Ailsa Wight

27/09/2004 14:21

To: rowena jecock
cc: Gerard Hetherington/TRRO-PERFC/DOH/GB, david harper
cc:
Subject: Re: plasma products patient notification and CJD Incidents Panel webs ite

Rowena
I spoke to David today, following Siobhan's request of 15 September to him about finalising publication of the CJDIP summary and annual report.
David is happy to proceed as suggested in my note below, so can I ask you just to confirm with HPA, on your return, the best form of footnote wording please?
Thanks

Dr Ailsa Wight
Head of Programme, General Health Protection,
Standards and Quality Group
640 Skipton House
GRO-C
----- Forwarded by Ailsa Wight/PH6/DOH/GB on 27/09/2004 14:21 -----

Ailsa Wight

10/09/2004 11:23

To: "CDSC - Janecek, Helen" <Helen.Janecek@ GRO-C
cc: "CDSC - Molesworth, Anna" <Anna.Molesworth@ GRO-C
Carole Fry/PH6/DOH/GB@GRO-C Noel.Gill@ GRO-C Ed Davis/PH2/DOH/GB, Rowena Jecock/PH6/DOH/GB, gerard hetherington
Subject: Re: plasma products patient notification and CJD Incidents Panel webs ite

Helen et al
Apologies for the delay.
It turns out that what concerned CMO was the need for a bit of context around the single use instrument references in the documents.
He fully appreciates that they are the Panel's reports, and we wondered therefore if the simplest way of dealing with this was just to put a footnote in the relevant sections (the ones I recall are para 2 of the Annual Report, and references to laryngos and endoscopes in the public summary, but there may be others) to the effect that
'the Department of Health has referred these matters for evaluation by NICE' .
Please can you liaise with Rowena on the best form of wording (she's not here today but a phonecall on Monday should do it).
Once that is done they can go on the website.
Thanks
Ails

Dr Ailsa Wight
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"CDSC - Janecek, Helen" <Helen.Janecek@ GRO-C >

"CDSC - Janecek, Helen"

To: "Don Jeffries (E-mail)" <d.j.jeffries@ GRO-C

Siobhan Jones
15/09/2004 15:58

To: David Harper/PH5/DOH/GB@GRO-C
cc: Gerard Hetherington, Ailsa Wight/PH6/DOH/GB@GRO-C Ed Davis/PH2/DOH/GB@GRO-C Rowena Jecock, Carole Fry/PH6/DOH/GB@GRO-C
Subject: CJDIP ANNUAL REPORT AND PUBLIC SUMMARY

David,

I know you discussed this with CMO in Copenhagen and discussed how this could be taken forward. CMO has since indicated that he would like you to take the final decision about whether the reports should be published. If you are content, I would be grateful if you would contact Helen Janecek at the HPA to confirm, or I can let her know.

You should also be aware that there has been some media interest - James Meikle from the Guardian newspaper has apparently been asking about when the next CJD Incidents Panel documents are being published on the Internet.

Many thanks for your continued help with this,
Siobhan

Siobhan Jones
Assistant Private Secretary
to the Chief Medical Officer
GTN GRO-C

Please note that my new e-mail address is siobhan.jones@ GRO-C .
----- Forwarded by Siobhan Jones/PR-OFF/DOH/GB on 13/09/2004 17:36 -----

Gerard Hetherington
03/09/2004 14:37

To: Siobhan Jones/PR-OFF/DOH/GB GRO-C
cc: David Harper/PH5/DOH/GB GRO-C Ailsa Wight/PH6/DOH/GB GRO-C Ed Davis/PH2/DOH/GB GRO-C Rowena Jecock/PH6/DOH/GB GRO-C Carole Fry/PH6/DOH/GB GRO-C
bcc:
Subject: CJDIP ANNUAL REPORT AND PUBLIC SUMMARY

Siobhan

We discussed CMO's comments on the CJD Incidents Panel documents. I said I would get back to you after making further checks with colleagues in HP.

At David Harper's request Ailsa Wight and I have reviewed CMO's original comments, Ed Davis's briefing on these, Sandrah's further comments and Ed's further briefing.

