

# HFEA Executive Licensing Panel Meeting

## 23 May 2013

Finsbury Tower, 103-105 Bunhill Row, London, EC1Y 8HF

### Minutes – Item 4

#### Centre 0067 – (St Mary’s Hospital) – Interim Inspection Report

Members of the Panel:	Committee Secretary:
Juliet Tizzard – Head of Policy and Communications (Chair)	Rebecca Loveys
Joanne Anton – Policy Manager	
Hannah Darby – Senior Policy Manager	

Declarations of Interest: members of the Panel declared that they had no conflicts of interest in relation to this item.

#### The Panel also had before it:

- HFEA Protocol for the Conduct of Meetings of Executive Licensing Panel
- 8th edition of the HFEA Code of Practice
- Human Fertilisation and Embryology Act 1990 (as amended)
- Decision trees for granting and renewing licences and considering requests to vary a licence (including the PGD decision tree)
- Guidance for members of Authority and Committees on the handling of conflicts of interest approved by the Authority on 21 January 2009.
- Guidance on periods for which new or renewed licences should be granted
- Standing Orders and Instrument of Delegation
- Indicative Sanctions Guidance
- HFEA Direction 0008 (where relevant), and any other relevant Directions issued by the Authority
- Guide to Licensing
- Compliance and Enforcement Policy
- Policy on Publication of Authority and Committee Papers

## **Consideration of Application**

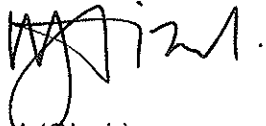
1. The Panel noted that an interim inspection took place on 31 January 2013, and a report was presented to the Executive Licensing Panel (ELP) on 26 April 2013. The Panel on that date adjourned its decision until more information was provided.
2. The Panel noted that, in relation to the critical area of non-compliance concerning the backlog of historic errors relating to donor registrations and/or treatments, the Inspectorate's update confirmed that as of 7 May 2013 the centre had no missing donor registrations. The Panel noted that the PR had been given an extended deadline for submitting a summary report of a review of register submission requirements.
3. The Panel noted that the Person Responsible (PR) had submitted further information shortly before the meeting and that the Inspectorate did not have sufficient time to assess the information submitted. The Panel made its own assessment and acknowledged that the backlog of historic errors had been resolved.
4. The Panel noted that the PR had included in the submission a summary report of a review of register submission requirements. The Panel asked the Inspectorate to return to the ELP should it be dissatisfied with the submitted report.
5. The Panel noted that the PR, in the submission, was satisfied that the centre's procedures for auditing the storage of cryopreserved material are robust. The Panel asked that the Inspectorate check the PR's submission and return to the Panel should it be dissatisfied with it.
6. The Panel noted that the centre's success rate improvement plan has yet to have a demonstrable impact on the centre's success rates and endorsed the Inspectorate's plan to continue monitoring this closely. The Panel expects to see improvement in success rates at the centre over the coming year.

## **Decision**

7. The Panel had regard to its decision tree. It was satisfied that there were no issues preventing the continuation of the licence.
8. The Panel endorsed the Inspectorate's plan to return to the ELP in April 2014 with an update on the centre's progress with regard to success rates.

9. The Panel endorsed the Inspectorate's recommendations and agreed to continue the centre's licence with no additional conditions.

Signed:

A handwritten signature in black ink, appearing to read 'JTizzard'.

Juliet Tizzard (Chair)

Date:

4 June 2013