

1. Ms Dempster PS/PS(L)
2. Ms Goldhill APS/SS

From: M A Harris HS1

Date: 5 July 1988

cc. Ms Harper PS/MS(H)  
 Ms Westbrook PS/CE/NHSMBM  
 Mr Hart - Director of  
 Operations NHSMB  
 Mr Heppell  
 Dr Harris - DCMO  
 Mr Cashman HS  
 Mr Bardwell FA2  
 Mr Gregory - WO  
 Dr Pickles Med SEB  
 Dr Moore HS1A

#### FUTURE MANAGEMENT OF NBTS

1. Following a Management Services Study (copy attached - synopsis at pages (i) to (iii)), the NHSMB considered the above subject on 16 May and 4 July under MS(H)'s chairmanship.

2. The Board have rejected the idea of taking responsibility for this service away from Regions and giving it to a SHA. However, they were very clear that there was a supra regional dimension to the NBTS which needed firmer management. They concluded that a member of the Board (Mr Hart) be given personal responsibility for this subject and that there should be a full time National Director (plus a small staff) who would be responsible for implementing certain national objectives and tasks. At Annex A is a short paper outlining the proposals.

3. The key features are -

(a) Graham Hart should assume responsibility at NHSMB level for the national aspects of the BTS and the CBLA; working to him would be:

(b) a full time National Director and small supporting staff appointed to form a national unit to develop and implement a national plan for the BTS;

(c) the Unit (costing around £0.3 million) would be financed by top slicing the HCHS cash limit and would be attached to a host RHA for 'pay and rations' purposes;

(d) the priority tasks of the directorate would be to implement RTC/CBLA cross charging and develop a Management Information System;

(e) Graham Hart would chair a national committee which would include a Regional Chairman and regional officers, a representative of the Director NHS Wales, the National Director and the Chairman of CBLA. The Committee will be the means of co-ordinating and securing the commitment of RHAs, the Welsh Office and CBLA to a national policy and its implementation.

Whilst rejecting the SHA option the Board did not rule out returning to it should Regions not be willing to make these proposals work by giving up some of their present autonomy. The cross charging between CBLA and RHAs which features in these proposals is already being consulted upon separately and detailed proposals should emerge shortly.

4. Obviously the choice of a National Director will be a key element in the success or otherwise of these proposals. The NHSMB took the view that acceptability to the RTDs and to the clinician customers of the NBTS will be enhanced if the first Director (at least) is a respected figure from the transfusion world. Their preference would probably be for Dr Gunson RTD at North Western. He is respected by his peers, runs a good operation himself, and as the CMO's consultant adviser is used to dealing with the Department. (We have not as yet approached him or his Region).

5. The NHSMB will be discussing these proposals with Chairmen on 20 July. Subject to their views it is suggested that these changes are announced in a Written Answer before the House rises. A draft is at Annex B.

6. Welsh officials are content. A letter to Welsh Ministers is at Annex C seeking agreement to the terms of the PQ.

7. Is Secretary of State content that (subject to the views of Regional Chairmen) we proceed on this basis and that PS(L) writes to PUSS(WO) as at Annex C.

GRO-C

M A HARRIS  
A406/AFH

## NBTS: NATIONAL MANAGEMENT

### 1. Introduction

The NHS MB has agreed that:

- 1.1 The BTS should remain a RHA managed service.
- 1.2 Management arrangements are needed for its supra regional dimension.

### 2. Supra Regional Objectives

- 2.1 To implement a cost effective strategy for ensuring an adequate supply of blood to all Regions and establish targets.
- 2.2 To implement a cost effective strategy for the supply of plasma to the CBLA and establish targets.
- 2.3 To co-ordinate the activities of RTCs and CBLA.
- 2.4 To promote the efficiency of RTCs.

### 3. Specific Tasks

- 3.1 To draw up a national strategy for supply of blood and blood products.
- 3.2 To remove financial barriers to the matching of demand and supply for blood by implementing national ground rules for inter regional handling charges.
- 3.3 To remove financial barriers to the production of CBLA's plasma needs by implementing national transfer prices for plasma between RTCs and CBLA.
- 3.4 To remove financial barriers to matching of demand and supply for blood products by implementing transfer pricing between CBLA and RTCs for blood products.
- 3.5 To implement a common MIS for RTCs.
- 3.6 To promote the most cost effective practices within RTCs.
- 3.7 To identify and promote the most effective management arrangements for RTCs.

### 4. Management Arrangements

- 4.1 Operational responsibility for the NBTS (including CBLA) to be vested in the NHSMB's Director of Operations.
- 4.2 Implementation of the tasks at 3 above to be delegated to a full time National Director and a small supporting staff.

4.3 The National Director and his team will be attached to a host RHA.

4.4 The Director of Operations will regularly convene a small co-ordinating committee comprising a lead Regional Chairman (men), the Chairman of CBLA, and the National Director, to discuss matters affecting the national strategy and its implementation.

4.5 The National Director will regularly convene meetings of the Regional Transfusion Directors to discuss implementation of the national strategy and national operational policies.

