



Project: **vCJD**

Title **NBS vCJD 'STEERING GROUP'**

Ref: 101501 SG minutes

Date/Time 15/10/2001, 10:30 to 16:00

Venue West End Donor Centre

Attended:	Liz	Caffrey	LC
	Marcela	Contreras	MC
	Roger	Eglin	RE
	Richard	Fry	RF
	Peter	Garwood	PAG
	Martin	Gorham (Chair)	MG
	Pat	Hewitt	PH
	John	Kearney	JK
	Terry	Male	TM
	John	McCoy	JMc
	Liz	Reynolds	LR
	Lorna	Williamson	LW

- 1 **Apologies:** Jim Moir, Angela Robinson, Liz Love
Mike Murphy

Note

Action

2 **Minutes of last meeting (25/05/2001).**

2.1 The minutes of the last meeting with the following amendments:-

4.3 identifying the key people who should be involved in this process, for example the Clinical ***Instant*** Panel.

Should read:-

identifying the key people who should be involved in this process, for example the Clinical ***Incident*** Panel.

LC

9.2 LC raised the question of consent for testing. There will need to be specific consent to test these anonymised samples and an application will be made to the MREC.

The action was placed on LC

9.3 At a meeting earlier in the week it was agreed that further work should be done on identifying the current constraints on maximising platelet ***reduction***.

Should read :-

At a meeting earlier in the week it was agreed that further work should be done on identifying the current constraints on maximising platelet **production**.

- 10.1 The MSBT next meet in the autumn and by then it is hoped to be able to provide information on impact analysis and costs for each of the blood safety issues **declined** in the document.

Should read:-

The MSBT next meet in the autumn and by then it is hoped to be able to provide information on impact analysis and costs for each of the blood safety issues **out-lined** in the document.

3 Matters arising from last meeting on 25 May 2001

3.1 Previous Item 3.1:

Individual PID's and a revised project PID to be brought to next meeting. These will need to be agreed by Liz Love and the chairsof each sub group. Be.fore presentation to this meeting **JMc/ LL**

3.2 Previous Item 3.2:

Closed

3.3 Previous Item 3.3:

Covered by agenda item 4

3.4 Previous Item 4.2.

Completed

3.5 Previous Item 4.3.

Group being set up. PH to inform PG of progress.

PH

3.6 Previous item 4.4.

The proposed meeting was cancelled due to the incident in New York. MG will attempt to re-convene.

MG

3.7 Previous item 6.1

Anti HB core testing will be covered by the main meeting.

3.8 **Previous item 8.1**

First draft completed and distributed. Will require ongoing maintenance.

The meeting between suppliers of apheresis equipment and the service has been set for 26th October. PAG will report back to this meeting.

PAG

3.9 **Previous item 9.2**

Agenda item

3.10 **Previous item 9.4**

JK reported that he had received no comments re the meeting with Prof. Collinge. The item will be covered during the main meeting.

3.11 **Previous item 10.1**

The clinical issues re the Blood Safety Document are ongoing and will be covered during the main meeting.

3.12 **Previous item 10.3**

MG to produce paper on the relationship between SAC's and Blood Service Groups.

MG

3.13 **Previous item 10.4**

The paper was present and approved by the board with the proviso that the existing vCJD project structure must be maintained.

4 MSBT update

The paper 'Outline paper for MSBT October 2001 - Update on actions take to minimise risks of transfusion' (ref Cmps/msbtsafety1001 draft 2 9/10/01) was presented to the meeting. The following points were discussed:-

- LR thought that paragraph '3.1 Malaria' was over optimistic. The I.T. problems still exist and nothing can be done until the errors in the latest release of the software are corrected.
- Selective screening is being piloted in the South East
- Donations will be excluded due to travel and selective screening.
- The high priority will need funding.
- The vCJD test will include Scottish samples.

LW thanks everyone for replying on time.

The meeting asked for the following changes to be made to the document:-

LW

- 1.1 Should read - final recommendation and not -final decision.
- 2.2 Should read antibody negative.
- 2.3 Too much detail needs to be rewritten.
- 3.3 HTLV Systems currently being evaluated with potential completion of 2002/2003.

5 EOR

LW presented three papers for consideration by the meeting.

➤ **Paper 1 EOR - Economics and Operational Research Division.**

This paper explained the objectives and purpose of the EOR.

