

John Hutton

From: Jill Taylor
PH6.6

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**BETTER BLOOD TRANSFUSION CONFERENCE
MONDAY 29 OCTOBER 2001 – HOTEL HILTON METROPOLE ,
EDGWARE ROAD LONDON**

Issue

1. You have previously agreed to give a closing speech to the above conference on Monday afternoon at 5.15pm. Following your speech the audience will be invited to a farewell drink which you may wish to stay for, other engagements permitting.
2. I have attached a draft with background briefing. Questions will not be taken following your speech.

Media

3. CMO has agreed that we should not open the conference to media, as those attending should be able to discuss the issue in the conference without the prospect of being quoted out of context in the media.
4. However, CMO has suggested that a summary of the conference should be drawn up afterwards and be made available to media or public who want to read it. This could include the speeches of the key note speakers and any relevant background information and could be made available on the internet after the event.

Arrival arrangements

5. These will be agreed with your office later this week.

Briefing

Briefing is attached as follows:

- a. Draft speech
- b. Background to the Conference
- c. Programme for the day & speakers
- d. Update note to the UK CMOs – outlining the events of the day

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BACKGROUND

B.

BETTER BLOOD TRANSFUSION CONFERENCE – 29 OCTOBER 2001

The four UK CMOs are hosting this second conference on Better Blood Transfusion on 29th of October to help set policy and best practice on blood transfusion. The first conference was held in July 1998 and opened by Margaret Jay, who then had policy responsibility for blood.

There remain huge variations in blood transfusion practice in the NHS and while blood is generally safe, it is only as safe as we can make it. Safety cannot be guaranteed. Hence it should only be used when absolutely necessary. The first conference resulted in a Health Service Circular issued in 1998, which helped strengthen the service. An audit of the impact of this circular will be presented at the Conference.

The conference will also mark the beginning of the new National Blood Transfusion Committee which will report to the CMO - this will oversee blood transfusion practice in the NHS, and through Regional Transfusion Committees provide a forum for the Hospital Transfusion Committees which we asked all hospitals to put in place as a result of the first conference and subsequent guidance to the NHS.

Better blood transfusion is an essential underlying part of the vCJD risk reduction strategy which up to now includes making all therapeutic blood products from imported plasma (from the USA) and leucodepletion (removal of the white cells) of the blood supply.

PROGRAMME

C.

Better Blood Transfusion 2nd National Conference Hilton Metropole Hotel, Edgware Road 29 October 2001

09.00. Registration and coffee

10.00. Welcome: Professor Liam Donaldson, Chief Medical Officer

10.10-10.45 Chief Medical Officers' Panel. Challenges for the Blood Services

10.45. Delivering Better Blood Services

Speaker 1: Martin Gorham, Chief Executive NBS.

Speaker 2: Mike Murphy –NBS Blood Transfusion Consultant.

Speaker 3: Cliff Morgan, National Blood Transfusion Committee

11.10. Better Blood Services for Patients, Informed Consent, Conserving Blood

Speaker 1: Sonja Stubbs, patient

Speaker 2: Sheila McLean –Professor in Law and Ethics of Medicine Glasgow

Speaker 3: Bill Bull –Jehovah's Witnesses

11.45. How Safe is Blood Transfusion, Making it Safer

Speaker 1: Prof Rory Shaw –National Patient Safety Agency

Speaker 2: Hannah Cohen –SHOT, Serious Hazards of Transfusion

Speaker 3: Tim Wallington –National Blood Service, Bristol.

12.10. Effectiveness of Blood Transfusion, National Comparative Audit

Speaker 1: Brian McClelland –Scottish National Blood Transfusion Service

Speaker 2: Mike Pearson –Royal College of Physicians.

12.30 Making Hospital Transfusion Committees work

Speaker 1: John Thompson –Consultant Vascular Surgeon.

Speaker 2: Sandra Gray –nurse practitioner in blood transfusion.

Speaker 3: Maurizio Marconi –Professor of Transfusion Medicine, Milan.

