



University of Cambridge
DEPARTMENT OF HAEMATOLOGY
MRC Centre, Hills Road, Cambridge CB2 2QH

Appendix II

Head of Department: Professor R.W. Carrell

Tel: Direct

GRO-C
GRO-C

13 January 1993

Mr R Jefford
Director of Administration
Cambridge Health Authority
District Headquarters
Fulbourn Hospital
Cambridge CB1 5EF

Dear Mr Jefford

This is written, in reply to your letter of 18 December, to comment on Professor Allain's performance in his post as Director of the Regional Transfusion Centre. In doing so, it is appropriate first to consider the reasons for the development of the academic section of Transfusion Medicine and for the linking of the Professorship with the Directorship of the Centre.

By 1990, it was realised that the impending retirement of the three senior consultant staff of the Cambridge BTS would provide an opportunity to reorganise a service which, although at the time competent, lacked vitality and had reached a position of low morale. In particular, blood transfusion practice, which was once a largely routine matter, was now one of the faster-moving areas of medical science and it was important that the Cambridge Centre should contribute to the establishment of the new approaches to practice that accompanied these scientific developments.

To achieve this, there was agreement by both the University and the Regional Health Authority that an academic division of Transfusion Medicine should be established within the BTS. This would assure the recruitment of first-class people in an environment that would stimulate excellence in research and training as well as in service. A key appointment was that of the Professor: if the proposal were to succeed it was necessary to appoint someone with both experience in transfusion practice and a record of productivity in research and innovation. Professor Allain was appointed after a long and thorough search which considered candidates from throughout the world as well as in the UK.

The eighteen months since Professor Allain's appointment in April 1991 has been a period of profound change for the Centre. Despite his external problems, Professor Allain has completed a full reorganisation of the service into seven independent functional units, each headed by a Consultant or Scientific Officer. The result is to give everyone involved a greater sense of responsibility and initiative, and to make better use of individual talents. Regular meetings ensure communication between sections and allow full review of quality control procedures and indices. This has produced a much more responsive service to donors as well as to doctors and their patients. Telephone enquiries once almost reflexly met with a 'No' are now answered with a 'Yes', albeit a 'Yes - but'. The appreciation of the Regional haematologists for the improved service was shown not only by the unanimous motion of confidence in September but even more so by the ovation given Professor Allain on his return from the trial in Paris at the Regional meeting in Bury in November.

Since his appointment, Professor Allain has undertaken the development of new areas of activity including the creation of a Regional Tissue Bank (bone, heart valve, bone marrow) and the development of innovative approaches to diagnostic antibody production based on the MRC Unit of Dr Hughes-Jones. There have been major structural changes in the Centre, with new laboratories not only for these groups but also for other research and development in blood products, immunohaematology and diagnostic virology - four new post-doctoral positions have been established.

The Cambridge Centre has made a leading contribution at the national level to the diagnosis of hepatitis C and the prevention of its dissemination by transfusion. Professor Allain's expertise is much appreciated both locally by the hepatologists and transplant surgeons and also nationally by the specialist virologists.

For the longer term, discussions and staff exchanges are occurring with the North-East Thames Regional Transfusion Centre which will provide a basis for a possible rationalisation of production and development between the two Regions. There are other plans also in view and in particular the redevelopment of the TAC (antibody production unit) as a centre for biotechnological transfusion reagent production under Dr Helen Lee, who will take up her post in April. ~? did not - Main' up

Professor Allain has the full support and confidence of his haematological colleagues, of the Cambridge BTS executive committee, and (as numerous letters which I will forward to the Committee show) of his national and international colleagues in transfusion medicine. He is a man of outstanding knowledge in his field, with vision and perception, both in research and as a clinician.

I fully endorse the numerous comments in the supporting letters as to his concern and thoughtfulness for patients. He has complete integrity and I have full confidence in his ability to develop and direct the clinical service for the benefit not only of the people of East Anglia but, in a wider sense, of the UK as a whole. In conclusion, I strongly support the reinstatement of Professor Allain to his position as RTC Director and I very much look forward to the Centre regaining momentum from the present state of limbo.

Yours sincerely

GRO-C

R W Carrell

Encs: Letters of support (i) International
(ii) UK