



15th August 1996

Dr D Winfield
Chairman of SAC on Haematology of CPA
Consultant Haematologist
Royal Hallamshire Hospital
Glossop Road
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Dear Dr Winfield

Re: CPA for Haematology Laboratories

During the run up period to the establishment of the National Blood Authority (NBA) an extensive analysis of the national blood transfusion services in England and Wales and the services they provided to hospitals was undertaken. One of the key objectives for the National Blood Service (NBS) to come out of this study was the identified need to promote best transfusion medicine practice and to more actively encourage appropriate use of blood and blood components. This objective is difficult to achieve if hospitals do not have active hospital transfusion committees. Even where there is a hospital transfusion committee if there is no NBS representation on this committee it is difficult to offer our advice and expertise and if necessary our assistance to undertake clinical audits of blood and blood components at a local or regional level.

In the interests of good hospital laboratory transfusion medicine practice I would therefore like to propose through yourself, as Chairman of the Haematology SAC of CPA, that serious consideration is given to recommending that the existence of a hospital transfusion committee, preferably with invited representation of an NBS Consultant in Transfusion Medicine, should become part of the accreditation scheme.

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You may be interested to know that at the time of our data collection exercise, 2 years ago, less than 50% of the 380 hospitals in England and Wales had transfusion committees and even less than 50% of these committees had NBS consultant representation. This has improved a little over the last 2 years and some very good clinical audits have been conducted here and there throughout the country, e.g. on the use of Clinical FFP. A lot more could be done provided there is a satisfactory means of heightening clinicians awareness to the problems of inappropriate use of blood and blood components. The best identified means to date is by using multidisciplinary hospital transfusion committees to identify what are their particular local problems and how best to tackle them, audit, education, guidelines, etc. etc.

I hope therefore you will give this suggestion serious consideration at your next meeting and I would be very interested to hear your views on the subject.

Best wishes.

Yours sincerely,

GRO-C

Dr E Angela E Robinson
Medical Director