

UKBTS\NIBSC EXECUTIVE COMMITTEE**Minutes of the third meeting held at West Midlands RTC****On 5 September 1994****Present**

Dr W Wagstaff (Chairman)	Trent Regional Transfusion Centre
✓ Dr F Ala	West Midlands Regional Transfusion Centre
Prof J D Cash	Scottish National Blood Transfusion Service
✓ Dr D B L McClelland	Scottish National Blood Transfusion Service
✓ Dr M de Silva	North London Blood Transfusion Centre
✓ Dr V James	Trent Regional Transfusion Centre
Dr P Minor	National Inst for Biological Standards & Control
✓ Dr E A Robinson	National Blood Authority
Dr T Snape	National Inst for Biological Standards & Control
Mr R Stewart	National Inst for Biological Standards & Control

1 Apologies for Absence

Apologies were received from Dr Geoffrey Schild (represented by Mr Richard Stewart and Dr Philip Minor) and Dr T Barrowcliffe (represented by Dr T Snape).

2 Minutes of the Meeting of the Executive Committee Held on 2 July 1994

The minutes of this meeting were accepted as a true record of discussions held.

3 Matters Arising

- 3.1 It was reported that proofs of the forthcoming amendments to the Red Book would shortly be available and it was agreed that, on publication, their existence should be advertised in Transfusion Medicine, Vox Sanguinis, the ISBT Bulletin, the BBTS Newsletter and through the NEQAS organisation. It was agreed also that, at the next meeting of the Executive, the question of the need for consultation on amendments before publication should be discussed. There would be preliminary discussion of this point at meetings of the various Standing Advisory Committees of the Liaison.
- 3.2 The Chairman reported that no definitive reply had yet been received from Scotland with regard to the formal acceptance of the Red Book Guidelines as national standards by SNBTS. Professor Cash stressed that there had been no direct involvement of DOH, CSA or MCA since the inception of this Liaison, so that although the Red Book was a document produced by professionals, it nevertheless would in his opinion, carry weight in law. It was thought that

continuation of the Red Book as a professional document would mean retention of flexibility with regard to changing items in a six month to twelve month period. It was considered that the National Authorities were in any case well represented by the presence of the two National Medical Directors on the Executive Committee of the Red Book, and by a considerable representation on the various SAC's. Chairmen of SAC's should ensure that, so far as possible, an offer should be made to each authority of representation on the committees. It was agreed that the next complete reprint of the Guidelines should include a paragraph saying that the Guidelines will pursue the best policies for overall patient care. This paragraph will be drafted by Dr James and Dr Wagstaff and circulated after consultation with legal opinion (probably Mr John Evans from Trent RHA and Dr Gail Williams from Cardiff).

4 Standing Advisory Committee on Donor Selection

This committee has met twice since the last meeting of the Executive Committee, and two main tasks were identified for reporting to the Executive.

- 4.1 Review of the HIV Leaflet - Epidemiological information was being gathered to see if deferral categories needed amendment, through consultation especially with Dr A Johnston and Dr A Noon. Some work is being done in Scotland with regard to donations from prisoners, this aspect being taken into account in the new draft (it was reported that the French Transfusion Services have already started asking donors if they have ever been in prison). The final recommendations based on information gathered, will be circulated in draft to SAC members.

It was confirmed that the current AIDS leaflet will be printed in January 1995, with the new leaflet due in July 1995. There was some doubt as to whether the proposed leaflet would need to be cleared by EAGA or whether passage through MSBT would be sufficient. Dr Angela Robinson, as a member of MSBT, would check on this point.

- 4.2 Dr James reported that the British Council for Acupuncture (BCA) had been consulted again with regard to deferral after body piercing including in this consultation another approach to Professor Noah. So far, previously held reservations of the SAC had not been dispelled. A further meeting with BCA had been arranged for 17 October 1995, with attendance on this occasion by Medical Acupuncturists and Physiotherapists who do not belong to BCA.

It was reported also that Dr Pat Hewitt had undertaken to gather information from Chiropodists with regard to the need for deferral of donation following this form of therapy.

Hopefully, an overall report on this particular item was due by the end of the year.

- 4.3 It was agreed that Dr James would write to all Centres in the UK, asking that referral of deferral issues should be confined to contentious items only, presumably those which are not covered by the clear Guidelines contained in the Donor A-Z. She will advise the Centres where necessary, after consultation of when required, but replies to individual donors should be undertaken at a local level.

5 Standing Advisory Committee on Components

Dr McClelland reported that there had been no meeting of this committee since the last Executive Committee Meeting, but identified the new members of his committee. These are -

Mrs M Ashford
Mr M Bruce
Dr K M Forman
Mr P Garwood
Mr P Kelsey
Mr P Metcalfe
Dr W Murphy
Mr A Slopecki
Mr N Tandy
Mr J Stivala

All RTCs have been asked to let Martin Bruce, as Secretary of this group, have ideas or comments for discussion. Unresolved issues from the previous Standing Advisory Committee are being pursued for the agenda for the first meeting of the new group. Informal meetings are also planned with users before the end of the year. Dr McClelland hopes that for the next Executive Meeting, he will be able to produce a work programme for the SAC covering the next eighteen months to two years.

- 5.2 Dr McClelland is to appoint a chairman of a working party to look at all aspects of progenitor cell handling/harvesting, storage, purification, testing, documentation etc. These aspects will be covered for peripheral blood stem cells, marrow and cord blood.

6 Standing Committee on Reagents for Immunohaematology and HLA

- 6.1 It was reported that two reference reagents were currently being worked on, these being an anti-B lymphocyte serum and minimum potency anti-D.

