

**MINUTES OF THE 17TH MEETING OF THE UKBTS/NIBSC JOINT  
EXECUTIVE LIAISON COMMITTEE**

**held on 7 June 2000  
at the West End Donor Centre**

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**ACTION**

**PRESENT:**

Dr Frank Boulton	FB
Prof Ian Franklin	IF
Dr Henry Hambley	HH
Dr Virge James (Chair)	VJ
Dr Liz Love	EL
Dr Morris McClelland	MM
Dr Angela Robinson	AR
Dr Geoffrey Schild	GS
Dr Terry Snape	TS
Dr Ruth Warwick	RW
Dr Lorna Williamson	LW

**IN ATTENDANCE:**

Mrs Margaret Smith (Minutes)	MS
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**1. Apologies for absence**

Dr Morag Ferguson	MF
Dr Mahes De Silva	MDS
Dr Mike Kavanagh	MK
Dr Brian McClelland	BM

**2. Minutes of the 16th meeting - 10 February 2000**

The following amendments were noted:

- 2        3.3 should read "It was noted that the future of the NBS National Blood User Group is under review."
  
- 3.8        The last paragraph should read "It was noted that the Deputy Chief Medical Officer at the DoH had ..."
  
- 7.2        Second paragraph "Prof Muller" should read "Prof Myllyla".
  
- 10.1        First sentence should read "... would provide 1000 free copies to the UK BTS".
  
- 12.3 a)    Should read "... from both inside and outside the UK BTS."
  
- 16.4 c)    Should read "... following conversion to Word 6."

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17.2      Should read "One meeting had been held between Dr Schild,  
Professor Anstee and Dr Marc Turner.

**3.      Matters Arising**

**3.1.    Draft Proposal for EU Directive**

AR reported that following the EBA meeting, she believed that the document was now generic although the appendices were still included.

It was noted that a technical group might be established under the auspices of the EBA.

RW referred to the possibility of a draft directive on tissues and organs.

**3.2.    Donors who have previously received a transfusion**

It was noted that Pat Hewitt had been requested to produce an interim procedure for dealing with people who present as blood donors who have previously had a transfusion from someone who subsequently developed vCJD.

RW felt that there should be similar arrangements for tissue donors. RW will discuss the implications for tissues at the SACTB. Frank Boulton agreed to ask the SAC on Care and Selection of Donors to include tissues in its remit. This would enable formal cross representation between the SACs.

**RW**

**3.3.    Incompatibility of blood bag/giving set**

AR advised that there did not appear to be a problem in other countries but she would double-check.

**AR**

**3.4.    Blood Safety Leaflet**

FB reported on progress in revising the blood safety leaflet. AR requested that an explanation be given for each of the criteria included in the leaflet. FB would produce this and forward to AR for a future MSBT meeting.

**FB**

RW referred to a recent BMJ article regarding the risk of blood-borne viruses among prisoners and it was felt that relevant questions should be asked of donors. FB would put this on the agenda for the next SAC on

**FB**

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Care and Selection of Donors.

**3.5. Haemochromatosis**

A meeting would be taking place on 3 October at the West End Donor Centre to which the National Medical Directors and members of JELC would be invited. It was noted that there was currently a lot of interest in this matter with discussions taking place at SP-HM and SP-R-GS and a recent article issued by the British Society of Haematology.

**3.6. T. Cruzi testing**

FB advised that he still had to meet with John Barbara to discuss this issue.

**FB**

**3.7. SACTTI Sub-Committee on TSE**

It was noted that this sub-committee had been set up by Chitra Bharucha and so far one meeting had taken place between Geoffrey Schild, David Anstee and Marc Turner. Discussion had taken place at that meeting regarding the development of a scientific test for TSE. GS explained the resources which were available at NIBSC and suggested that Philip Minor be invited to be a member of the sub-committee. It was also suggested that there should be a tissues representative, and that there should be a link with other UK-wide TSE research groups.

In response to a query from the DoH it was felt that there was no reason for people researching TSE not to be blood donors. In view of concerns, however, it was suggested that this should be referred to the TSE sub-committee.

**EL**

EL would take these issues forward.

**4. Ethical Committee**

AR had still not received a response from Mike McGovern which was needed before an Ethical Committee could be established. She had written to Diana Woolford at PHLS asking for details of members of their committee and its remit.

**AR**

**5. Red Book 4th Edition**

VJ advised that the new edition should be out by the end of June. The

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---

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Internet version would be hosted by The Stationery Office on their web site, with a link to the NBS Intranet. Anyone buying the book would be given a password to access the Internet version.

LW queried whether references which were not included in the Red Book itself could be given on the web site.

A poster advertising the Red Book had been accepted by ISBT for the Vienna congress.

VJ wished to thank MS for all the work involved in preparing and proof reading the Red Book.

**6. Constitution of the Red Book (EC 18/00)**

VJ had prepared a discussion document following a request from the UK Forum for a review of the Red Book organisation. Following discussion the JELC recommend to the UK Forum that:

- the Red Book organisation should maintain its professional independence
- the JELC should be accountable to the Medical Directors of the 4 Services and the Director of NIBSC
- the 5 Directors should meet annually to monitor the performance of the Red Book organisation, including that of the JELC Chair
- the JELC Chair should produce an annual report to the 5 Directors
- the JELC Chair should be appointed for 5 years, with 3 years renewable by mutual consent
- the process of appointing a replacement Chair should begin 18 months before the end of tenure to allow a 12 months overlap period
- in the absence of the JELC Chair at a meeting, someone should be nominated from those present to act as Chair for that particular meeting

It was suggested that the MCA representative should have observer status rather than be a full JELC member, and that a representative from the MDA be invited, also as an observer.

