Terms of Reference

for the JPAC Board, the Executive Working Group and the Standing Advisory Committees

July 2024

This document outlines the Terms of Reference for JPAC, the Executive Working Group and the Standing Advisory Committees, and the roles of responsibilities of their associated members. For further information on governance, decision making and internal processes, see **JPAC Ways of Working**.

Dr Stephen Thomas
Professional Director of JPAC

1. Introduction

The structure and function of the Joint United Kingdom Blood Transfusion and Tissue Transplantation Services Professional Advisory Committee (JPAC) and its Standing Advisory Committees (SACs) has been kept under review since its creation in 1987.

The most recent review into JPAC's ways of working was carried out in 2023 and highlighted a number of opportunities for improvement to its structure and processes. The review's recommendations aimed to equip JPAC to better address emerging challenges, increase its resilience in the context of external factors, and ensure it remains sustainable for the future.

1.1. Mission statement

JPAC has two distinct remits:

- To be an advisory committee to the UK Blood Transfusion and Tissue Transplantation Services.
- To prepare detailed guidelines for the UK Blood Transfusion and Tissue Transplantation Services.

JPAC guidelines, which constitute JPAC's professional advice to the Services, aim to be evidence-based as far as possible and are reviewed regularly. The guidelines also take account of relevant Recommendations and Directives from European organisations such as the Council of Europe (CoE) and the European Union (EU). Services may choose to deviate from JPAC guidelines, but any such deviation should be substantiated and well documented.

1.2. Declaration of interests

JPAC ensures that no conflict arises, or could reasonably be perceived to arise, between the public duties and private interests, financial or otherwise, of its members. All members of JPAC, the EWG and the SACs are required to declare any interests upon appointment, and by annual declaration organised by the JPAC Office. Any new interests should also be declared at the next relevant meeting.

1.3. Transparency and openness

JPAC, the EWG and the SACs operate from a presumption of transparency and should be open as is compatible with the requirements of relevant legislation, such as the UK General Data Protection Regulation (UK GDPR) and the Freedom of Information Act (FOIA).

All proceedings should aim to maintain high levels of transparency, for example, by clear documentation of decision-making processes and by the timely publication of papers, minutes and other outputs from meetings where appropriate. The release of papers and proceedings of meetings are guided by the requirements of the FOIA and supported by NHS Blood and Transplant (NHSBT), the host organisation for JPAC.

Open discussion is encouraged, and meeting chairs should bear in mind the need to ensure that attendees are able to speak fully and frankly so as not to impede debate. Differences of interpretation and opinion should be impartially and unattributably recorded in meeting minutes. It is recognised that professional advice includes expert judgement in addition to objective or factual information, and wherever possible the degree of certainty and the rationale for judgements should also be recorded.

Further guidance on unanimity and dissenting views can be found in the **JPAC Ways of Working**.

Where possible, meetings should be held within an agreed regular schedule, but 'extraordinary' meetings may be held where there are unavoidable time constraints that may adversely impact donor or recipient care. Extraordinary meetings should be documented in the same detailed manner as routine meetings to ensure there is a clear audit trail showing how decisions were made.

2. Organisation of JPAC

Government devolution has empowered individual Health Departments to make their own policy decisions. Changes in the organisation and management of the Blood Transfusion and Tissue Transplantation Services throughout the UK, in 1997, resulted in the setting up of four National Services and the introduction of individual and statutory accountability vested in Chief Executives, for clinical governance and controls assurance.

The UK Forum was formed in 1999, consisting of the Chief Executives and Medical Directors of the four Services, and takes the lead in these discussions. Decisions on implementation and policy lie with the individual Chief Executives, their Service Boards and, where appropriate, their respective Health Departments. UK Forum agrees the Terms of Reference for JPAC.

The JPAC EWG, formed in 2005, coordinates the work of the individual SACs and reports to the overarching JPAC Board which itself reports directly to UK Forum through the Director.

