

NOT FOR PUBLICATION

ADVISORY COMMITTEE ON THE NATIONAL BLOOD TRANSFUSION SERVICE

MINUTES OF THE NINTH MEETING HELD ON 10 APRIL 1984 AT THE DEPARTMENT OF HEALTH AND SOCIAL SECURITY, HANNIBAL HOUSE, ELEPHANT AND CASTLE.

Present:	Dr E L Harris	- Chairman
Members:	Dr I Fraser	- RTD, South Western RHA
	Dr H H Gunson	- Consultant Advisor, Member Central Blood Laboratories Authority
	Dr R S Lane	- Director, Blood Products Laboratory
	Mr T R Layzell	- RT, Wessex RHA
	Dr J A V Pritchard	- Welsh Office
	Dr K Rogers	- RTD South London Transfusion Centre (SE & SW Thames RHAs)
	Dr W Wagstaff	- RTD, Trent RHA
	Mr N Weaver	- DA, Barnet HA
Secretariat:	Dr A Smithies)	
	Mr A Williams)	- DHSS
	Mr S Green)	
Observers:	Dr A E Bell	- SHHD
	Dr G T M Lawson	- DHSS, Northern Ireland
	Mr D Harris	- DHSS

INTRODUCTIONS/APOLOGIES FOR ABSENCE

1. The Chairman welcomed Dr Rogers who had replaced Dr Darnborough as Divisional representative of RTDs, Dr Pritchard who was attending in place of Dr Ferguson-Lewis, and Mr Weaver who was attending his first meeting as representative of Health Authority Administrators. The Chairman also introduced the new joint secretariat of Dr Smithies and Mr Williams. Apologies had been received from Miss Blenkinsop (RNO, Northern RHA), Dr Cash (Scottish NBTS), Dr Paul Walker (RMO NE Thames RHA) and his deputy Dr David Wild (RMO SW Thames RHA). Dr Walker and Dr Wild had replaced Dr Rue and Professor Scott respectively as representatives of Regional Medical Officers.

MINUTES OF LAST MEETING AC(83)11

2. The minutes were agreed subject to an amendment to paragraph 15 which should now read:

"REDEVELOPMENT OF THE BLOOD PRODUCTS LABORATORY

Dr Lane reported that work on the redevelopment was on schedule and that process costs were under fast-tracking control methods. An increase in capital costs of equipment to produce consequential revenue savings were being explored; the CBLA Chairman would no doubt be discussing the redevelopment with Ministers in November."

MATTERS ARISING

3. Inter and Intra Regional Charging.

Mr Layzell reported that on behalf of the Advisory Committee and using money provided by DHSS, Price Waterhouse Associates had been commissioned to carry out a study on inter and intra-regional charging. The report had now been received and following discussion with Dr Gunson and DHSS (copies would be sent to RTDs and other interested parties) it was proposed to hold a seminar on the subject and to seek Ministers' approval to 3 regional trials.

4. The meeting agreed that the trials would provide important information on the operation of the CBLA on a commercial basis and recommended that the proposals be put to Ministers.

5. Stock Control and Record Keeping in RTCs and Hospital Blood Banks - AC(84)1.

Mr Williams reported that Ministers had accepted the Committee's advice and had agreed to the issue of the recommended guidance to the field. HC(84)7 had subsequently been issued in March 1984.

6. Handling Charges for the Supply of Blood and Blood Products to Non-NHS Hospitals - AC(84)2.

Mr Williams explained that Ministers had decided that itemised handling charges for the supply of blood and blood products to non-NHS hospitals should be introduced with effect from 1 April 1984, in line with the annual revision of NHS pay-bed charges (which now included an element, approximately 1%, for the supply of blood and blood products). However, lengthy consultation with the independent sector had resulted in RHAs being asked to introduce handling charges retrospectively from that date.

7. Dr Fraser pointed out that clarification was needed on the 'transport' element of the charges as some private hospitals were now demanding that blood be delivered by RTCs. It was agreed that finalised guidance should stress that the introduction of charges should not affect existing arrangements.

