

NATIONAL BLOOD TRANSFUSION SERVICE

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HHG/LB

20th May 1991

Professor J.D. Cash,
National Medical and Scientific Director,
Scottish NBTS,
Headquarters Medical Unit,
Livingstone House,
39 Cowgate,
EDINBURGH. EH1 1JR

Dear John,

UKBTS MICROBIOLOGICAL DONATION TESTING

Thank you for your letter of 13th May 1991.

I well recall your efforts of a year or two ago to establish a ministerial group to control the introduction of additional donor testing. This led to the formation of the ACVSB.

With respect to the introduction of anti-HCV tests, the Minister was advised in January 1991 that this test should be introduced at the first practical time and agreed that action should be taken on this basis. As you know the initial date proposed was 1st July 1991 and this, for reasons which became apparent later, was revised to on or about 1st September 1991. The rest is history.

The problem has been that the executive action by the DH to inform RHAs of the Minister's decision has been inordinately delayed and the Executive Letter is only now being sent to the Regional General Managers.

I agree that something needs to be done to ensure that all RTCs act in concordance in these important matters. Both the ALT affair, as a result of which my actions were criticised and are still causing repercussions, and the most recent incident, have presented me with considerable difficulties. Also, I can tell you that whilst these two instances are ones which have come to your notice because of their magnitude there have been many other occasions where RTCs have "gone it alone" which I have had to try and resolve and the whole business is becoming very frustrating.

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As you know, I submitted a paper last year to DH supporting the arguments for a centrally managed NBTS and this was rejected. However, more recent developments have indicated that consideration may now be appropriate for a revised organisation of the NBTS. We have been asked to provide an argued case with outline costings to enable central control of NBTS functions. To this end the Directorate have engaged Ernst and Young to assist in preparing this and Roger and I are currently having discussions with them. I do not know yet what will emerge from these proposals since they will have to take account of the Government's current philosophy with respect to the management of the NHS in England and Wales.

I think that DH does recognise that something will have to be done since if no action is taken, the Directorate will "wither on the vine" or perhaps more abruptly if I decide, after Roger's secondment ends in January 1992, that I am no longer able to continue in a job for which I am having less and less authority to accomplish what is required.

However, I am approaching the immediate future with a cautious optimism and I am gratified, that with one exception, there is solid support within the NBTS for changes to be made without delay.

With kind regards.

Yours sincerely,

GRO-C

H.H. GUNSON,
National Director

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