SAC Chairs report on the progress of their previous year's activities at an annual review meeting with the Professional Director of JPAC. Workplans are produced annually, agreed between the SAC Chair and the Professional Director, and indicate the topics planned to be covered during the year. The collated JPAC workplan is then submitted to UK Forum annually. New developments during the year may arise and take precedence on the agendas of any group.

2.1. Committee structure and reporting lines

The JPAC structure is shown in **Figure 1**.

2.1.1. JPAC Office

The JPAC Office consists of the Professional Director of JPAC, the Deputy Professional Director of JPAC, the JPAC Scientific Publishing Manager, the Scientific Lead for Safety Policy (JPAC/SaBTO) and the JPAC Administrator.

Roles and responsibilities of the JPAC office are outlined in **3.2**.

The JPAC Office reports to the EWG via the Professional Director.

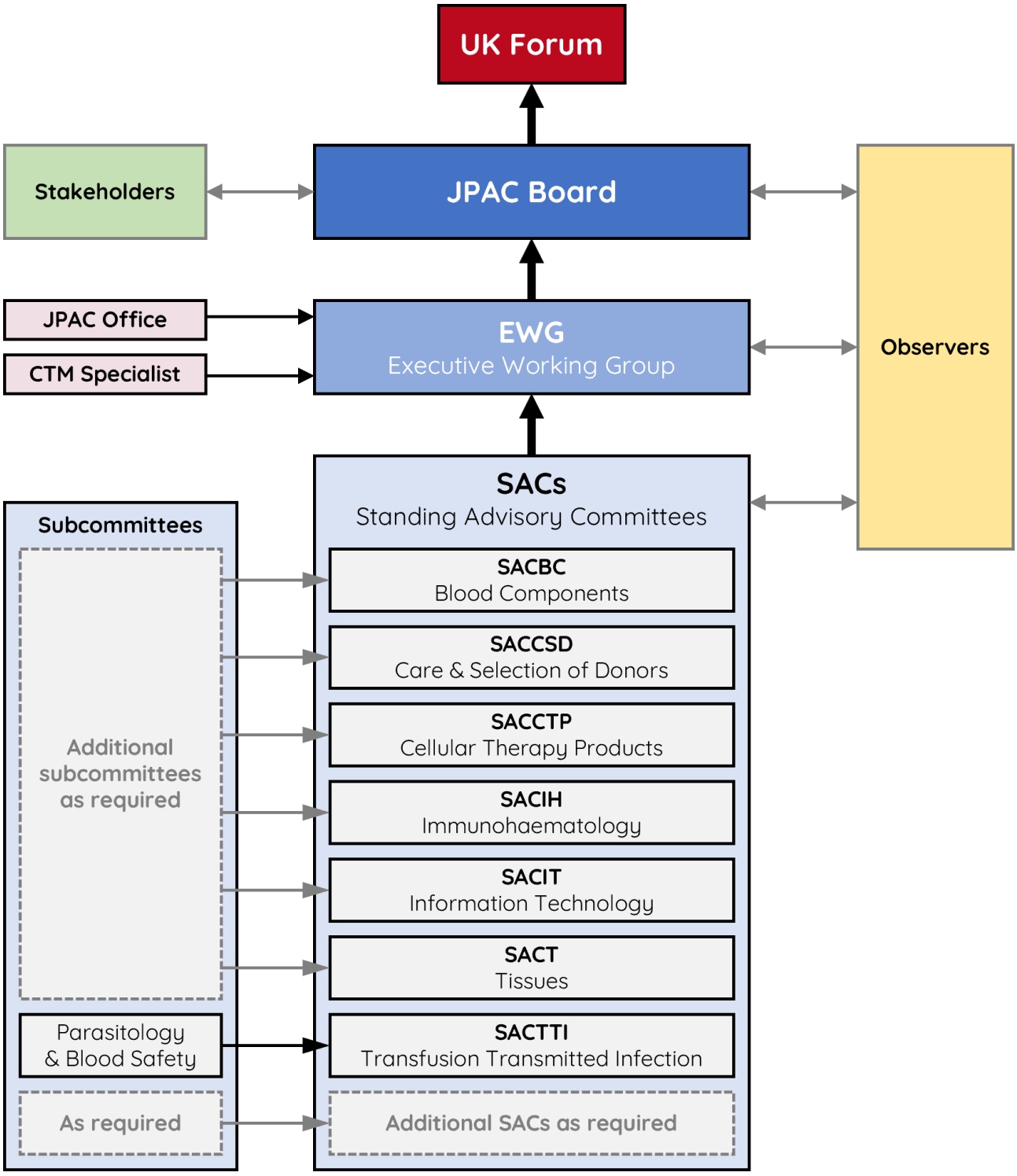

Figure 1: Structure and reporting lines of JPAC

2.1.2. Standing Advisory Committees

Each SAC consists of subject matter experts led by a Chair.

Roles and responsibilities within SACs are outlined in **5.2**.

The specific scope of each SAC is detailed in their own Terms of Reference, but a general remit applies to all (see **5.1**). There are currently six SACs, but SACs may be established and disbanded according to the needs of the Services, following JPAC and UK Forum approval.

Further SAC sub-committees may be set up with the approval of the Professional Director. These may be long-standing sub-groups, such as the SACTTI Working Party on Parasitology and Blood Safety, or 'ad hoc' working groups convened to consider specific issues within a clearly defined timeframe. Short-life working groups report back to their parent SAC and are disbanded upon completion of the task.

All SACs report to the EWG via their Chair, who will submit their recommendations for changes to guidance to the JPAC Office in the first instance. Some recommendations can be approved by the Professional Director but, depending on the nature of the change involved, approval will be sought from the EWG and then, if further discussion is required beyond this level, be submitted for approval by the JPAC Board.

Details of the Delegated Approval system can be found in the **JPAC Ways of Working**.

2.1.3. Executive Working Group

The EWG consists of the members of the JPAC Office (see **2.1.1**), the Chairs of the SACs and a Clinical Transfusion Medicine (CTM) Specialist who acts as a formal clinical representative to JPAC.