8. Dr Bell suggested that it may be helpful if private hospitals' bills to their patients could refer to "charges for supply" and not to "charges for blood". He reported that in Scotland supplies to private hospitals were made on an individual contractual basis with the Public Services Agency.

9. Dr Pritchard and Dr Lawson reported that Wales and N Ireland were following the DHSS line.

10. AIDS - AC(84)3.

Dr Smithies reported that by the end of March 1984 40 cases had been reported to the Communicable Disease Surveillance Centre (CDSC), Colindale of whom 22 had died. 33 of those reported were homosexual and 2 were haemophiliacs. The 6 month trial period of the leaflet "AIDS and how it concerns blood donors" was now complete and the survey of RTDs showed little adverse comment. DHSS now proposed to prepare, in consultation with RTDs, a revised version of the leaflet for submission to Ministers. Dr Rogers suggested that RTDs should adopt a more

aggressive approach to discourage donors from high risk groups from giving blood. The Committee recommended that, although the method of distribution during the trial period had been left to the discretion of RTDs, Ministers should now consider the issue of the revised leaflet with donor call up cards in all Regions.

11. Dr Gunson explained that he had discussed with Dr Galbraith of CDSC the possibilities of following up patients who may be blood donors and would be presenting proposed guidelines to RTDs.

12. Dr Harris assured the meeting that DHSS was in close liaison with the MRC, CBLA and HEC on the subject of AIDS. The latter organisation were themselves considering the production of an AIDS leaflet for distribution through STD clinics.

PLASMA SUPPLY TO THE BLOOD PRODUCTS LABORATORY - AC(84)4, AC(84)5.

13. Dr Gunson explained that in mid-1983 RTDs were confident of increasing the supply of plasma to BPL to a self-sufficiency level. However, it was evident from a recent survey of RTCs (summarised in AC(84)4) that, because of resource constraints within Regions, Directors were now less optimistic of attaining their targets. Indeed, through the pro-rata method of product distribution, some Regions whose demands for albumin were being met in full, may now find it more economical to purchase commercially produced Factor VIII than to invest heavily in plasma procurement. The position was of considerable concern to both the CBLA and DHSS and the Committee's views were invited on the best means of tackling the problem.

14. In discussion it was agreed that, given the Government's investment of £24m in BPL and the interest shown by Secretary of State in the redevelopment programme, the attention of the new NHS Management Board should be drawn to the situation. Dr Gunson was obtaining from RTDs an update of their predicted procurement levels.

REGIONAL PURCHASE OF COMMERCIAL BLOOD PRODUCTS

15. Mr Williams reported that, in accordance with the Committee's wishes, the Supply Council had been asked to canvass Health Authorities about their purchasing policies. The results of the survey were not yet available.

16. The Committee felt that since HAS practices varied widely the Supply Council survey would produce little meaningful information and recommended that DHSS should approach the National Institute for Biological Standards and Control about the availability of information on imported products.

DHA'S PURCHASE OF BLOOD PRODUCTS - AC(84)6

17. Dr Harris explained that the CBLA were anxious to make Health Authorities more aware of the quality and availability of the Authority's products. The Committee endorsed the need for the CBLA to disseminate information on its products. The Committee agreed that Dr Lane's proposal to write to the BMJ about the availability of albumin prepared by CBLA should, if published, be copied to Regional and District Pharmacists and Supplies Officers. Dr Rogers suggested that in addition RTDs should discuss purchasing policies with Regional Pharmacists.

ANY OTHER BUSINESS

18. Independent Blood Donor Panels.

Dr Gunson brought to the Committee's attention a BUPA internal memo which suggested that the Association may be moving towards the establishment of private donor panels.

19. Dr Harris explained that while private panels were not prohibited by law Ministers had frequently stated that they would discourage any moves to undermine the NBTS and its voluntary donor system. The Committee noted with concern BUPA's proposals and agreed that Ministers should be made aware of the situation and asked to take positive action.

NBTS Cost Statements.

20. Mr Layzell reported that it was hoped to introduce the revised cost statements from April 1985.

DATE OF NEXT MEETING

21. A provisional date of 16 October 1984 was set.

May 1984

DHSS