13.00 –14.00: Lunch

14.00 –15.30: Workshops, all with 15 minute initial brief by facilitator

1. The needs of people at risk of blood transfusion
2. Making blood transfusion safer
3. National blood transfusion protocols
4. Monitoring the use and effectiveness of blood transfusion
5. Strengthening the HTC, role of BBT Nurse Practitioner

15.45 –16.45 Priorities and Action –group reports: 1 hour

16.45 –17.15 Are these the right priorities –discussion. 2. Action to follow BBT2

17.15 Mr John Hutton, Minister of State for Health

17.25 Farewell drink

UPDATE FOR CMO

D.

BETTER BLOOD TRANSFUSION CONFERENCE 29 OCTOBER 2001

Venue/Time

1. This conference will take place on 29 October at the Hilton Metropole Hotel, Edgware Road, London between 10am and 5.30pm. Registration will be from 9am.

Pre-Meeting

2. I suggest that you meet at the venue for 9.30am for a short pre-meeting to run through the activity of the day. There is a separate room at the Hotel reserved for you throughout the day, which will be available from any time you arrive at the venue.

Attendees

3. There will be a total of about 140 participants. This includes those on the CMO panel and the speakers.

Welcome

4. The conference begins at 10am with a plenary session in **the Windsor suite in the basement**. Professor Donaldson will open the conference by welcoming the invited participants and introducing the panel, which he will chair. He will then run through the housekeeping arrangements for the day including the security arrangements, which will also be summarised in the delegates' packs. Professor Donaldson will also set out the purpose of the day and the order of events. Following on from this he will with the three other CMOs set the challenges for the blood services over the coming 3 years which the conference participants have been invited to shape. The outlines of the individual CMO contributions are given below

5. The other two panel members are **Martin Gorham Chief Executive of the National Blood Authority** representing the UK national blood services and **Martin Pflieger Deputy Auditor General of the National Audit Office**. Martin Pflieger will outline the NAO review of the National Blood Authority and the interest of the NAO in stimulating better blood transfusion. He will challenge Martin Gorham to outline what the NBA and the other National Blood Services plan to do to support Better Blood Transfusion. Both will make short power point presentations.

CMO Panel – Challenges for the Blood Service

Professor Donaldson

6. Professor Donaldson will set out the process which aims at gaining consensus on a range of blood service issues by the end of the day to support policy development over the coming 3 to 5 years. He will describe the

- role of the Panel – to challenge speakers and participants of about development and modernisation of the blood services

- role of the speakers – to provide a range of personal and expert perspectives on where blood services need to be going to ensure a first class service
- role of participants – to work together on establishing a direction of travel that is achievable over 3 to 5 years and publishing this to the NHS.

7. Timing is critical and all the speakers have been briefed on several occasions to keep to short sharp 5 minute presentations. The majority of speakers will speak to power point slides which we expect to have fully compiled by close of play Wednesday 24/10. We already have most of the presentations and they are certainly short. The Chair however will need to ensure that the speakers keep to time in a format not unlike the CMO summit on organ retention earlier this year. After each set of presentations the panel will challenge the speakers and invite questions from the invited participants on specific issues of interest.

8. The purpose of the day is to set out:

- What a new partnership between the blood services and the public might be
- Clearly that the safety of blood for transfusion cannot be guaranteed
- How we communicate risk openly and fully to patients needing transfusion
- What information patients need about the benefits and risks of transfusion

9. Priorities for the blood services for next 3 years and longer:

- Involving patients more fully in blood service development
- Looking at the service as a whole system – the transfusion chain
- Improving quality and safety – working with SHOT, NPSA, NICE and CHI
- Supporting clinicians in providing better and safer blood services
- Support networks – Hospital Regional and National Transfusion Committees

10. Dr Henrietta Campbell

Dr Campbell attended the first Better Blood Transfusion Conference in 1998. It might therefore be appropriate for her to challenges the participants to build on that work emphasising:

- Progress or lack of it since 1998.
- The additional information needed to drive quality -audits of the impact BBT
- The need to concentrate on ways of ensuring modern blood services
- The information clinicians need to manage patients who need blood
- The need for national transfusion guidelines/protocols
- Better audit and monitoring of transfusion practice.