**VJ**

There was a break in this discussion at this point to allow time for discussion on NIBSC issues before GS had to leave the meeting.

**7. Items raised by NIBSC**

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---

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- 7.1. GS was pleased to report the construction of a new purpose-built laboratory for providing reference materials. The building should be ready by mid-2001.
- 7.2. The Department of Health had agreed to establish a TSE Reference and Research Centre which would be headed by Philip Minor. Advertising was currently taking place for scientific staff.
- 7.3. 28 new WHO International Standards and new standards for HIV were now available.
- 7.4. A successful meeting had taken place of the SOGAT group in collaboration with the European Plasma Fractionation Group.
- 7.5. The DoH were still providing funding for the forum organised by Morag Ferguson and regular meetings were taking place.
- 7.6. A new unit had been established at NIBSC which would provide reference materials for histocompatibility wherever needed.

**8. Constitution of the Red Book (cont.)**

Discussion took place regarding SACs and it was agreed that:

- A template for remits would be circulated to SAC Chairs, for return by 18 July
- SACs would produce an annual report to the JELC Chair
- They would produce a newsletter for distribution round the Services
- In the event of the sudden absence of the SAC Chair then the JELC Chair would chair that SAC in the interim
- Consultation would take place outside SACs as necessary
- The Working Party on HPCs should become a standing sub-committee. RW would prepare a proposal for the next meeting.

**RW**

During the discussion reference was made to the use of the word "standards" and it was agreed that further information should be sought from Quality and Operations regarding why the word should not be used.

**VJ**

VJ reminded members that it was now time to start looking at revisions for the next edition of the Red Book.

**ALL**

The possibility of the draft being placed on the Internet for people to

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|---|----------------------|
| <p>comment on would be explored with TSO.</p>   | <b>ACTION<br/>VJ</b> |
| <br>  |                      |
| <b>8.1. Chair of SACIT</b>  |                      |
| <p>A letter would be sent to all members of the JELC seeking nominations for the SACIT chair. The JELC Chair and the 5 Directors would then discuss the nominees and, if more than one nomination was acceptable, there would be a postal ballot.</p> | <b>VJ</b>            |
| <br>  |                      |
| <b>9. Handbook of Transfusion Medicine</b>  |                      |
| <p>BM was unable to be present at the meeting but he had forwarded proposals for the SAC on Clinical Transfusion Medicine and the Handbook (EC 33/00).</p>  |                      |
| <p>It was agreed that VJ would discuss with BM the importance of producing the revision otherwise the funds would be lost. A September deadline for the draft was suggested.</p>  | <b>VJ</b>            |
| <p>It was also agreed that the Handbook would be discussed with the SHOT Steering Committee but this would be outwith the timescale for producing the Handbook.</p>   |                      |
| <br>  |                      |
| <b>10. Council of Europe Guide</b>  |                      |
| <p>VJ requested comments by 18 July so these could be forwarded to AR by 21 July at the latest.</p>   | <b>ALL</b>           |
| <p>RW advised that there was another document on tissues and cells which would be going to CDSP for consultation. It would be going back to the Working Party in October and would then go out on wider consultation.</p>                             |                      |
| <br>  |                      |
| <b>11. ISBT 128 (EC 19/00)</b>  |                      |
| <p>IF expressed concern that there may be problems at hospital level now that staff had to write out many more digits and this could make 'look back' in hospitals more difficult. He felt that the issue of extra labels should be reconsidered.</p> |                      |
| <p>Discussion followed during which it was suggested having a consensus to find the best system in the UK. It was noted that a BCSH Working Party was looking at hospital documentation. EL suggested that the</p>                                    |                      |

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Clinical Policy Group also look at systems.

**12. Standing Advisory Committee on Blood Components**

**12.1. Minutes of meeting held on 15 December 1999 (EC 20/00)**

**12.2. Minutes of meeting held on 20 March 2000 (EC 21/00)**

These papers were received for information.

**13. Standing Advisory Committee on Care and Selection of Donors**

**13.1. Minutes of meeting held on 13 December 1999 (EC 22/00)**

**13.2. Minutes of meeting held on 24 February 2000 (EC 23/00)**

These papers were received for information.

**14. Standing Advisory Committee on Information Technology**

**14.1. Minutes of meeting held on 1 November 1999 (EC 24/00)**

**14.2. Minutes of meeting held on 13 January 2000 (EC 25/00)**

These papers were received for information.

**14.3. Tissue Codes (EC 26/00)**

A document giving details of ISBT 128 tissue codes which had been endorsed by ETAG was received and approved.

**15. Standing Advisory Committee on Tissue Banking**

**15.1. Minutes of meeting held on 21 October 1999 (EC 27/00)**

**15.2. Minutes of meeting held on 17 January 2000 (EC 28/00)**

These papers were received for information.

**16. Standing Advisory Committee on Transfusion Transmitted Infection**

**16.1. Minutes of meeting held on 16 November 1999 (EC 29/00)**

**16.2. Special meeting on NAT held on 21 February 2000 (EC 30/00)**

**16.3. Minutes of meeting held on 7 March 2000 (EC 31/00)**

These papers were received for information.

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**16.4. Reinstatement of Donors who have had False Positive Screening Results**

EL referred to the recommendation from SACTTI for the reinstatement of donors who have false positive screening results to be reduced to 12 weeks. It was agreed that this should be checked with the Council of Europe for the next edition.

**VJ**

**17. Any Other Business**

**17.1. "British Working Standard for anti-HIV 1 - dilution for use with Abbott PRISM" (EC 32/00)**

This document was received from Morag Ferguson for endorsement. Copies would be circulated to all JELC members.

**MS**

**18. Date of Next Meeting**

The next meeting would be on 25 October 2000 at Birmingham New Street.