

HSIA CONTRIBUTION TO BRIEF FOR SOFS' DINNER
WITH LORD ROBENS / DR BALFOUR-LYNN 24.5.82

PRIVATE HOSPITAL BLOOD BANKS

1. We understand that the AMI Group has experienced some difficulty in obtaining sufficient stocks of blood since it parted company with Dr Mark Patterson following press reports about the misuse of blood at the National Heart Hospital. The Group is also concerned about the possibility of handling charges being introduced to recover in full the cost incurred by the NHTS in supplying blood to private hospitals. Lord Robens may suggest that unless supplies improve and/or if charges are introduced, the AMI Group will set up its own private donor panel or will import blood. The supply of blood to private hospitals is on the agenda for MS(H)'s formal meeting with the Joint Liaison Committee for Independent Health Care on 27 May.

BLOOD SUPPLY

The NHTS supplies blood to private hospitals on demand and without charge. The only deciding factor is the clinical need for the blood. The problem for private hospitals is that they, like NHS hospitals, occasionally have to wait some days for certain types of blood to be collected in the quantities required. By and large the NHTS copes with all demands placed upon it. The number of donations continues to increase and the need to service private hospitals is taken into account in planning Regions' blood collection. Special campaigns have been organised to attract more donors in the London area. However, there can be no question of the private sector being given priority for blood supplies - this would be contrary to the 1977 NHS Act.

CHARGES

A submission on the introduction of handling charges (£18.00 for a unit of whole blood; £10.00 for red cell concentrate) is currently before Ministers. We understand that MS(H) has decided that no announcement should be made until after he has heard at first hand the Joint Liaison Committee's objections.

PRIVATE PANELS

There is nothing in law which prohibits the establishment of paid blood donor panels per se. However, blood is a 'medicinal product' for the purposes of the Medicines Act. Thus anyone collecting, selling or supplying (even if without charge) blood to patients or to hospitals in the UK requires a product licence and a manufacturer's licence. Before such licences could be granted, the Department would have to be satisfied with the arrangements for collection - screening of donors, testing etc. Similarly the premises, equipment, record-keeping arrangements etc would have to be of acceptable standards. If the Medicines Inspectorate were satisfied on these counts, the licences could not be withheld. Matters such as the unwelcome 'commercialisation' of blood could not be taken into account.

In response to a written PQ in August 1980, the then MS(H) replied:

"I wish to preserve the voluntary blood donor system in this country.
I do not intend to introduce payments to donors and if it were necessary
I should be prepared to discourage private companies from offering them."

The implicit threat of "necessary action" has been sufficient to deter several potential entrepreneurs who have sought informal advice on the position regarding the private donor panels. However, in the case of someone who was determined enough and had met the necessary Medicines Act requirements,

primary legislation would be required to obtain the powers to prevent the setting up of a private blood collection agency.

Private donor panels and the importation of blood offer several advantages for private hospitals, particularly if they can be guaranteed supply of particular types at specific times. They would also be able to pass on the costs to the patient together with a margin for profit. (It is an understood condition of supply by the NBTS that no profit is made from the blood which is donated to it.) There is no doubt that a private donor panel, presumably offering payments to donors, could undermine the voluntary blood donations system in this country and Secretary of State may wish to take the opportunity to discourage AMI. Subject to the problems cited by the Joint Liaison Committee at its meeting with MS(H) on 27 May, MS(H) may offer to arrange a meeting between representatives of the private sector and Transfusion Directors. Because of the problems concerning the Edgware Transfusion Centre which services AMI's London hospitals, we would advise strongly against offering to arrange a meeting between AMI and its main supplier (Edgware).