4.6 An outline job description for the National Director is at Annex A.

4.7 Support for Ministers and the Accounting Officer on blood transfusion policy to continue to be provided from HS and Med (SEB) Divisions.

## 5. Financial Arrangements

5.1 The cost of the National Director and his unit to be a central charge on the HCHS cash limit.

5.2 The budget for staff, travel and accommodation of a NBTS Management Unit is estimated at £250,000 per annum in a full year (Annex B).

5.3 A small budget will be needed by the Director to facilitate the MIS and to pump-prime other key activities; perhaps around £0.1 million per annum;

5.4 Assuming the unit is operational by 1 October 1988 the cost in 1988/9 will be perhaps £125,000 for the unit and perhaps up to £50,000 for consultancy fees on the MIS ie £175,000.

National Director: Outline Job Description

1. Reports to the Director of Operations NHSMB.
2. Is supported by a senior manager (Unit GM level), Senior Admin, and General Admin Assistant and personal secretary.
3. Will be formally employed by [            ] RHA and accommodated by them.
4. Will draw up and implement a national plan for the supply of blood and of plasma for CBLA.
5. Will co-ordinate the activities of RTCs and CBLA to this end.
6. Will meet regularly with RTDs and CBLA Directors to promote coordination and implementation of the plan.
7. Will oversee the implementation of a MIS for the NBTS and be responsible for its development budget.
8. Will review internal management arrangements for RTCs and recommend changes.
9. Will identify and promote the use of the most cost effective policies within RTCs.

## Budget Estimate for NBTS Directorate

	£/p.a.
1. Directorate Costs	
1.1. <u>Salaries</u>	
National Director : (Senior Consultant + 'A' award)	GRO-C
Senior Officer	
Senior Administrator	
General Administrator	
Personal Secretary	
+ staff costs 20%	
	£140,000
1.2. Travel & Subsistence	30,000
1.3. Accommodation Costs/phones	60,000
1.4. General expenses	20,000
	£250,000
2. Pumppriming Activities	
2.1 MIS development costs	100,000
3. Total full year cost	350,000

DRAFT

To ask the Secretary of State for Social Services whether he has completed his consideration of the NHS Management Consultancy Services Report on the organisation of the National Blood Transfusion Service when he will publish the report, and if he will make a statement.

SUGGESTED ANSWER

Following consideration of the report by the NHS Management Board, I have decided that new management arrangements are needed for the supra regional and national dimension of the National Blood Transfusion Service (NBTS).

I therefore intend that operational responsibility at the national level for the NBTS and the Central Blood Laboratories Authority (CBLA) will be exercised on behalf of the Health Ministers for England and Wales by the NHS Management Board and undertaken by its Director of Operations, in consultation in respect of Wales with the Director NHS Wales. Day to day implementation of the national strategy will be delegated to a new National Director of the NBTS and a small supporting staff.

The key objectives will be:

- a) to implement a cost effective strategy for ensuring an adequate supply of blood throughout England and Wales;
- b) to implement a cost effective strategy for the supply of plasma to the blood products laboratory of the CBLA;
- c) to co-ordinate the activities of the NBTS and the CBLA;
- d) to promote the efficiency of the NBTS

In implementing the objectives at a) and b) a priority task will be to remove financial disincentives by having a national system of processing and handling charges both between transfusion centres and between them and CBLA. No charges will be made, of course, for freely donated blood.

The appointment of the National Director will be announced later.

I have arranged for copies of the Report to be placed in the Library.



DRAFT

Ian Grist Esq MP

#### NATIONAL BLOOD TRANSFUSION SERVICE

You will be aware of the report prepared by NHS Management Consultancy Services on the organisation of the NBTS. This has been the subject of consideration here by the NHS Management Board and their advice has been accepted by John Moore.

We have decided, at least for the time being, that the blood transfusion service in England should remain a Regionally managed service, but that management arrangements should be introduced for the supra-regional/national dimension to the service.

Our proposals are described in the attached paper. In essence the NHS Management Board, through its Director of Operations, will provide the national focus. The day to day implementation of the agreed strategy will be undertaken by a National Director and a small supporting staff. To gain the acceptance of the medical directors of the transfusion centres, we propose that the first National Director should be recruited from their ranks. We propose Dr Harold Gunson, director of the North Western (Manchester) transfusion centre. He runs an efficient centre himself and because he is the CMO's Consultant Adviser, he is aware of Departmental and Ministerial requirements.

As you know the South Wales centre participates fully as part of the NBTS and is served by the CBLA, whilst North Wales is in fact supplied by the Mersey Regional Transfusion Centre. I hope that you will be willing for the South Wales Centre to form part of the new national arrangements, including the cross charging proposals. For this purpose I would suggest that we announce that the NHS Management Board is acting on behalf of both Welsh and English Health Ministers. We will, in addition, ensure that the Welsh Office is represented on the proposed co-ordinating committee which the Director of Operations will convene.

I attach a proposed written answer announcing these changes which we would want to lay before the recess, and would be grateful for your agreement.