The state of play is summarised below:

CJDIP Annual report

para 2.2
- needs contextual points on single use instruments.
This is the Panel's document, but DH can respond positively to any queries about context including information on subsequent requests for work by NICE.

para 4.1
- statement needed of risk from blood, tissue and other organs.
On blood we can suggest link on website to DNV risk assessment. Tissue and other organs will be addressed by sub-groups of MSBT which meet on 21 and 22 Sept and will report back to MBST in October.

- is action needed on instrument traceability?
We have requested an update from NHS Estates who have been pursuing this issue.

How will we measure this long term?
1) Controls Assurance 2) Registration under the MDD c) Inspection by the HC

para 4.4
- has everyone been contacted?
Ongoing (see attached sheet).
How many people are working on this? Is it too complicated?
Main limiting factor is operating theatre tracking systems rather than complexity.

para 4.5
-are the numbers consistent with DH action in Dec 2003?
Yes
What is the proof that they are?
HPA CJD section has checked with DH

para 5.1
- action needed on brain biopsies?
Guidance issued in May 2004.

para 5.6
what action on donated tissues and organ?.
MSBT sub-groups to meet on 21 and 22 Sept and will report back to MBST in October.

para 6.1
- have all recommendations of Kirkup report been implemented?
Action taken where necessary (7 & 8 referred to observations on aspects of information handling by Comms and others and did not include clear actions to implement)
Recommendation 4 -is requirement for training of staff doing manual cleaning in place?
Yes. this is subject to audit and inspection
Recommendation 5 when will purchasing spec be completed, will David Harper/CMO see this?
The spec is currently out for comment and is due for publication by NHS Estates in the autumn. Such a technical document would not normally be seen by senior DH officials.
Recommendation 6 - how will lessons from Middlesbrough site (now closed) be incorporated?
Main lesson is to adopt a clear system and use it properly. Monitoring will be though normal performance management and HC inspection.

para 6.2

have all actions on framework been taken (except database)?
HPA have produced communications strategy but have not yet established expert group to manage the database issues. DH has reminded HPA and we will also be asking HPA to consider communications exercise about the ethics of database for non-contactable patients.

Public summary

3.3 Laryngeal masks
Is this affected by recent NICE guidance (did NICE guidance inadvertently cancel DCMO guidance on masks?)
No. ACDP TSE guidance remains in force. NICE have also been asked to look at laryngoscopes

3.4 Framework
Need Ministerial approval.
Ministerial agreement has been obtained and the framework is now on the website.

5. Incidents
Does NBS flag patients and exclude them from giving blood?
NBS does flag patients who are excluded. No such patient has yet turned up to donate. These patients should be advised accordingly (see above on 4.4 in annual report)

dental notification
Is the procedure described up and running?
Dental procedures are included, but these are considered low risk. HPA unaware of any problems

instruments used on lymphoid tissues
Is there a conflict in guidance to the NHS from ACDP TSE WG and the CJDIP?
CJDIP has not issued guidance to the NHS. Panel is ultra-precautionary in recommending quarantine until diagnosis is confirmed. This will be reviewed by ACDP TSE WG.

9.1 endoscopy
request to NICE?
Letter has been sent to NICE, but work has not been concluded. Further research work to follow up the EOR risk assessment is under consideration. (The ACDP TSE WG has concluded that endoscopy without biopsy in at risk patients is not a risk).

9.2 organs and tissues
policy needs to be clearer
MSBT sub groups to meet on 21 and 22 Sept and will report back to MBST in October.

11 vCJD blood incident
what action is being patient notification and endoscopes?
Patient notification is carried out by HPA in accordance with Panel's framework guidance. Endoscopes considered by ACDP WG in June and also by NICE

contactable database
When will CJDIP chair meet CMOs?

DH have met HPA who are taking this forward. the CMOs have asked for an update at their October meeting. A meeting between the CJDIP and the CMOs is not thought necessary at this stage.

My conclusion is that we are taking action on all of the points raised in the annual report or public summary and that we should be able to deal with any questions which arise from their publication.

Gerard Hetherington
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