The EWG reports to the JPAC Board. The EWG is empowered to discuss and approve changes to guidance that do not require the attention of the full JPAC Board (see **4.1**) but will report such approvals to the JPAC Board at the next relevant meeting.

2.1.4. JPAC Board

The JPAC Board consists of the members of the EWG (see **2.1.3**), the Medical Directors of the four Services, and representatives from the UK Quality Managers group (UKQM), the Irish Blood Transfusion Service (IBTS), the Medicines and Healthcare products Regulatory Agency (MHRA), MHRA South Mimms Laboratories (formerly the National Institute for Biological Standards and Control, NIBSC) and the Human Tissue Authority (HTA).

The JPAC Board reports to UK Forum via the Professional Director. The JPAC Board discusses and approves guidelines changes and informs UK Forum of progress against the JPAC workplan at the next relevant meeting.

2.2. Observers

Observers may attend EWG/JPAC or SAC meetings at the discretion of the Professional Director or SAC Chair, respectively. If requested, observers may act as meeting participants but decision-making and lines of accountability must be well documented.

2.3. Lay representation

Many organisations within the health system have increased their commitment to lay representation within their advisory and decision-making structures and processes. The skills and expertise of lay representatives with professional backgrounds, while not directly relating to its remit, can contribute considerably to JPAC's work. Lay representation is defined as the inclusion of a representative who has personal experience of health or social care services relevant to the topics being discussed. Within the context of JPAC, this may include blood, tissue or stem cell donors and recipients, and advocates from relevant voluntary support organisations representing disease-specific patient groups or minority ethnic groups in the UK.

The JPAC Board includes permanent lay representation, appointed with the approval of the Professional Director of JPAC, according to the procedure described in the **JPAC Ways of Working**. Upon appointment of a lay representative, it is important that the purpose and reason for their inclusion is clear and that they understand the role that they are requested to fulfil within the remit of JPAC. Induction and ongoing support will be provided by JPAC Office.