➤ **Paper 2 Draft Induction Programme for EOR Analysts.**

PAG reported that two analysts would be appointed by early next year.

It was agreed that the analysts would need to understand the NBS structure. MC suggested that they see the whole process area as a start to the induction.

It was agreed that the quality process, planning & performance and Risk assessment be included.

➤ **Paper 3 Draft EOR Workplan**

It was agreed that more work should be done on the exclusion of pre donated donors.

The meeting felt that the following priorities should apply:-

- ❖ Global term to process from Apheresis/whole blood - **High Priority**
- ❖ Pathogen Inactivity - **High Priority**
- ❖ HBV (needs proposal from SACI before proceeding) - **Low Priority**
- ❖ Tissues - **High Priority**
- ❖ TRALI - **High Priority**
- ❖ SMBTS paper on red cells and Platelets for Neonates. Need to gain results before progressing.
- ❖ A decision on if we should use European projects may become - **High Priority**
- ❖ MC asked if a section on transfusion/non transfusion selection be added.

-
- 6 Pathogen inactivated plasma .**
Paper on note to Charles Lister on 'Implementation of Pathogen inactivated non-UK Plasma for Neonates and Children' was discussed. Pat Troop may be agreeing to possible funding. Draft paper going to NSG for final approval.
- 7 Non-UK cellular products for neonates and children.**
Previous sections have covered this item.
Work is continuing on the back of the work done in Scotland.
PAG will produce a paper on supplies from non UK sources for neo-neonates and children. **PAG**
- 8 Update on bacterial prevention.**
The paper ' Initiatives to reduce bacterial contamination of blood components' was discussed.
- Arm cleansing/divert pouches.
A paper is being prepared for the December Executive meeting for adoption next year. **LW**
Any changes should be implemented at the same time as the outcome of any required changes brought about by the Donation Review.
- The meeting agreed with the recommended approach to Arm cleansing/divert pouches.
- PAG will produce a brief on S59 & Screening for next meeting. **PAG**
- MG asked members of the meeting to consider any additions to the following paragraphs:-
➤ Arm cleansing/divert pouches.
➤ Bacterial Screening
➤ S59 Pathogen inactivation of platelets **ALL**
- Changes should be sent to LW.
- 9 Decision making processes.**
LW will compare notes with Chris Hodges and present a paper at the next meeting. **LW**
- LW will send the paper to MG for consideration. **LW**
- PAG will discuss the paper with Chris Hodges. **PAG**

10 Update on Instrument Decontamination Project.

JK presented a paper on the progress of the Tissues working group.

The paper was well received by the group.

- It was agreed that disposable instruments would be used for all Heart Valve and skin retrieval and processing.
- It was agreed that disposable instruments would be used where possible for Skeletal Tissue processing.

11 Reports from Sub groups:

11.1 Donors

Nothing to report. Next meeting set for 16th October 2001.

11.2 Testing

A paper detailing the proposals for a testing facility was discussed with John Stevenson of the DoH on 12th October.

The suggested policy was agreed and permission to proceed without the need to enter the competitive tendering process.

The DoH believes that the NBS are the appropriate body to perform the tests.

John Stevenson agreed that phase 1 of the project should be completed by November 2002. The DoH needs plans and costs by November this year.

RE

RE needs to confirm the supply of 5000 American samples.

RE

11.3 Processing

The component Development group is to be merged with the vCJD group.

The Heamonetics frozen system is being investigated with regard to the response to emergency donation and the storage of surplus donation.

11.4 Tissue

The Bone risk assessment paper is with EOR awaiting response.

'vCJD Cross Contamination by instruments in tissue services' paper has been submitted to this meeting.

Scenario Planning has continued.

A proposal to undertake a pilot study on screening of cadaveric donors using tonsil tissue is in preparation. RW intends to submit a summary proposal to the next meeting.

RW

11.5 Appropriate Use

Subgroup meeting are continuing and updated report will be presented at the next meeting.

11.6 Intelligence in R&D

A Sub Group meeting was held on the 10th September.

The groups Terms of Reference were accepted.

Phil Jackson is updating the Web Site with any new information.

12 A-O-B

MC emphasised that the sub groups should concentrate on vCJD.

13 Date of Next Meeting

Friday 16th November 10:30 am WEDC