Consultation on Triennial Reviews of the NHS Blood and Transplant (NHSBT)

The Royal College of Pathologists’ written submission

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1 About the Royal College of Pathologists

1.1 The Royal College of Pathologists (RCPath) is a professional membership organisation with a charitable status. It is committed to setting and maintaining professional standards and to promoting excellence in the teaching and practice of pathology. Pathology is the science at the heart of modern medicine and is involved in 70 per cent of all diagnoses made within the National Health Service. The College aims to advance the science and practice of pathology, to provide public education, to promote research in pathology and to disseminate the results. We have over 10,000 members across 19 specialties working in hospital laboratories, universities and industry worldwide to diagnose, treat and prevent illness.

1.2 The Royal College of Pathologists makes comments on the Triennial Review of the NHS Blood and Transplant (NHSBT). The following comments were made by Fellows of the College during the consultation which ran from 27th August 2015 until 4th September 2015.
2. Whether NHSBT performs necessary functions

The Fellowship considers that the NHSBT performs necessary functions with a single caveat (see below).

3. Whether these functions are delivered in the most effective way

When asked about the cost effectiveness of NHSBT the RCPPath believes that the current NHSBT is a highly effective set-up. College Fellows, including those working in the field of blood and transplant services in the devolved administrations, all work closely with NHSBT. The opinion of the profession is that it is a well-run organisation and delivers effectively.

3. Whether NHSBT is efficient and delivers good value for money

Like most sectors of the NHS, NHSBT has continued to deliver excellent value for money in terms of continuing to provide a safe and clinically effective service despite increasingly severe financial hardship. RCPPath knows that funding has become extremely challenging over the past decade, particularly for new projects and service development.

4. How well NHSBT performs

The UK has an extremely safe and reliable blood supply, undoubtedly one of the safest in the world, and this is largely down to NHSBT (working in partnership with the other UK Transfusion services). It is therefore performing extremely well as an organisation.

In terms of the organisations extended role in tissues and cells, the College Fellowship believes that it is also performing well here, but that some opportunities may be being missed (see comment below). To some extent this may reflect funding restrictions.

5. Whether the governance processes are appropriate and effective

There was a strong view that the governance processes of NHSBT were certainly effective. The UK Transfusion Services are amongst the most intensely regulated in the world. Whether the governance processes are appropriate was a less clear area. Fellows commented that there is a degree of over-regulation, and the regulatory burden imposed on the Transfusion Services, particularly by the MHRA, sometimes appears disproportionate in terms of the actual level of risk. It was pointed out that this over-regulation often appears to delay the introduction of important new service developments, and indeed can stifle change and innovation in general within the UK Transfusion Services.

6. Related allogeneic HPC donors

Related allogenic HPC donors are the relatives of a patient with a serious blood disorder (such as leukaemia) who have been found to be a tissue type match and are donating Peripheral Blood Stem Cells or bone marrow for transplantation. In Scotland, the model is that SNBTS is responsible for donor counselling, medical assessment and HPC procurement from related allogeneic HPC donors. In England & Wales, however, arrangements are much more patchy. In some areas NHSBT undertakes this work; in other areas however, the counselling, medical assessment and HPC procurement is undertaken by local Haematology services. This can often be by the same clinicians who are looking after the recipient. The College considers that this generates an obvious ‘Conflict of Interest’ for its Fellows and is therefore not ideal. RCPPath would like to see NHSBT take on related allogeneic HPC donor work in a consistent way across the whole of England, along the lines of the model which pertains in Scotland.