Work up documents on these reagents had been presented to the management at NIBSC but had not yet been rubber stamped. Mr Richard Stewart agreed to follow up on this.

- 6.2 The SAC had considered the requirement to carry out reverse ABO grouping on known donors. Apart from querying the need for such testing to be done at all, the SAC recognised a problem with regard to validation of reagents used on machines as well as of the machines themselves. Mr Alan Slopecki had been approached for a view on this, so far no reply had been received. Dr de Silva hoped to produce a recommendation at the spring meeting of the Executive Committee.
- 6.3 The SAC had considered again the question of phenotyping of donors, particularly the need for repeat phenotyping of each donation before release, as compared with reliance on historical data. Data from Centres was being collected and collated, comparing Centres which do and do not retest each donation and taking into account such laboratory practices as cross-matching, the use of new reagents, and clinical relevance of antibody. It was hoped that this work would be finished in time for a recommendation to be put before the next meeting of the Executive Committee.

7 Standing Advisory Committee on Plasma for Fractionation

Dr Terry Snape reported, on behalf of Dr Barrowcliffe, that no meeting of this SAC had been held since the last Executive Meeting. The only change to the SAC membership is that Dr Richard Lane has been replaced by Mr Alan Slopecki.

Dr Snape also reported that he and Dr ^{Snape} Ruth Cuthbertson were working on amendments on the plasma fractions chapter of the Red Book, for inclusion in the 1996 batch of amendments.

Professor Cash briefly raised the question of ALT testing of plasma intended for the production of components which may be released outside the UK, and stressed the need for interaction with this SAC by any other group charged with coming to a decision on this matter.

8 Standing Advisory Committee on Transfusion Transmitted Infections

- 8.1 Dr Ala presented, for information, minutes of the meeting of this group held on 19 April 1994.
- 8.2 A recent ad-hoc meeting had been held on the subject of HCV look back. The SAC in its interaction with MSBT had agreed to recommend that HCV look back should be performed since treatment, imperfect though it may be, is now available. It will also suggest that any screening test developed in the future should be accompanied by an automatic look back unless there is some specific reason to the contrary. Dr Snape asked the SAC to keep in mind the consequences of look back on plasma fractionation, this point

will form a separate item for discussion at the next SAC meeting. At Dr Ala's request, Dr Snape agreed to represent BPL on the SAC. This move having the additional benefit of increasing the inter-action with MSBT.

This ad-hoc meeting also touched on the quarantining of FFP for clinical use. There was as yet no uniformity of approach within the UK, but Dr McClelland was asked, on behalf of the Red Book organisation, to produce and circulate for comment a specification, as soon as possible.

9 Standing Advisory Committee on Information Technology

- 9.1 Dr Robinson reported that the ISBT working party had agreed to the UK requirements for a Check Digit in Code 128. The impact on hospitals in the UK of changing from Codabar to Code 128 was still unsure, but it was envisaged that it would take up to five years for implementation of this change in any case. It was also noted that considerable progress is being made in the formulation of national IT systems for both England and Scotland, so that it will be wise to wait for full implementation of these systems before directing energies towards change in coding systems.
- 9.2 It was agreed that the Labels working party needs to be reconvened to sort out residual problems, the approach would be project orientated and Martin Bruce has agreed to act as chairman. It was stressed that there was a need for such a working party to be closely integrated with the SACs on information technology and components, fortunately Martin Bruce is also secretary of the component group.
- 9.3 A problem has been identified in that bar-codes have been allocated to unique components before these components have had their specifications agreed by the SAC on components. It was agreed -
- a that the Chairman of the component SAC would conduct an audit of components prepared at all Centres, and
 - b the National Medical Directors would write to all Centres regarding the absolute need to put requests for new components through the component SAC, who will then refer unique newcomers to the SAC on information technology and its Labels working party
- 9.4 Dr Robinson reported that she was conscious of a possible conflict of interests since her appointment as Medical Director of the NBA and therefore wished to resign from chairmanship of the SAC on IT. The committee accepted her resignation with regret and expressed their appreciation of the work she had put in to the reconvening and revamping of this SAC and its two working parties.

10 Working Party on Tissue Banking

- 10.1 The minutes of the first meeting of this working party had been distributed. Members of the Executive Committee commended the enthusiasm which was evident in their production.

It was stressed that the guidelines to be produced were for the Transfusion Services and that we should endeavour not to tread on other people's toes. The British Association of Tissue Banks (BATB) are in the process of producing their own guidelines, but those intended for possible inclusion in the Red Book will be more detailed for Transfusion Service use. It was however noted that there was very good representation of BATB membership on this working party.

It was agreed that Dr Hassan should continue with his group in an effort to produce such transfusion orientated guidelines, at which time a decision would be made as to whether the group would be allied to one of the existing SACs, or would be terminated.

11 Ante Natal Services

- 11.1 Professor Cash asked whether ante natal services should be considered for inclusion in the serological section of the Red Book or in some form of laboratory manual which might eventually stem from it. The committee considered that, on the clinical side, it is quite difficult to see the way ahead in these days of competition between RTCs and Trusts for these services. It was agreed that this was more an Authority business than Red Book business, and should properly be addressed by Dr Robinson and Professor Cash.

12 Any Other Business

- 12.1 It was noted that, contrary to what was thought to be happening, there was little evidence that NIBSC was being charged by RTCs for the supply of raw materials intended for the development of standards.

13 Next Meeting

The Executive Committee will meet again on 15 February 1995 at the West Midlands Centre, the meeting to begin at 11.00 am.