While lay representatives provide valuable insight, the scientific and technical subject matter of SAC meetings means that permanent lay representation is not included on individual SACs. However, within their work programmes, SACs are expected to consult with lay representatives as part of stakeholder engagement where this is considered to be relevant and appropriate.

2.4. Engagement with stakeholders and end-users

JPAC has a strong commitment to undertaking external stakeholder consultation when considered appropriate to a work programme. This may include relevant external organisations, lay representatives, or wider consultation with stakeholders that are permanently represented on the JPAC Board (e.g. MHRA, HTA, UKQM).

End-users are likely to include healthcare professionals that access the JPAC website, refer to the Red Book, Donor Selection Guidelines or Geographical Disease Risk Index, or those who read Position Statements and other documents issued by JPAC.

JPAC's stakeholder and end-user engagement is informed by use of the Alliance of Blood Operators (ABO) Risk-Based Decision-Making Framework (RBDMF), itself designed to ensure appropriate end-user representation in managing and communicating blood safety risk. The framework provides guidance to SACs on JPAC's expectations relating to stakeholder consultation where it is appropriate to their work programmes. Explicit consideration of stakeholder consultation forms an integral part of the JPAC workplan, including timely identification of appropriate sources and justification, where needed, for not undertaking engagement at an early stage. More information on the ABO RBDMF can be found in the **JPAC Ways of Working**.

3. JPAC Board

3.1. Terms of Reference

The JPAC Board is required to:

- Oversee and coordinate the work of the EWG and the SACs so as to develop, maintain, produce and communicate the guidelines.
- Discuss and endorse the guidance produced by the SACs or their sub-committees.
- Ensure that all aspects relevant to the safety of blood, tissues and stem cells are covered by the various SACs and sub-committees.
- Ensure that appropriate discussions are held by the EWG and the SACs, and that the guidelines produced are based on robust evidence wherever possible.
- Ensure appropriate lay representation is included on the committee, and provide clear guidance with respect to the role that they are requested to fulfil within JPAC's remit.
- Ensure alignment with the legislative environment in the UK, in particular that of the UK Blood Safety and Quality Regulations (BSQR), and with applicable European legislation, such as the guidelines produced by the European Directorate for the Quality of Medicines & HealthCare (EDQM) of the CoE.
- Ensure the timely updating of the guidelines so they always reflect current best practice in the UK.
- Suggest areas for further exploration to appropriate bodies.
- Maintain close collaboration with its stakeholders.
- Support the Professional Director of JPAC in the preparation of reports and annual workplans for submission to UK Forum.

While JPAC is not responsible for implementation of guidelines within individual Services, it is important that JPAC is kept informed of implementation arrangements and dates across the UK Services. This is done through engagement with Quality Assurance Managers within each Service.

Any changes to the remit of JPAC must be approved by UK Forum.

3.2. Roles and responsibilities within the JPAC Office

3.2.1. Professional Director of JPAC

The Professional Director of JPAC is required to:

- Provide professional direction to JPAC, the EWG and the SACs.
- Set agendas for EWG and JPAC meetings based on submitted issues and ensure that meeting papers are circulated in a timely manner.
- Coordinate the work of all SACs; this may involve attending SAC meetings and, in the absence of a chair or deputy, chairing the meeting.
- Prepare the annual workplan for JPAC, the EWG and each SAC for submission to UK Forum.
- Ensure that its professional advice is communicated in a timely fashion to UK Forum for further decision making if required.
- Approve membership, remit and workplans of any SAC sub-committees.
- Hold annual review meetings with each SAC Chair to review the membership, remit and workplan of each individual SAC, and to discuss any issues.
- Organise appointments of SAC Chairs.
- Approve proposed SAC membership nominations by SAC chairs.
- Annually appraise SAC Chairs and provide written feedback to them for inclusion in their appraisal process with their employing authority.
- Ensure timely updates to the Red Book and promote its use as guidelines to the Services.
- Arrange distribution according to agreed procedures.
- Ensure that the JPAC website is maintained.
- Maintain close links with the HTA, MHRA, UKHSA and SaBTO.
- Act as UK representative, or put in place appropriately delegated representation, on the Council of Europe (CoE) CD-P-TS and GTS Committees and attend the meetings to ensure alignment of CoE and UK guidelines.
- Remain informed of developments in the European Union (EU) in respect of transfusion medicine.
- Communicate with SAC chairs to keep them up to date with CoE guidelines and developments in EU.
- Ensure a functional archive of JPAC work is maintained together with an audit trail of decisions made.
- Keep within the allocated budget.

