

HFB3/19

Reference

Mr A Williams  
HS1A

BPL - SUPPLY OF BLOOD PRODUCTS TO NHS

1. At the meeting of the advisory committee on the NBTS on 10 April, I was taken aback to learn that the historical pro rata arrangements for the supply of plasma to BPL and blood products to the NHS are apparently still being rigidly adhered to in some cases to the extent that RTDs are buying in products freely available from BPL. It would appear that this is also happening at Hammersmith where an adjustment to their cash limit was recently agreed to allow them to buy in blood products because they do not qualify for a pro rata allocation.
2. It occurs to me that BPL may fear that if the pro rata system is weakened, then the incentive for an RTC to increase plasma supply might be taken away. This is not sufficient justification, however, for keeping back stocks of blood products and forcing health authorities into unnecessary expenditure. As we also learned, some RHAs have taken the view that it is cheaper to buy in commercial products than to increase plasma supply.
3. The question of plasma procurement policy was discussed, in the wrong forum we thought, at the meeting we attended on the morning of 10 April convened to consider the Price Waterhouse draft report on cross-charging for plasma and blood products within the NHS. HS1 may feel, as BPL clearly do, that this is now a problem which requires urgent attention. Meanwhile, the NBTS should be told that, while there is no objection to the continuation of the pro rata system where BPL products are in short supply, RTDs should check with BP before turning to a commercial source for products outside their quota but which BPL may nevertheless be able to supply, for the time being free of charge.

13 April 1984

cc  
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