

Minutes of Authority meeting held on 22 March 2023

Details:

Area(s) of strategy this paper relates to:	<p>The best care – effective and ethical care for everyone</p> <p>The right information – to ensure that people can access the right information at the right time</p> <p>Shaping the future – to embrace and engage with changes in the law, science and society</p>
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Agenda item	2
Meeting date	17 May 2023
Author	Debbie Okutubo, Governance Manager

Output:

For information or decision?	For decision
Recommendation	Members are asked to confirm the minutes of the Authority meeting held on 22 March 2023 as a true record of the meeting.

Resource implications

Implementation date

Communication(s)

Organisational risk Low Medium High

Minutes of the Authority meeting on 22 March 2023

Members present	Julia Chain Jason Kasraie Frances Flinter Zeynep Gurtin Alison Marsden Tim Child Alison McTavish	Guhrun Moore Alex Kafetz Graham James Jonathan Herring Geeta Nargund Catharine Seddon
Apologies	Frances Ashcroft	
Observer	In person Amy Parsons (Department of Health and Social Care – DHSC)	online Steve Pugh (DHSC)
Staff in attendance	Peter Thompson Richard Sydee Clare Ettinghausen Debbie Okutubo Shabbir Qureshi Niamh Marren	

Members

There were 13 members at the meeting – Eight lay and five professional members.

1. Welcome and declarations of interest

- 1.1.** The Chair opened the meeting by welcoming Authority members and the DHSC colleague present. The Chair also welcomed staff who were present and observers online and stated that the meeting was audio recorded in line with previous meetings and for reasons of transparency the recording would be made available on our website to allow members of the public hear it.
- 1.2.** Declarations of interest were made by:
- Jason Kasraie (PR at a licensed clinic)
 - Tim Child (PR at a licensed clinic) and
 - Geeta Nargund (Clinician at a licensed clinic).

2. Minutes of the last meeting and matters arising

- 2.1.** Members agreed that the minutes of the meeting held on 25 January 2023 were a true record and could be signed by the Chair.

Matters arising

- 2.2.** Action 8.12, the Audit and Governance Committee (AGC) Chair, Catharine Seddon stated that the Authority will receive updates on cyber security via the committee.
- 2.3.** Action 6.7, the risk appetite statement will be on the AGC forward plan for December 2023.
- 2.4.** Action 7.15, the consultation on law reform was launched on 28 February and is an agenda item for this meeting.

Decision

- 2.5.** The status of all other matters arising were noted.
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3. Chair and Chief Executive's report

- 3.1.** The Chair gave an overview of her engagement with key stakeholders, her attendance at sector related events and the decision-making committees of the Authority.
- 3.2.** The Chair commented that we received a lot of press coverage following the launch of the consultation on modernising fertility law. She gave a brief description of the interviews she had done alongside other HFEA senior staff.
- 3.3.** The Chief Executive (CE) provided an update on the key external activities including clinic visits, in particular to Wales, that he had been involved in since the last Authority meeting and his attendance at the recent international summit on gene editing held in London.
- 3.4.** Members commented that it was good that we were engaging with Scotland and Wales as we are a UK wide regulator and asked how much the devolved governments were engaged with the HFEA. The Chief Executive responded that our conversations in the devolved nations sometimes differed from that in England, reflecting the policy differences in the four nations, but we must ensure that our work is applicable across the UK and we therefore engage in a variety of ways.

Decision

- 3.5.** Members noted the Chair and Chief Executive's report.
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4. Committee Chairs' reports

- 4.1.** The Chair invited committee Chairs to add any other comments to the presented report.
- 4.2.** The Licence Committee Chair (Alison Marsden) noted that there was a high volume of work at this present time and that they were meeting in addition to their normal meeting cycle to review and conclude on complex cases.
- 4.3.** The Statutory Approvals Committee (SAC) Chair (Jonathan Herring) stated that applications received were reliant on peer reviews and the committee also considered similar conditions to those applied for to save future patients from having to apply to have such conditions approved.
- 4.4.** The Audit and Governance Committee (AGC) Chair (Catharine Seddon) gave a summary of the last meeting held. She commented that the Executive were making good progress to close internal audit recommendations. Also, a number of deep dive topics had been agreed and in October they will be reviewing the increased reporting of corporate governance standards. Lastly, in December there will be a training session on good governance and issued an open invitation to any Authority members to attend.
- 4.5.** The Scientific and Clinical Advances Advisory Committee (SCAAC) Chair (Tim Child) commented that the bulk of the discussion at their meeting in February was on the add-on ratings. However, more work was required in this area and that there will be a further review at a later meeting.
- 4.6.** The Chair thanked all Authority members for their hard work and time commitment on the various committees. Continuing, the Chair commented that she observed a recent SAC committee

meeting noting that over 600 serious inherited conditions had now been licensed for PGT-M by the HFEA. The list increased every month as the HFEA was presented with new conditions and importantly once a condition is approved, then future patients do not need to go through an application process.

