MINUTES OF THE FIRST MEETING OF THE SNBTS MEDICAL & SCIENTIFIC COMMITTEE HELD ON 6th NOVEMBER 1990 at 10.45 a.m. at HEADQUARTERS

Present:

Professor J D Cash (Chairman)

Dr E Brookes

Dr D B L McClelland

Dr R Mitchell Dr R Perry Dr S. J Urbaniak Dr W Whitrow Dr C V Prowse

Dr Angela Robinson (RTC Leeds)

Dr R Stewart (Secretary)

<u>In attendance</u>: Mrs S Shearer

1. APOLOGIES

Apologies were intimated on behalf of Dr McClelland (Belfast BTS). Dr Whitrow had advised he would arrive late and this was noted.

2. <u>INTRODUCTION</u>

The Chairman welcomed those present and, in particular, Dr Robinson, representing the NBTS Northern Division.

3. MINUTE OF EXTRAORDINARY MEETING OF THE MSC HELD ON 14th AUGUST 1990

The Minute of the Extraordinary Meeting of the MSC held on 14th August 1990, having been previously circulated, was approved as a correct record.

4. MATTERS ARISING

(i) Medical Audit Committee/

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a) Dr D B L McClelland advised that the following had agreed to be members of the SNBTS Medical Audit Committee:Drs. Whitrow, Galea, Ghosh, Crawford, Murphy, with Dr McClelland in the Chair.

It was hoped to have a Report prepared on structuring for the first year by 31st December 1990 and a Report prepared on activities by 30th August 1991, but that the financial requirements could not yet be defined.

- (b) Dr Angela Robinson advised that the NBTS Medical Audit arrangements would be based on establishing the following:
 - (i) RTD Auditing
 - (ii) Hospital Transfusion Committees —
 - (iii) Regional Transfusion Committees.

Dr Gunson would head up the programme for (i) above and RTDs would be responsible for facilitating (ii) and (iii).

Dr Gunson had asked the DOH for £148,000 for England and Wales to cover clerical support/Medical Officers' time on Audit visits etc. but had been allocated £30,000 over 3 years. The DOH wish the major costs to be met from the Regional allocations.

It was agreed, in the SNBTS context, that two systems would be required: one to cover BTS (wholesale) activity and the other to be handled by hospital (retail) systems.

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Dr Perry asked if any central training package was ongoing, and Dr McClelland replied that this would be considered by the Medical Audit Committee's review.

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(ii) Product Development Group

Noted and agreed that PDG will report direct to SNBTS Board.

5. BLOOD COLLECTION PROGRAMME

(i) Blood Donors - Upper Age Limit

The Paper, previously circulated, prepared by Mrs M Thornton and Dr Galea was considered.

Dr Whitrow's comments were tabled and noted.

Dr Robinson advised that much of the current discussion may become redundant as Dr Moore had recently proposed extending the age from 17 to 70 years.

The Committee concluded that whilst they agreed in principle with the Thornton/Galea Paper, the implementation date of January 1991 might be ambitious and could have significant operational and resource implications.

It was agreed that Mrs Thornton be asked to liaise with Dr Moore (per Dr Robinson's comments) and Professor Cash (operational and resource issues) and report back.

MT/ JDC

(As Dr Gillon had not yet arrived, Item 5(iii) was brought forward. Dr Whitrow joined the meeting at this point)

5. (iii) <u>Proposals for Future Maintenance of Medical Standards</u> for the Care and Selection of Blood Donors/

5. (iii) Proposals for Future Maintenance of Medical Standards for the Care and Selection of Blood Donors

> The Paper, which had been previously circulated, was considered by the Committee.

Professor Cash intimated that a Standing Committee on the Care and Selection of Blood Donors had been formed, with Dr W Wagstaff as Chairman and Dr Galea had agreed to represent SNBTS interests on this Committee.

It was agreed:

The following alterations to the wording were agreed: (a)

Proposal l(c) as follows:

"mandatory" Delete:

"as the standard of practice to be Insert:

accepted in SNBTS".

"specifications" Delete:

"standard of practice". Insert:

(b) That Professor Cash should liaise with Dr Wagstaff with a view to enhancing SNBTS representation.

JDC

- (c) That Dr Galea should serve as an SNBTS representative on the UK Committee and act in a professional liaison role with the SNBTS DSMs.
- (d) That Professor Cash should chair an informal annual meeting of SNBTS medical staff who share a responsibility for professional aspects of the care and selection of donors.
- 5. (ii)Donor Counselling : HCV

Dr Gillon's Report, which had been previously circulated, was discussed.

Dr Mitchell pointed out that Dr Gunson was anxious to take this Gillon document to the National Advisory Committee in the near future.

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At this point Dr Gillon joined the meeting and was welcomed by the Chairman. He gave a brief resumé of the content of the Paper and a lengthy discussion took place thereafter, when details were clarified.

Dr Gillon pointed out that there were additional data which were not available when the report was written. These are that sexual transmission of HCV occurs, but not efficiently, and that vertical transmission had been reported. He advised that in those countries contacted (France, Finland) where routine HCV donation testing had been instituted, no counselling on safe sex was undertaken.

The Committee concluded that a draft Standard Operating Procedure based on this report should be prepared by Dr Gillon by 30th November 1990 and submitted to the members of the MSC for their consideration. This he agreed to do.

JG

He was also asked to consider and cost a training package for the appropriate SNBTS staff to enable them to implement the Guidelines effectively. This he agreed to do.