- Approve guideline changes that do not require discussion by the EWG or the JPAC Board, as appropriate under the Delegated Approval system outlined in the **JPAC Ways of Working**.
- Be responsible for the line management, training and development of the Scientific Publishing Manager and the Scientific Lead for Safety Policy.

3.2.2. Deputy Professional Director of JPAC

The Deputy Professional Director of JPAC is required to:

- Support the Professional Director of JPAC in fulfilling their responsibilities.
- Deputise for the Professional Director as required due to annual leave, professional or sickness absence, including:
    - Chairing EWG and JPAC meetings.
    - Liaising with the JPAC Scientific Publishing Manager to respond to urgent requests for information from JPAC, UK Forum, the Services or other healthcare professionals.
- Support the Professional Director in developing and delivering the JPAC workplan through regular meetings and consultation.
- Attend EWG and JPAC meetings.

3.2.3. Scientific Lead for Safety Policy (JPAC/SaBTO)

The Scientific Lead for Safety Policy is required to:

- Work within the secretariat of the Advisory Committee for the Safety of Blood, Tissues and Organs (SaBTO), to support members of SaBTO and its sub-groups by producing policy papers, summary reports, workplans and meeting agendas.
- Provide scientific leadership in production of policy papers to the JPAC, the EWG and the SACs, working closely with the Professional Director, Deputy Director, Scientific Publishing Manager and SAC Chairs.
- Provide coordination of work relating to the safety of blood, tissues and organs by providing liaison between different decision-making bodies.
- Develop in depth familiarity with safety frameworks used by JPAC and SaBTO, and to work with project teams on their use.
- Produce reports for UK Forum and DHSC as required.

3.2.4. JPAC Scientific Publishing Manager

The JPAC Scientific Publishing Manager is required to:

- Support the Professional Director of JPAC, the JPAC Board, the EWG and the SAC Chairs.

- Arrange meetings of JPAC and the EWG, including setting the annual meeting schedule, with the agreement of the Professional Director.
- Ensure the timely circulation of EWG and JPAC meeting documents to attendees, including coordination with SAC chairs to organise papers submitted for discussion.
- Assist, develop and maintain partnerships between JPAC, its stakeholders, the four Services and the UK healthcare community.
- Manage the production of JPAC publications including the Donor Selection Guidelines (DSGs), the Guidelines for the Blood Transfusion Services in the United Kingdom (Red Book), Position Statements and other JPAC documents.
- Play a lead role in promoting the objectives of JPAC, contribute to its strategic direction, and work with the Professional Director and the SAC Chairs to ensure that JPAC-led areas of work are implemented efficiently and effectively.
- Manage the JPAC website and act as an outward-facing link to its end-users and the website service providers.
- Manage the JPAC budget, under the direction of the Professional Director, as an authorised signatory.
- Be responsible for the line management, training and development of the JPAC Administrator.
- Be responsible for developing and maintaining robust management of all areas of JPAC work including the JPAC website and document archive, ensuring that a consistent and professional level of service is achieved.
- Be responsible for maintaining governance of decision making and conduct, including clear documentation of proceedings and adherence to established approval pathways and lines of accountability.

3.2.5. JPAC Administrator

The JPAC Administrator is required to:

- Support the JPAC Scientific Publishing Manager.
- Support the production of JPAC publications including the Donor Selection Guidelines (DSGs) and the Guidelines for the Blood Transfusion Services in the United Kingdom (Red Book), Position Statement and other JPAC documents.
- Maintain the JPAC website and document archive.
- Provide administrative support to SAC Chairs as required, including organising meetings and preparing documents.