Decision

- 4.7.** Members noted the committee Chairs' reports.
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5. Performance report

- 5.1.** The Chief Executive commented on staff sickness and turnover. Members were advised that sickness levels remained stable - as at the end of January it was at 2.8% against the target of 2.5%. On turnover it was now approaching target at 15.5%.
- 5.2.** On PRISM, the Chief Executive commented that the system was working well. All clinics had caught up on their submission backlogs, except three clinics that had yet to transfer to PRISM because of technical issues with their preferred third-party provider. He commented that we were making good progress towards our end of July 2023 target to complete the reports required for the OTR team. He also gave the assurance that we update on PRISM at every AGC meeting.

Compliance and Information

- 5.3.** In the absence of the Director of Compliance and Information, the Chief Executive gave an update. Members were advised that there were improvements to the inspection performance but that the KPI was a complex one to achieve and we were therefore pleased that this was going in the right direction. Members were informed that over the next few months we were expecting performance to dip due to some complex compliance issues but that staff were working to ensure that this was not detrimental to the entire service.
- 5.4.** On the OTR service, we had recruited and trained new staff but there was an increase in applications, so we still had the backlog to deal with. The systems used by the team were being updated as part of a wider piece of work. The new systems will improve efficiency.
- 5.5.** On PRISM and incomplete data, members asked how we were planning on getting feedback from clinics. The Chief Executive responded that it was important to understand that incomplete data did not mean that we were missing treatment cycles, rather it reflected errors within a treatment record. Where we had identified such errors the PRISM Programme Manager had regular updates with clinics to rectify them. We had also created a unique identifier for each record in PRISM, which will be useful to identify errors and other issues with individual cycles.
- 5.6.** Members commented that this was a huge amount of work and congratulated everyone involved and asked how the Executive would know if a whole record was missing and if missing data could be inputted manually. The Chief Executive responded that we had several ways of assuring the accuracy of the Register. For historic data we keep testing. For recent data we validate it and because records are live or only recently inputted, we are able to plug the gaps. It was also a requirement of all persons responsible (PRs) to submit accurate data and we carry out sample audits. He continued that it was important that we hold accurate information because it is a regulatory requirement. Further confidence came from the fact that our annual report was externally audited before being laid before Parliament. Taking all this together we believe that the data we hold is generally accurate information and tallies with the income receive.

- 5.7.** The deputy Chair of AGC (Alex Kafetz) had recently had an assurance meeting regarding the new system for supporting OTR requests and was impressed with its proposed functionality.

Strategy and Corporate Affairs

- 5.8.** The Director of Strategy and Corporate Affairs noted that members had all received the 2024 committee and Authority dates and were asked to mark their respective calendars with the relevant meeting dates.
- 5.9.** Members were informed that public events and communications activity to promote the consultation on law reform was ongoing. We plan to publish an updated Fertility Trends report later in the year.
- 5.10.** On the Communication Strategy, the Head of Communications had spoken to Authority members at the end of last year and it was noted that we have seen a huge increase in engagement and media coverage in the last 12 months.
- 5.11.** In response to a question, it was noted that the new add-on ratings had been agreed by the Authority and SCAAC were asked to rate individual add-ons according to these ratings.
- 5.12.** The Chair thanked the Director of Strategy and Corporate Affairs and her team for all the hard work done to date and commented that there had been a huge uptake of media coverage and we were a trusted voice in a range of areas.

Finance and Resources

- 5.13.** The Director of Finance and Resources commented on the full year forecast which shows a surplus against the budget of £335k, this was impacted by underspends in our expenditure. It was also noted that we had amended our forecast income to reflect the impact of the reconciliation of clinic activity against estimates raised during the earlier part of the financial year.
- 5.14.** Members were advised that debt collection was under target. This had however improved over the last month, but it was still low due to estimation and the need to update customer details. Members were assured that effort was being made in debt chasing and securing promises of settlement.
- 5.15.** Lastly, we were awaiting the DHSC to confirm to us our budget for 2023/24.

Decision

- 5.16.** Members noted the performance report.

6. Effective Governance

- 6.1.** The Governance Manager presented this item. Members were reminded that on an annual basis all committees were required to review their own effectiveness using a standard and / or bespoke framework. Between September 2022 and January 2023 this exercise was conducted by the Audit and Governance Committee, Licence Committee, Executive Licensing Panel, Statutory Approvals Committee, the Scientific and Clinical Advances Advisory Committee and the Register Research Panel.
- 6.2.** The Chair commented that the board effectiveness review was carried out in September 2022 and we were now six months in. A number of issues were raised during the exercise and in September 2023 members would meet again to review the list of actions.

