

NATIONAL BLOOD AUTHORITY

Minutes of the Forty-first Meeting of the National Blood Authority held on Thursday 24 July 1997 at 9.30am at Oak House, Watford

PRESENT: Sir Colin Walker
Mr J F Adey
Mr D Allison
Mr W L Banks
Mrs J M Gubbins
Dr E A E Robinson
Mr B J Savery

IN ATTENDANCE: Sir Keith Peters
Miss C Corrigan (part only)
Miss J Minifie

97/28 APOLOGIES AND ANNOUNCEMENTS

Apologies had been received from Prof W G van Aken.

Miss Corrigan said that David Hewlett had been appointed on 23 July as Head of the Hospital Development Unit and would be based at Wellington House, SE1. Dr Mike McGovern, a haematologist, had been appointed as Senior Medical Officer and was also based at Wellington House. The Chairman asked Miss Corrigan to pass on an invitation to them to visit us as soon as they wished. Miss Corrigan would also be moving to Wellington House.

Action: CC

97/29 MINUTES OF THE PREVIOUS MEETING AND MATTERS ARISING

The minutes of the previous meeting were agreed and matters arising were as follows:

Special Safety Session

The Board had found the session on Safety useful. They requested future sessions on (i) achievements against reorganisational plans and (ii) future strategy.

Purchasing Contracts

Mr Adey and Mrs Gubbins would look at the matter of contracts for blood packs and test kits.

HIV Incident in North West

Dr Robinson said, based on the information she had received, it appeared that both surviving patients were applying to the special government fund and were not apparently intending to pursue litigation.

97/30 **CHIEF EXECUTIVE'S REPORT**

Blood Collection

Since the last meeting, stock levels had decreased to about 18,000. A £1m advertising campaign, funded by the DoH, had commenced on 22 July and would run until March with the theme "Do something amazing today". Early signs were encouraging.

Liverpool

Liverpool MPs and the unions, particularly MSF, had been lobbying the Minister and now the Secretary of State. A submission on behalf of the NBS had been put forward and there was currently a meeting taking place between the Minister and senior officials.

The Chairman had offered to see the Minister or the Secretary of State as appropriate.

The unions had suggested a compromise solution of splitting processing and testing. This had never been contemplated on such a large scale in the country before. Dr Robinson said it would not be possible to guarantee the safety and security of blood supplies to the Liverpool area if the changes at Liverpool were delayed and Mr Savery added that any delay would be seriously detrimental to the IT programme which was currently proceeding on time and to budget.

National Strategy Meeting

A meeting of senior zonal/BPL/HQ managers to discuss progress to date on the 35 initiatives and future strategy was taking place later on 24 July and 25 July.

BPL

Agreement to the product licence variation in respect of intramuscular immunoglobulin, referred to in the report (97/30), was received on 24 July.

Visits

Mr Adey and the Chairman had been visited by the new Chief Executive of the Scottish National Transfusion Service, Angus Macmillan Douglas, and his Medical Director, Professor Ian Franklin. Mr Adey believed that the two organisations would work together where appropriate but were very separate in political terms.

Mr Adey and Mr Savery had visited Colin Reeves, head of Finance in the NHS Executive.

Dr Graham Winyard would be visiting us in October.

97/31 **MONOCLONAL ANTI-D - CASE FOR INVESTMENT APPROVAL**

This was presented by Richard Walker and Gaynor Fryers and Robert Robinson and Roy Lucas of KPMG. It was noted that the consultants had been appointed to provide assistance in preparing the business case to comply with the NHSE Capital Investment Manual. The Board agreed to the proposals in principle and asked Mr

Adey to request BPL to have initial discussions with commercial companies on the following options:

- i) manufacturing carried out by the partner
- ii) a joint venture with manufacture carried out by BPL
- iii) a licensing deal

in order to establish viability only. Following that John Adey, Barry Savery and Clive Dash (and Dr Robinson and others as appropriate) were to be involved in controlling the negotiation process to structure a deal of some kind to develop this product. The negotiating partner would be the Authority, not BPL.

*C. Conyn → Miss Corrigan agreed to investigate the DoH view on overseas clinical trials. — lengthy legal
will send advice
to J.A. — needs following up*

*Action: CC advice on
DoH re overseas
Clinical Trials
— Resmits a
Constraints*

97/32 **OUTLINE BUSINESS CASE FOR NEW PRODUCTION FACILITIES AT THE BRISTOL CENTRE**

This was presented by Richard Bedford and Stuart Douglas of Capitec. (Apologies were received from Gary Austin). This upgrade was necessary within the Service on a planned priority basis and had been discussed by the Executive.

*Insurance
Indemnity
liability*

The Board agreed that this project should progress to PFI testing and the preparation of the final business case which was to include more definitive reactions from purchasers than those presently available. There was considerable concern about the reaction of purchasers, especially those in the Oxford area and the South West zonal team were to be asked to proceed cautiously with getting purchasers' reaction.

It was agreed that Richard Bedford, Zonal Director of Operations, would provide information to JFA concerning space utilisation and the utilisation of any spare capacity from the new Cardiff Centre.

97/33 **CAPITAL REQUEST FOR ROBOTIC SAMPLE PROCESSORS FOR MINI-POOLS FOR NAT TESTING**

This was presented by Peter Flanagan who clarified that

- a) the Tecan Genesis machine, as shown by the tender process, was the only one that fulfilled all our requirements
- b) the machines would be required whatever policy we decided to follow on NAT testing
- c) following visits to Germany, and the USA where the machines are used extensively, he had seen that these machines work.

