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#### NATIONAL DIRECTORATE OF THE NBTS

#### National Management Committee

Minutes of the seventeenth meeting of the National Management Committee held on 30th October 1991, in Gateway House, Manchester.

Present:

Dr. H.H. Gunson (In the chair)

Dr. C.C. Entwistle Dr. J.F. Harrison Dr. R.J. Moore Dr. W. Wagstaff

In attendance: Mr. P.J. Cosgrove

1. Apologies for absence

Apologies for absence were received from Dr. S.M. McDougall, Dr. E.A. Robinson and Dr. I.D. Fraser.

2. Minutes of the sixteenth meeting

The minutes of the sixteenth meeting of the NMC were approved subject to the following amendments:

- 2.1 Under "Any Other Business" at 11.3 it should be recorded that: Dr. C.C. Entwistle agreed to take over the lead of the Working Party On Retention Of Records.
- 2.2 Under item 5 it should be recorded that "HCV antibody testing had now commenced".

## 3. Matters arising

## 3.1 Revision of AIDS leaflet

Dr. Wagstaff reported that the Standing Committee on Donor Selection had made the following recommendations on the revision of the AIDS leaflet.

- (a) References to Africa should remain because unlike other countries, HIV transmission is predominantly through heterosexual activity. However references to people from Africa should include the statement 'of any race'.
- (b) No time limit should be given for the exclusion of male homosexuals and drug abusers.
- (c) Current WHO advice should be followed and a two year deferral period given for casual heterosexual contact. This would include those having sex with a man or woman of any race who lives or has lived in African countries except those bordering the Mediterranean.

- (d) If the EAGA determines that other areas present a similar level of risk in the heterosexual transmission of AIDS then some means must be found for inserting them in the AIDS leaflet or having them displayed at sessions.
- (e) Persons who had contracted sexually transmitted diseases other than HIV should be excluded for two years after being declared cured.
- (g) All individuals who have undergone deliberate breaching of the skin for non-medical reasons such as tattooing, ear-piercing, non-medical acupuncture etc., should be excluded for 12 months. The same exclusion should apply to those who have had a blood transfusion.

The EAGA is to decide on amendments to the AIDS leaflet on 10th December 1991. Their view would be referred back to the UKBTS SAC on Donor Selection. The leaflet would be discussed at the next NBTS/SNBTS Liaison meeting.

3.2 Members were advised that DH had been asked to reach a national agreement with the Commission for Racial Equality (CRE) in order to prevent local groups contacting RTCs.

Action - Dr. Gunson

#### 3.3 CBLA Liaison

## 3.31 Reimbursement for defective goods from BPL

A new reporting system and form has been developed by BPL for the allocation of credit by BPL to RTCs in respect of defective goods. It is being used in a pilot scheme with the Mersey Region.

Jane Martin of BPL is the contact point if defective goods are received.

## 3.4 HCV antibody testing : ELISA positive donations

NIBSC has advised that plasma from donations which are found to be HCV antibody positive by the ELISA test should be discarded.

European guidelines on HCV antibody testing will be drawn up in 1992 for implementation on 1st January 1993.

## 3.5 Management training

The Western Division has responded positively to the suggestion of a nationally organised Management Training programme for BTS consultants. The responses of the Northern and Eastern Divisions are awaited.

## 4. Working Party On Retention Of Records

Dr. Entwistle is waiting a response from Dr. Lloyd so that he can ascertain what has been done and what needs to be done.

Action - Dr. Entwistle

#### 5. Bone Banking activities in RTCs

The Committee considered a letter from the Chairman of the Allograft Bone Bank Committee which is preparing a report for DH. It is likely that in future those NHS units providing a bone bank for bone transplants will need a Manufacturers 'Specials' Licence from the MCA.

Members agreed that this work might well be undertaken by NBTS since RTCs already hold licences and could provide the necessary facilities for bone storage and testing. However, not all RTCs would need to be involved in this work.

The report to DH from the Bone Bank Committee will recommend consideration of NBTS involvement and that appropriate funding should be provided.

Action - Dr. Entwistle

The experience of the SNBTS in providing these services in Scotland could provide the basis of a system for the NBTS to provide this service.

## 6. Co-operation with Wellcome on QA matters

The NBTS has been invited by Wellcome Diagnostics to create a Working Party to look into QA matters concerning HIV and Hepatitis assays.

It was agreed that Dr. Gunson should approach Dr. J-P Allain to form a small Working Party. Other persons nominated were Dr. Entwistle and Mr. P. Nuttall.

Action - Dr. Gunson

# 7. Minutes of the Special Meeting of the NMC held on 30th September 1991

The minutes were received for information. The meeting held in Birmingham on 25th October 1991 would provide the basis for a response to the DH consultation paper.

## 8. NBTS/CBLA Liaison Committee minutes of the meeting held on 9th September 1991

### 8.1 <u>Distribution charges policy</u>

BPL has requested DH for extra funds to cover the payment of distribution costs incurred by RTCs

distributing BPL's products. DH has said that RTCs which have distributed these products for some time were already funded for this activity. No final decision has been taken.

#### 8.2 Intramuscular immunoglobulin (Ig)

In order to meet European Pharmacopaea requirements both 250mg and 750mg doses of Ig need to be boosted with anti-HA plasma at a minimum level of 1000 units per ml.

Dr. Snape is to establish exactly how much anti-HA plasma will be required after which Dr. Moore will invite RTCs to bid for the provision of the plasma.