- 6.3.** Members were advised that during the discussion at the AGC meeting in March, it was suggested and agreed that it would be beneficial to have the option of bringing in additional independent non-executive expertise (if/when required) during discussion on specific topics. To accommodate this, there was a proposed change to the terms of reference of the committee.

Decision

- 6.4.** Members unanimously voted on the change to standing orders. It was agreed that there will be an addition to state:

“The committee shall have the power to co-opt additional members for particular expertise if needed. Any such appointment, and the term of office, shall be at the discretion of the Chair of the HFEA”.

- 6.5.** Members also noted the summary of actions in the annual review of committee effectiveness.
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7. Code of Practice update

- 7.1.** The Regulatory Policy Manager presented this item. Members were advised that since the Code was last updated in 2021 there have been legislative changes that now need to be incorporated into the Code. Also, that these changes had been communicated to licensed clinics through Chair’s letters and clinic focus, and that the requirements were already in force.
- 7.2.** It was noted that the changes were in three categories: legislative changes, less substantive changes and other changes.
- 7.3.** The Director of Strategy and Corporate Affairs commented that we needed to strike a balance where the Code of Practice needs to be up to without bringing changes to the sector too often. The Windsor Framework will however have an impact on the Code of Practice.
- 7.4.** Professional members commented that they were aware that there was new professional guidance likely to be issued later this year and this may need to be incorporated into the Code.
- 7.5.** The Director of Strategy and Corporate Affairs responded that depending on the Authority decision, we could be in a position to publish the updated Code in October. However, should the Authority decide that we should postpone, to allow the aforementioned to take effect, the current Code would continue to be out of date although all information relating to storage law changes was available on the clinic portal.
- 7.6.** Members commented that they were aware that information was already available on the clinic portal but it was better to have all information in the Code. It was therefore better to publish now to reduce the risk of an out-of-date Code of Practice.
- 7.7.** In response to a question about the Secretary of State approving the Code of Practice, the Chief Executive explained that this was set out in law and following discussion, it was suggested that this could be part of the law reform proposals we plan to submit to the DHSC, as this would provide useful flexibility in future.
- 7.8.** The majority of the members wanted the Code of Practice to be published this year, although this could be delayed to later during the year if the changes from the Windsor Framework and/or professional body guidance came through over the summer.

Decision

7.9. Members agreed that the proposed changes to the Code of Practice.

8. Opening the Register (OTR) update

8.1. The Director of Strategy and Corporate Affairs presented this item. Members were given an update on the three work streams since the January meeting. It was noted that there was good progress on the integration of the new IT system for managing applications and work was continuing on updating policies.

8.2. Members commented that we need to look at reputational risks and that this needed to be reflected in the communication strategy. It was noted that there were some areas that were out of our control but we should do what we could to mitigate such risks.

8.3. Members also asked if we could consider use of short videos to manage expectations for donor conceived individuals before they received the full information from the HFEA. The Director of Strategy and Corporate Affairs responded that this will be considered as part of the wider communications activity.

8.4. The Chair stated that when we launched the modernising fertility law consultation, the press focused on the proposals on donor anonymity.

8.5. Members were assured that we will present options for a support service later in due course.

Decision

8.6. Members noted the ongoing activities relating to Opening the Register.

9. Modernising Fertility law

9.1. The Director of Strategy and Corporate Affairs presented this item. Members were reminded that this piece of work started in 2020 and that the public consultation was now underway.

9.2. There has been widespread media and social media coverage and commentary. There has also been good engagement with professional and patient groups including stakeholders, experts, patients and interested individuals.

9.3. Members were informed that risks outlined in the report were still valid and that one major risk was not completing this work on time due to lack of capacity. We were however doing what we could to keep to the agreed timetable.

9.4. It was noted that once the consultation ended, the responses will be analysed and we plan to present recommendations to the July Authority meeting.

9.5. Members commented that the press coverage of this consultation was very encouraging and congratulated everybody involved.

9.6. A member commented that getting a wide range of views was very important and would we consider extending the consultation period if needed. The Director of Strategy and Corporate Affairs responded that this would be kept under review.

9.7. Members asked if we were confident that the timetable would not be impacted by other pressing priorities. The Director of Strategy and Corporate Affairs responded that a number of issues could impact our timetable, it was therefore under constant review.

- 9.8.** The Chair thanked all members for engaging with the process and noted that members would be fully involved in the recommendations.

Decision

- 9.9.** Members noted the progress to date on modernising fertility law.
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10. Any other business

- 10.1.** The Chair advised that Professor Dame Frances Ashcroft will be stepping down from the Authority due to health issues. As a member of SCAAC, she will be asked if she would like to remain on that committee as an expert adviser. The Authority wished Francis well and thanked her for her work to date.

- 10.2.** The next meeting will be on 17 May 2023.
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Chair's signature

I confirm this is a true and accurate record of the meeting.

Signature



Chair: Julia Chain

Date: 17 May 2023