11. Dr Mac Armstrong

- What should we now be saying about the safety (or otherwise) of blood.
- Relevance of the Burton judgement on HCV to other risks such as vCJD
- How do we convey the right message to public/patients/clinicians?
- Raising the profile of risk management in general
- Engage NHS senior management in Better and Safer Blood Transfusion.

12. Dr Ruth Hall

- Lessons from the Jehovah's Witnesses about conserving blood
- Dealing with error – reducing it, avoiding the circumstances

- The need to involve patients and the public
- The meaning of informed consent
- Transmissible infections and blood transfusion

13. Martin Pflger, NAO

- Why NAO examined NBS
- What NAO examined
- Conclusions of PAC & NAO
- Why NAO have worked with DH to set up BBT2
- NAO challenge to the NBS is to implement the recommendations

14. Martin Gorham, NBS

- How the blood service are implementing the PAC and NAO recommendations
- The NBS work on Better Blood Transfusion with hospitals
- Meeting the demand for blood
- Supporting clinicians whose patients need blood

Morning speakers

15. The speakers will appear as in the programme. Strictly 5 minutes each to enable questions from the floor after each set of presentations. The participants will have access to roving mikes and should be encouraged to work with the panel on bringing out issues that might need to find their way into the days priorities or that might need to be discussed in the afternoon workshops. A 'chinese board' will also be available for participants to post up additional comments and ideas. This will complement the dialogue box on the conference website at www.doh.gov.uk/bbt2

Lunch

16. Lunch will be on the **third floor** of the hotel from 1.00 until 2.00.

Workshops 14.00 –15.30

17. The workshop rooms are located off the dining room **on the third floor**. This will mean minimal delay in getting them started after lunch. There is no plenary session before them, and the way of working will be advised in each workshop by the facilitator. Facilitators and rapporteurs have already been chosen for the workshops and they will have outline handling briefs. The delegate packs will contain the workshop lists, which will also be posted up outside the individual rooms. There will be a maximum of 25 people in each workshop. The rapporteur will put the action points on a single power point slide to be presented at the plenary feedback session. **You may wish to participate in the workshops or attend to other business during this time, this decision can be made on the day.**

Plenary feed back session 15.45 –16.45

18. This will resume in the Windsor suite in the basement where the morning session was held. Each rapporteur will set out the five main action points for the blood services action over the coming 3 to 5 years as well as referring to a longer 'wish list'

on which other work shop members will be invited to elaborate. We have organised that each rapporteur will have a single power point slide to speak to and should again not exceed five minutes. This session will lead into the discussion on '*are these are right priorities and action to follow BBT2*' and the timeframe for action.

Close of conference – Rt Hon John Hutton MP

19. John Hutton has agreed to close the conference in a 10 minute speech:
Thanking CMOs and all participants for their hard work on developing priorities for blood over the next 3-5 years.
Reiterating the challenges for NHS blood services (war on terrorism?)
blood donation levels -debt of gratitude to donors
blood as a scarce resource -limited and life saving
demand -reducing unnecessary exposure to blood to a minimum
consent to treatment -patient expectations in 21th century
safety of blood -can never guarantee this and
vCJD -supporting the Govenment's public health risk reduction policy
Collaborating to definine blood service priorities for the NHS
strengthening hospital transfusion committees
developing the role of transfusion nurses
technology to make blood safer –screening systems and clinical protocols
Supporting NHS colleagues in developing first class blood services.
CMO commitment –the National Transfusion Committee
Ministerial commitment –risk reduction strategies
Priorities for policy defined by this initiative
Agree 3 to 5 year plan
Publish agreed policy in a Health Services Circular
Encourage high level NHS commitment
Thanking
the CMOs for their enthusiasm in this work and to the NAO and NBS members of the CMOs' panel.
the supporting organisations -UK Health Departments, UK blood services and the NAO -for getting it together
the speakers for their insights and energy
the participants for ensuring that a) that 'coal face' issues are addressed and b) the views of the experts are 'leavened' with reality and do-ability
finally the organisers –NBA, NAO DH colleagues and the BBT2 steering group.

Farewell drink:

20. This will follow John Hutton's speech at approximately 17.30