Action - Dr. Moore

## 8.3 Plasma requirements for 1992/3

Dr. Gunson confirmed that the bids from RTCs for normal plasma totalled 534 tonnes for 1992/93. Mr. Crowley had accepted this total and this had been confirmed at the last CBLA meeting. Dr. Moore will inform RTCs of their targets and will formally invite RTCs to bid for the provision of specific plasma.

Action - Dr. Moore

## 8.4 Positive identification of plasma packs at BPL

Dr. Moore reported that reasonable progress was being made in implementing this scheme. Difficulties were still being encountered in retrospective loading of data from the Trent, South Thames and West Midlands RTCs.

## 8.5 <u>Variance from -30°C specification</u>

The use of the plasma trailers needs to be reviewed because variations from the  $-30^{\circ}$ C specification have been noted on several occasions.

#### 8.6 5ml Vials of Albumin

BPL advised that it may be difficult to comply with the EP limit for aluminium levels in 5ml vials of 20% albumin because of the high ratio of glass surface to volume of albumin.

Members asked if BPL could be advised that a plastic vial has been developed in France which may resolve this problem.

Action - Dr. Gunson

## 9. Provision of Donors Committee minutes of the meeting held on 9th October 1991

The minutes of the thirteenth meeting were presented.

#### 9.1 Donor Satisfaction Questionnaire

A standard questionnaire had been issued by the North East Thames and Yorkshire RTCs as a pilot. Each Region issued 1000 questionnaires sixty percent of which were returned completed, replies were encouraging. It is intended that all RTCs should issue the questionnaire by the second week in February 1992.

#### 9.2 The Summer campaign

The Summer campaign had been the biggest ever and reports had confirmed that it had achieved wide visibility.

The Central Office of Information carried out a study in the West Midlands, South Thames and Yorkshire Regions on reactions to the campaign. Their results show that thirty two percent of donors had said the "lifebelt" poster had been a factor in their attendance.

## 9.3 <u>Session equipment</u>

New NBTS session equipment will be available in 1992, including a new leaflet dispenser and 'traffic cones' to which labels/signs can be attached to help donors find their way to and around sessions.

## 9.4 New display equipment

New exhibition panels will be produced for use throughout the service for recruitment drives.

The Rotagraphics 3 system which cascades to reveal three images/messages in succession and which can be enhanced by static displays is to be purchased for window displays in local shops etc.

## 9.5 The Christmas campaign 1991

The Christmas campaign for 1991 will take the form of a reminder card, linked with seasonal greetings to donors. A study by the COI will be commissioned this year to establish whether this technique is effective and is value for money.

## 9.6 National platelet recruitment leaflet

It has been suggested that a further leaflet be produced aimed at recruiting donors for platelet

production programme. Dr. Moore agreed to take this idea to POD.

Action - Dr. Moore

#### 10. Minutes of Divisions - items not covered elsewhere

#### 10.1 Northern Division

## 10.11 AIDS and the workplace (U.S.A. litigation)

The Committee was asked whether in view of recent events in the U.S.A., RTCs should archive samples from all employees on appointment.

It was agreed that Dr. Gunson would prepare a paper discussing the alternative approaches to this issue.

Action - Dr. Gunson

## 10.12 <u>Draft Plasma Specification</u>

Following the QUIN meeting of 12th September, the draft plasma specification had been circulated on 2nd October 1991, to RTDs, QA Managers, Chief Scientist/Laboratory Managers and QUIN members. Replies should be sent to Dr. Moore by 8th November.

### 10.2 Eastern Division

## 10.21 <u>Untoward incidents during apheresis</u>

Information regarding untoward incidents during apheresis such as arterial punctures, AV fistulas and how these were dealt with should be disseminated between RTCs.

In the absence of Dr. Robinson this matter was deferred until the next meeting.

## 10.22 Inventory control

The investigation proposed by Ms. Phipps into stock control was seen as closely connected to the work done by Mr. S. Stewart of 4S Business Systems for the Directorate. It was suggested that Ms. Phipps and Mr. Stewart should be put in touch.

Action - Dr. Moore

## 10.3 Western Division

#### 10.31 Prozone phenomenon

Dr. Philip Mortimer, PHLS, was to investigate the possibility that ELISA tests could give a false reading due to a prozone phenomenon.

#### 10.32 BBMDA

The Committee noted that Oxford's bid for BBMDA funds was to be resubmitted.

## 10.33 <u>Standardisation of labels</u>

Dr. Gunson has written an article for the BBTS Newsletter and will write a leader for the BMJ on the standardisation of labels.

Action - Dr. Gunson

As part of the awareness campaign, consideration will be given to placing a full page advertisement in the BMJ as well as the posters and leaflets currently in preparation.

Action - Dr. Moore

#### 11. Any other business

## 11.1 National Association of Blood Donors (NABD)

The NABD has asked the NBTS to distribute a combined leaflet/membership form to donors.

Members thought such a decision was premature and would best be considered once the new management arrangements for the BTS were clarified.

Action - Dr. Moore

## 11.2 Meetings of the NMC in 1992

Members approved the schedule below.

Thursday 16th January 1992 - National Directorate
Thursday 2nd April 1992 - National Directorate
Thursday 2nd July 1992 - National Directorate
Monday 7th September 1992 - York (BBTS)
Thursday 3rd December 1992 - National Directorate