4. Executive Working Group

4.1. Terms of Reference

The EWG is required to:

- Coordinate the workplans of the individual SACs.
- Provide a forum for cross-SAC discussion.
- Discuss and refine guideline recommendations presented by SAC Chairs, for subsequent submission to the JPAC Board where further discussion is required.
- Approve guideline changes that do not require consideration or approval by the full JPAC Board as appropriate under the Delegated Approval system outlined in the **JPAC Ways of Working**.
- Conduct regular horizon scanning.

4.2. Roles and responsibilities within the EWG

Aside from the members of the JPAC Office (whose roles and responsibilities are outlined in **5.2**) and the Chairs of the SACs (see **5.2.1**), the EWG includes a CTM Specialist.

4.2.1. Clinical Transfusion Medicine Specialist

The CTM Specialist is required to:

- Provide JPAC with advice, updates and relevant information from the clinical user community.
- Provide a link from JPAC to clinical users through other organisations e.g. British Society for Haematology (BSH), national blood transfusion committees across the UK, SHOT, etc.

5. Standing Advisory Committees

5.1. Terms of Reference

5.1.1. General to all SACs

All SACs and SAC sub-committees are required to:

- Provide professional and technical advice to the four UK Services.
- Prepare detailed service guidelines for the UK Blood Transfusion Services, taking account of the Blood Safety and Quality Regulations (2005), the Human Tissue (Quality and Safety for Human Application) Regulations 2007 and future UK legislation affecting the Services.
- Provide documented summaries of the evidence and arguments on which these service guidelines are based.
- Keep guidelines up to date in the light of developments in scientific and medical knowledge and changes in the regulatory and legislative environment, consistent with good practice and 'state of the art' provisions.
- Provide scientific, medical and technical information that may be adapted by Services for the purposes of staff training.
- Ensure JPAC is kept informed of any significant developments both nationally and internationally within the remit of the SAC.
- Coordinate with other SACs and other relevant UK working groups (where appropriate).
- Contribute content to the JPAC website (where appropriate).

5.1.2. SAC on Blood Components (SACBC)

The Standing Advisory Committee on Blood Components is required to:

- Set evidence-based (where possible) specifications for blood components.
- Develop and review validation processes for novel blood components.
- Assess acceptability for use of novel blood components.
- Assess and set requirements for storage and transport systems for blood components.
- Coordinate with SACIT regarding labelling and unique identification of blood components.
- Develop generic protocols for evaluating methods for the collection and processing of blood and blood components.

5.1.3. SAC on Care and Selection of Donors (SACCSD)

The Standing Advisory Committee on Care and Selection of Donors is required to:

- Review and update guidance on staffing, environment, equipment and procedures for blood donation sessions.
- Coordinate with SACTCTP regarding donor selection criteria.
- Coordinate with SACTTI to ensure integrated advice on all aspects of microbiological safety of donors and donations.
- Be responsible for reviewing and updating the Donor Selection Guidelines for:
    - whole blood and components (WB-DSG).
    - the Geographical Disease Risk Index (GDRI).

5.1.4. SAC on Immunohaematology (SACIH)

The Standing Advisory Committee on Immunohaematology is required to:

- Set guidelines on the immunohaematological testing of donors and patients by serological and NAT methods.
- Coordinate with SACBC and SACCSD in areas where there is an immunohaematological interest (e.g. HLA screening assays).
- Liaise with MHRA South Mimms (formerly NIBSC) on availability, development and use of standard reference preparations and reagents for immunohaematology, histocompatibility and immunogenetics.

5.1.5. SAC on Information Technology (SACIT)

The Standing Advisory Committee on Information Technology is required to:

- Define standards and/or guidance for inclusion in the Guidelines for the Blood Transfusion Services in the UK (Red Book), in conjunction with other SACs where appropriate.
- Review relevant international and NHS guidelines, legislation and developments in IT and assess their relevance for the UK.
- Promote commonality and define and recommend standards for the UK services to JPAC, including standards on data structures, delivery mechanisms and labelling.
- Administer the Services' database on blood component labels and barcodes.
- Recommend, support and advise on strategies and change programmes for the implementation of standards in the UK Services and hospitals.
- Promote the use of electronic communication and data interchange.

