

Witness Name: Rosalind Prior

Statement No: 1

Inquiry Reference No: PI204MF

## THE PENROSE INQUIRY

### Witness Statement of Rosalind Prior

I, Rosalind Prior, say as follows:-

1. I am the mother of [REDACTED]. I am now retired and my date of birth is [REDACTED].

2. In 1969 I began working for the Scottish National Blood Transfusion Service (SNBTS) as a Mobile Team Assistant. It was a full time post. At this time I worked out of the office in West Regent Street, Glasgow and we covered the whole of the west of Scotland. Dr Wallace from Law Hospital was in charge at this time. I worked with the SNBTS until March 1974 when I was six months pregnant. At that time you had to give up work when you were six months pregnant.

3. I would attend the office in West Regent Street, Glasgow every morning and then I would leave with a team in one of the mobile vans. It was the practice at that time to attend a different venue each day. It could either be at a community centre, a church hall or places of work like the steel works or the ship yards or prisons. When we arrived at the venue we would unload the equipment and set it up. There were generally about 15 people in each team and there were six mobile teams. Within each team there would normally be a doctor, two sisters and about 12 team assistants. In the case of Barlinnie Prison, Glasgow there would be two doctors because of the higher number of donors.

4. Each day the team assistants would have a different duty. We would rotate the duties on a daily basis. One day your duty would be to deal with

the donor when they arrived. The first procedure would be to jag their thumb to do a haemoglobin blood test to check for anaemia. Another day you would be taking the donor's details and asking them questions relating to their health. Another day you would be attending to the donors at the bed while they were donating or preparing the tea and biscuits for after the donation.

5. The normal practice was that after the donor had passed the haemoglobin test they would move on to another team assistant who would go through a series of questions with them. We didn't have a sheet containing the questions that we read to the donor and we didn't have a sheet containing the questions which we handed to the donor and asked them to read. We were taught the questions which we had to remember and go through them with the donors. The first question was, "Have you given blood before". If the donor said "Yes" then we would ask "Is it over three months since the last time you donated". If the donor said "Yes" then we would ask, "Is there any reason why you shouldn't donate blood? For example, do you have a cold, flu, boils, abscesses or ulcers?" If the answer was "No", we would ask if they had recently had any injections or vaccinations. If they answered "No" to that we would ask if they had had mumps, measles, chickenpox, shingles, or jaundice or been in contact with anyone who had had jaundice or had they had any recent illnesses or operations in the last two years. If the person said yes to any of these questions we would have to go and advise the doctor of this. In the case of jaundice the doctor would tell us that we had to inform the donor that they could donate blood that day but that it would be used for research purposes only. They were also informed that they had to be clear of jaundice for five years before they would be able to donate blood again. We did not ask the donor if they knew how they had contracted the jaundice. If they had jaundice this was marked on the card containing their personal particulars and it was also noted that blood was taken for research purposes only; however, the labels that were attached to the blood donation and test tubes were not marked any differently to the other donations and samples. Some people weren't interested in donating once they were told that the blood would be used for research purposes and they just left. In respect of any other ailments it would depend on the length of the

period that had passed from them being infected. If it was only a few months then the donor was told that they couldn't give blood; however, if it was a few years then they would be able to give blood. If they said "No" to everything we would ask if they were feeling okay that day and if they were then they could donate blood that day. They would then move on to the next team assistant who noted their personal details on a card and produced four labels containing their personal details. In these days there were no computer systems so everything was noted on cards. At the end of the day the cards were returned to the office in West Regent Street, Glasgow. The team assistants had no dealings with the cards once they had been returned to the office.

6. If the donor had not donated before they were firstly asked if they were over 18 years of age and over eight stone in weight. If they answered yes to both questions then they went through the same procedure as people who had previously donated. If they answered "No" to either they were informed that they would not be able to donate.

7. The donors would then be taken to a bed where they would donate blood. Only the doctor or sister inserted the intravenous needles. A team assistant would remain with the donor while the blood was being collected. When I first started as a team assistant the blood was collected in glass bottles but in the early 1970s this changed to plastic bags. Once the bottle or the bag was full a team assistant would clip the bag with forceps until the doctor or sister removed the needle. The team assistant would then take the bottle or bag along with the tube which runs between the bottle/bag and the intravenous needle to the van driver. The van driver would squeeze blood from the tube into two test tubes. He would attach the previously prepared labels to the donation and the test tubes. The donation and the test tubes were then stored in refrigerated vans and later taken to Law Hospital at the end of the day.

8. When we attended the prisons to collect blood from prisoners it was the same process. However, as it was generally a bigger set-up we would

generally have more staff present. During the year the mobile unit attended Shotts, Polmont, Corntonvale, Lowmoss and Barlinnie prisons. The unit always attended Barlinnie prison for the two weeks of the Glasgow Fair holiday in July. My impression was that the incentive for prisoners to donate blood was that it was just a way of getting away from what they would normally be doing. However, the prisoners at Barlinnie prison, Glasgow told me that they had been informed by the "screws" (prison officers) that if they donated blood they would be given a cigarette and sugar. They were not pleased when they found out that this wasn't the position. Like all donors they were given a cup of tea or orange and biscuits after donating blood. I am asked whether there was any pre-selection/exclusion by the prison authorities of prisoners who were allowed to donate blood. I am unaware of whether there was or was not such a policy. If we tried to make conversation with the prisoners the staff told us not to speak to them. The prisoners would be brought to the donating area in batches of about 20 or 30 at a time. The unit attended Barlinnie prison once each year and the other prisons and large organisations generally twice each year.

9. The procedure never changed in the five years I worked for the Blood Transfusion Service. We were never told to ask any donors if they had ever used intravenous drugs or had tattoos or piercings. At that time HIV was not known and we were not instructed to ask any questions about hepatitis. There was no difference in the procedure, including questions asked, between prison and other donor sessions. I do not recall any suggestion being made that blood collected from prisons was different from blood collected elsewhere.

10. We never wore rubber gloves when dealing with donor's blood. If there was a blood spillage I would simply clean it with a cloth and disinfectant.

11. Just before I finished working with the Blood Transfusion Service they produced the questions that donors had to be asked on a sheet that we used but as far as I can recall the questions weren't any different from what we had previously asked donors.

12. I have been shown PEN.013.1395 dated 16 June 1983. This is apparently a sheet containing information which the donor is requested to read prior to giving blood. Whilst I worked for the Blood Transfusion Service we didn't ask about glandular fever, German measles, asthma, hay fever, nettle rash, blood diseases, cancer, diabetes, epilepsy, goitre, brucellosis, heart disease, high blood pressure, kidney disease, malaria, rheumatic fever, stroke or tuberculosis. We also didn't ask if their work involved unusual hazards including heights or depths or if they were the driver of a Public Service Vehicle or had a baby under one year old.

**Statement of Truth**

I believe that the facts in this witness statement are true.

Signed Rosalind Prior.....

Date 1<sup>ST</sup> MARCH 2012.....