The technology was changing rapidly and as a result Dr Flanagan wished to request capital to purchase up to four 200/8 size machines rather than up to four 150/8 size machines. The larger machine could handle 25% more tubes at a maximum extra cost

per machine of £5,000 and Dr Flanagan believed the smaller machines would constrain our testing options.

The Board agreed to the revised capital request on the basis that the total amount was within our existing capital budgets.

97/34 **MEDICAL DIRECTOR'S REPORT**

34.1 **Third Consultants' Meeting**

A third meeting of all NBS Consultants had been held on 10/11 June. The first day had been spent in updating them on issues such as NAT testing and clinical negligence policy, evaluating the R & D strategy and discussing CJD and the second day had been devoted to discussion of the Consultant's role, how it is working and Performance Indicators.

Two specific important items resulted from the discussions on the second day; firstly discussion on clinical policies and the possible need to standardise nationally across the Zones, secondly recognition of a need to undertake national clinical audits and register these with the National Centre for Clinical Audit and finally the proposal to do a bench marking audit on the use of group O negative blood and Fresh Frozen Plasma. Dr Robinson said morale was considerably better than a year ago and the Consultants have made considerable progress.

34.2 **Transmissible Spongiform Encephalopathies**

The DoH organised a two-day workshop on TSEs. Participants at the workshop included representatives from the research community, the blood transfusion services and many of the funders of research on TSEs in the UK. The aim of the workshop was to establish what research had already been done or been planned, what further research needed to be done to establish whether or not TSEs are transmissible by blood and whether or not there are any practical steps that can be taken now to remove these potentially infective agents. Dr Robinson expected the outcome of these workshops to be discussed at the next MSBT meeting.

34.3 **Possible HIV Transmission**

Dr Robinson advised the Board with regret that a thalassaemic patient in the London area had become HIV positive and it was possible that this was due to a transfusion. A look-back is in progress.

34.4 **National Blood User Group**

The first report from this group has been made to the Minister. In general this is satisfactory. Dr Robinson asked Jane Minifie to circulate copies to Board members.

34.5 Solvent Detergent Fresh Frozen Plasma

Negotiations with Octapharma are underway to enable the NBS to supply SD FFP. Dr Lorna Williamson has devised a questionnaire to enable calculation of how much hospitals will require. Our product will sell at about half the price of the Octapharma product and we are aiming to have it available in December when the Octapharma product is licensed.

34.6 CMO/DoH Monthly Policy Board Meeting

CMO had written to Dr Robinson saying he plans to present some issues about blood and blood safety at the September meeting of the Policy Board and asked her to provide him with a briefing.

34.7 Transfusion Medicine 2001

Dr Robinson wished to congratulate Prof Peters and his team at Cambridge on this excellent scientific meeting.

34.8 HCV Lookback in the USA

Dr Robinson has been requested by the DoH to go to Washington to advise the blood safety committee there how to undertake a lookback on HCV.

34.9 R & D

Prof Anstee would be attending the Board meeting on 30 September with a full update. In the meantime Dr Robinson advised the following:

9.1 Research Advisory Group

Prof van Aken, Mr Adey, Dr Robinson and Prof Anstee had met on 21 July to discuss how to make further progress on the R & D issue. A Research Advisory Group was proposed which would meet once a year to review the business plans of the Research Centres at Cambridge and Bristol and all other NBS research activities. It would also decide on the funding of peer-reviewed project grant applications.

It was proposed that the group should comprise Prof van Aken as Chairman, Prof Anstee as Secretary, Prof Allain, Dr Contreras and an expert in Transfusion Medicine from the USA (Prof Klein or Prof McCullough), Dr Greenaway as a representative from the DoH and Dr Robinson as an observer. The Group would report to the Board through Dr Robinson. The Board approved this approach. **Action: EAER**

9.2 R & D Funding

Mr Adey had received and replied to a letter from Dr Peter Greenaway which confirmed that the NBS will remain outside the Culyer funding arrangements for a further period while a small Steering Group considers whether we should join Culyer and when. The NBS would be represented on this committee by David Anstee. The

letter also said that the NBS would come under the auspices of DoH RD4 which covers non-departmental Special Health Authorities.

97/35 FINANCE & ADMINISTRATION DIRECTOR'S REPORT

35.1 Performance Indicators

Some figures had not been sent in from Zones on the due date due to local difficulties in preparation and Mr Savery agreed to forward these to Board members as soon as they were available.

35.2 Trust Fund Sub-Committee

In future the Board would be given copies of all Trust Fund Sub-Committee minutes. The committee had approached the Charities Commission to ask whether funds could be used for Donor Awards. They have responded in the negative but the committee is pursuing this further.

97/36 MEETING DATES FOR 1998

Dates for next year's meetings were agreed as follows:

Tuesday 20 January
Tuesday 24 March (long)
Wednesday 20 May
Thursday 30 July (long)
Wednesday 23 September
Wednesday 25 November (long).

97/37 ANY OTHER BUSINESS

Mr Adey said that a photographer would be present on 30 September to take photographs for the Annual Report.

97/38 DATE OF NEXT MEETING

The next meeting will take place at Oak House at 9.30am on Tuesday 30 September.