

Ref: Scottish Transfusion Directors' Meeting 13.9.83

Telephoned survey of England and Wales Transfusion Centres regarding use of prisons as a source of donor blood.

TOOTING: Has held no sessions in prisons since 1979.

EDGWARE: Prison sessions were stopped in Dr. Cleghorn's time. The Centre reconsidered 1 year ago, and decided against.

BRENTWOOD: The Region has only one prison, too small to be used for donor sessions, and in any case the Centre would not look for prison sessions now.

They do hold a session in a Military Corrective, but the donors are all fit young men, well vetted by their supervisors.

WESSEX: It is several years since they stopped using the Isle of Wight prisons because  
1) of increasing medical problems among prisoners, particularly related to drugs;  
2) the prisons cancelled sessions at 2-3 hours notice because of prison riots, demonstrations, etc.

At present, they use Winchester prison, a short-stay prison for non-violent prisoners, once a year, but plan to withdraw this session in the near future.

BRISTOL: Have been holding prison sessions and will stop at the end of 1983. The reason they have given is the higher incidence of hepatitis.

CAMBRIDGE: Prisons were not used as a donor source for many years, then in 1982, during an acute blood shortage, they held a session at an "Open" prison, but discovered many inmates were drug addicts (using heroin, LSD, etc.) and have not gone back.

The policy is not to use prisons, but reserve the right to do so in emergency.

OXFORD: Has been easing away from donor sessions for some time, and after the discussion at the Cambridge meeting in Spring 1983, discontinued them.

CARDIFF: Uses Cardiff prison, and is actively considering whether and when to stop.

BIRMINGHAM: Has discontinued using prisons this year, partly as a consequence of discussion at the Spring Cambridge meeting. They did get help from prison officers with regard to vetting donors.

LIVERPOOL: They have several large prisons (Walton, Risley, Moss Side) and are concerned that there is no preselection of donors for prison sessions, therefore, a number of medical problems to look out for, and they have a noticeably higher incidence of HB<sub>s</sub>Ag positive donors from them.

They have been moving slowly, because of concern that they may be short of blood over Christmas and holiday times, but are phasing prison sessions out.

LEEDS:

Dr. Derrick Tovey is different.

The Region has large prisons at Wakefield, Leeds, and Hull.

They tried to withdraw prison sessions, and got a very active response from the prisons, which asked that the sessions should continue.

The session staff get help from Prison staff to exclude volunteers who are medically unsuitable. Dr. Tovey received a letter from a prisoner, asking reassurance that if an abnormal result was obtained on donation testing the prison donor would be informed. The prisoner considered this to be a valuable service performed by B.T.S.

NEWCASTLE:

Long ago stopped holding sessions in Durham and Northallerton, but continued to use an "Open" prison in West Cumberland, which housed "civil crime" prisoners (bigamy, fraud, etc.).

Latterly they had noticed an increase in incidence of Hepatitis B markers and discovered that prisoners from Walton Jail (Liverpool) were being sent there for their pre-release 6 months.

This session has now been dropped, so that Newcastle now holds no prison sessions.

SHEFFIELD &  
MANCHESTER:

I did not approach these two Centres for information, anticipating that Dr. Gunson and Dr. Wagstaff would be at the SRTD meeting, to speak for their Centres.

MANCHESTER:

Reputedly, in the past, never used prison sessions for the supply of fresh blood and products: the blood was put to plasma.