JG

The Chairman thanked Dr Gillon for attending and conveyed the Committee's thanks to all who contributed to the Report.

It was agreed:

(a) That Professor Cash should congratulate Dr Gillon and his colleagues for their important contribution.

JDC

- (b) That Dr Gillon should redraft the document as follows:
 - (i) In a format which was that of professional/operational guidelines.
 - (ii) That counselling information which all HCV confirmed positive donors would be ladvised was clearly delineated.

(iii)/

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- (iii) That thereafter a series of supplementary questions/answers were made available.
- (iv) That consideration be given to including information on the treatment of HCV hepatitis and the issue of safe sex.
- (v) That the redraft be lodged with Professor Cash by 30th November 1990.

6. COLOUR CODING - BLOOD GROUP LABELS

The Committee agreed to implement the proposals outlined in Dr Gunson's letter of 5th October 1990, on 1st April 1992. It was agreed that no Region would change before that date and that it should apply to blood collected on that date.

Professor (ash to signal to Dr Gunson the SNBTS RTDs' support for the proposal.

JDC

7. PLATELET CONCENTRATES - BAR CODE LABELS

The Committee did not wish to endorse Mr Moore's proposals at present and requested the Chairman to look into the matter in more depth, with particular reference to apheresis derived platelet concentrates, and report back to the February 1991 meeting. This he agreed to do.

JDC

8. Rh TESTING - BLOOD BAG LABELS

It was agreed:

- (i) The proposals contained in Dr Gunson's letter were unclear and that insufficient consultation had taken place.
- (ii) That Professor Cash should advise Dr Gunson on the SNBTS Directors' concern.

JDC

(iii) That Martin Bruce be invited to examine the proposals, and report back.

JDC/ MB

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9. <u>SNBTS REAGENTS PROGRAMME</u>

It was agreed to defer this item until the February 1991 meeting.

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10. HCV

(i) Look Back

After discussion it was agreed that Professor Cash should write to the Chairman of the DOH Advisory Committee on the Virus Safety of Blood, asking that careful consideration be given to the matter of HCV look back of recipients of previous donations.

JDC

(ii) Flow Chart

It was agreed:

<u>NO</u>

That Dr Mitchell and Dr Whitrow would form a group (including an MLSO) to establish a set of uniform (SNBTS) procedures for all Microbiology Testing (with the exception of Syphilis). Thereafter Dr Mitchell would audit each RTC to assess compliance and report back to the MSC. It was agreed not to consider ALT within this exercise at this time.

RM WW

(iii) Combined Ortho/Abbot Study

Noted - ongoing.

11. BMT INSURANCE SCHEME

Proposal noted and supported by MSC Committee.

Professor Cash agreed to advise the General Manager of this decision.

JDC

12. MICROBIOLOGY REFERENCE UNIT

Noted.

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13. PFC MANUFACTURING LICENCE: PLASMA QUALITY

Dr Perry led the discussion on this topic, referring to a Paper which had been circulated the day prior to the meeting.

Dr Perry explained that the Medical Inspector's next visit was scheduled for 14th January 1991 and he (Medical Inspector) would wish to see evidence of an audit programme for the supplies of plasma at RTCs regarding input plasma to PFC. The document raised several issues which Dr Cuthbertson was tackling with a view to "contacts" being in place in each RTC by 14th January 1991.

It was agreed:

In view of the urgency of the matter, the principles contained in the Paper be supported and that Professor Cash liaise with the General Manager with regard to meeting these urgent needs.

JDC

14. SHHD DRAFT GUIDELINE: CONSENT TO EXAMINATION, INVESTIGATION, TREATMENT OR OPERATION

The Committee noted that although the Standard Consent Form was all embracing, it did not seem to include blood transfusion.

It was agreed that Professor Cash write to the Scottish Office regarding the following topics:

- (a) Recipients of blood transfusion.
- (b) Blood Donors
- (c) Product Inserts
- (d) General Public Information.

JDC

Dr Robinson left the meeting at this point but asked that a copy of the document be forwarded to her. This was agreed.

SDS

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15. RTC INSPECTION OF PRIVATE HOSPITAL BLOOD BANKS

The proposal was approved in principle.

The Chairman had received a draft document from SHHD as guidelines for private hospitals. This document encouraged early discussion between the proprietor and the local RTC to cover standards and likely demand. The RTDs were requested to comment on these guidelines.

It was agreed:

Professor Cash will collate RTD comments on the SHHD document and Drs Mitchell and Hopkins will produce a draft SNBTS Standing Operating Procedure on inspections for private hospital blood banks.

JDC RM DH TDs

16. UKTS REAGENT PROCUREMENT WORKING PARTY

Noted and agreed.

JDC

17. ANY OTHER COMPETENT BUSINESS

A-Z Guidelines

It was agreed that Professor Cash would circulate this document to TDs as soon as it arrived with a view to early operational implementation before the next MSC. An annual review and amendment exercise would be carried out thereafter.

J D C G **G**

Malaria

It was reported that the UKBTS Standing Committee had formally agreed that <u>plasma only</u> from such donors who had been to malarial regions can be used for fractionation, subject to the "Red Book", Page 27 (5.9.4).

It was agreed that this operational procedure be adopted throughout the SNBTS forthwith.

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It was noted that the use of cellular products (including FFP and cryoprecipitate) from such donors was now being reviewed by the UK BTS Standing Committee and would be completed by 30th April 1991.

JDC

18. DATE OF NEXT MEETING

The next meeting of the MSC will be held on 19th/20th February 1991.

The meeting adjourned at 3.30 p.m.