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Dear Martin

NATIONAL BLOOD SERVICE AND THE DEPARTMENT OF HEALTH

Thank you for your letter of 4 November about the working arrangements between the Department and the NBS. I am very sorry for the long delay in replying. I know that there have been a number of developments since your letter and I wanted to satisfy myself that genuine improvements were in train before giving you a substantive reply.

As you say, it was unfortunate that the move of the blood team to Pat Troop's Division coincided with the events and aftermath of September 11th. We were very conscious of the impact this would have on the amount of time that Pat and Mary O'Mahony could devote to the NBS. I was therefore pleased that Lindsey Davies was able to become your senior departmental sponsor. Lindsey, as you know, is very committed to this role and keen to support the NBS in any way she can. I do not believe that her geographical location should present a particular barrier. I know that, since your letter, you have had productive discussions on mutual areas of concern and have planned regular update discussions.

It is also important that you have regular meetings with your sponsor branch, to keep each other abreast of current issues and to establish mutually agreed priorities. I am therefore pleased to see that these are now being arranged. These improved communications should prevent the concerns you have raised escalating into crises.

Much has happened over the past year to strengthen the Department's blood team and this process continues. The blood policy team now sits with the Blood and Healthcare Associated Infections Unit headed by Dr Vicki King,



within the Communicable Diseases Branch. This enables the team to call on additional support from within the unit, including scientific support. proved valuable in running the secretariat of MSBT, in representing the Department at NBS BTSAG meetings and in organising the MSBT sub-group to address issues relating to vCJD screening. Vicki, as you know, is an active participant in meetings with NBS, chaired the recent panel to select a new medical non-executive director and will be attending this month's European Blood Alliance meeting in Dublin on pathogen inactivation. Dr Amal Rushdie also worked for most of last year with the blood team and was instrumental, with support from NBS, in issuing new guidance to the NHS on Better Blood Transfusion. I think it is therefore stretching a point to say that Charles Lister is lacking support.

In December we also advertised for a full-time haematologist to join the blood team. The response was not as encouraging as we would have liked but we are nonetheless hopeful of filling the post in the fairly near future. enable us to further strengthen our relationship with NBS in a number of areas.

2002, I believe, saw a number of major achievements on blood. As well as Project Red and the work on Better Blood Transfusion, the blood team, supported by a fast stream entrant, negotiated an EC Blood Directive that the UK Blood Services and the NHS can live with. They also steered through a number of successful spending review bids, including increased capital and revenue funding for the NBS. Lindsey Davies also obtained agreement to substantial increases in blood prices in 2003-04 to support new NBS initiatives, through her chairmanship of the National Commissioning Group on Blood.

Of the specific issues you mention in your letter, I am pleased that all have either now been resolved or are moving forward with the exception of the Bristol capital scheme. I am concerned that we need to speed up our response to NBS capital proposals, and I have asked the blood team to prioritise this.

I hope that the arrangements that we are making to improve working relationships between the NBS and the Department have addressed, or at least begun to address, your concerns. I suggest that we meet in six months time to review the position.

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