resolved.</p> <p>The committee agreed that there should be a quarterly standing item to discuss the general governance of the committee to give members an opportunity to raise any issues faced.</p>
<b>Executive Licensing Panel</b>	<p>The volume of work and high frequency of meetings are manageable and continue to be responsive to demand from the Compliance department.</p> <p>The Licensing Officer role has started to process the first change of Licence Holder and change of centre's name or address. This has proved to be a much quicker process for the Executive and a faster decision for centres.</p>	<p>There have been some discussions between Licensing and the Inspectorate to improve the flow of paperwork, but this generally works well.</p> <p>The ELP felt that more information on the inspection process would be beneficial, such as timing of inspections and inspection themes. An annual meeting with compliance could achieve this.</p> <p>It would also be good if more could be done to schedule meetings after the main deadlines for recommendations, especially where the deadline is very soon after the committee (assuming there is time for this before the licence lapses).</p>
<b>Audit and Governance Committee</b>	<p>The committee continues to benefit from having external members and their experience and perspective has proven to be invaluable.</p> <p>The relationships between the chair, committee and internal and external audit are well developed and meetings are attended by all the appropriate</p>	<p>Both External member's appointment terms expire in late summer and this needs to be planned for carefully.</p> <p>AGC felt that when papers are given to them as an update, it is not always clear what the committee is being asked to do.</p> <p>AGC wondered what risks would be getting their attention if IfQ was not in</p>

	<p>organisations. Pre-meetings with all parties occur.</p> <p>Annual appraisals of external members have taken place and inspection observations have been completed.</p> <p>Chair attends DH audit chairs meetings and training when it is provided.</p> <p>The committee felt that they were supported well by both the Finance team and the Committee Secretary.</p> <p>AGC annual report to the Authority introduced in July 2016.</p>	<p>play. This might mean looking at longer term risks like OTR or legal challenges.</p> <p>Some meetings have been problematic due to IT issues, when members have attempted to attend remotely.</p>
<b>Scientific and Clinical Advances Advisory Committee</b>	<p>SCAAC agreed the meetings are chaired effectively and spirited and involving discussions take place.</p> <p>The papers received by this committee are of high quality, with comprehensive background information provided.</p> <p>Committee members were asked to provide information for a high profile television programme. Members forwarded the requests to the Executive and the issue was dealt with centrally which worked well.</p>	<p>The committee felt frequency of meetings should increase or the extension of one meeting beyond the usual length to cover relevant issues.</p> <p>SCAAC find the annual horizon scanning meeting at ESHRE useful and informative, however not all SCAAC members are able to attend.</p> <p>Declarations of Interest were not stated at the beginning of meetings (this has been addressed following this review).</p> <p>Minutes should be circulated in a timely manner even though they are signed off at the next meeting.</p>
<b>Remuneration, Appointments and Oversight committees</b>	<i>Formal reviews not undertaken due to infrequency of meetings</i>	
<b>Appeals</b>	The committee has not heard any appeals this year.	

### 3. Review of Standing Orders

- 3.1. The Authority is asked to note that there has been no need to amend Standing Orders this year so the version released in April 2016 still stands.
- 3.2. The current version is attached at Annex A for information.
- 3.3. The Standing Orders version control has been updated to reflect the fact that the Authority agrees that there is no need to change this year.

### 4. Recommendation

- 4.1. The Authority is asked to:
  - note the committees' annual reviews; and

- high note the proposed Standing Orders remain unchanged.