- Maintain relationships with national and international groups to better understand the development of standards in IT, including Tissue Services standards groups and Stem Cell standards groups.

5.1.6. SAC on Cellular Therapy Products (SACCTP)

The Standing Advisory Committee on Cellular Therapy Products is required to:

- Provide high quality professional advice on matters relating to cellular therapy products, including:
    - the assessment, counselling, consent and care of donors or relatives.
    - the collection of cells and their processing, quality assessment, storage, transportation and issue for clinical use or other purposes.
    - the labelling and unique identification of cellular products.
    - the donation of stem cells for advanced therapy medicinal products (ATMP) starter materials.
- Be responsible for reviewing and updating chapters related to cellular therapy products in the Guidelines for the Blood Transfusion Services in the UK (Red Book).
- Be responsible for reviewing and updating the Donor Selection Guidelines for:
    - bone marrow and peripheral blood stem cells (BM-DSG).
    - cord blood (CB-DSG).

5.1.7. SAC on Tissues (SACT)

The Standing Advisory Committee on Tissues is required to:

- Provide high quality professional advice on matters relating to tissues from deceased and living donors, including:
    - the assessment, counselling, consent and care of donors or relatives.
    - the collection of tissues and their processing, quality assessment, storage, transportation and issue for clinical use or other purposes.
    - the labelling and unique identification of tissues.
- Be responsible for reviewing and updating chapters related to tissues in the Guidelines for the Blood Transfusion Services in the UK (Red Book).
- Be responsible for reviewing and updating the Donor Selection Guidelines for:
    - deceased donors of tissue (TD-DSG).
    - living donors of tissue (TL-DSG).

5.1.8. SAC on Transfusion Transmitted Infection (SACTTI)

The Standing Advisory Committee on Transfusion Transmitted Infection is required to:

- Maintain awareness of new or previously unrecognised ('emerging') microbiological threats to safety of blood and tissues.
- Advise on the epidemiological basis for deferral of particular donor demographic groups, in respect of both recognised and emerging transfusion transmissible agents.
- Recommend laboratory and related procedures for detection and exclusion of donations that may pose a microbiological risk.
- Coordinate with SACCSD and, where appropriate, prepare joint recommendations to JPAC that take account of all relevant aspects of microbiological safety of donors and donations.
- Coordinate with SACBC and SACTCTP on guidance to improve microbiological safety of donations.
- Liaise with MHRA South Mimms (formerly NIBSC) on the availability, development and use of standard reference preparations and reagents for microbiological testing of donors and donations.

5.2. Roles and responsibilities within Standing Advisory Committees

Individuals may contribute to a SAC in the following roles:

- Member – a subject matter expert appointed by the SAC Chair for their relevant knowledge and experience.
- Representative – a nominated spokesperson from another SAC, working party or other relevant stakeholder group who participates in discussion and contributes to decision-making.
- Observer – invited to attend by the SAC Chair, usually in a non-participating capacity. Although any input should be considered by attendees, observers are not expected to take decision-making responsibility.

It is important to note that there is a degree of overlap within the roles given above, and some individuals may participate in multiple roles. When it is relevant to decision-making, the capacity in which an individual participates in proceedings should be clearly understood and documented.

For some SACs, lay representation (as outlined in the **JPAC Ways of Working**) is also encouraged.

5.2.1. SAC Chair

SAC Chairs are required to:

- Appoint members, with agreement of the Professional Director of JPAC, according to the rules as outlined in the **JPAC Ways of Working**.

- Consider appropriate succession planning for the SAC, including the replacement of nominated roles (i.e. Chair, Deputy Chair, Secretary) and the encouragement of new members.
- Perform annual reviews with members as part of their appraisal or performance review.
- Set agendas for meetings; ensure that relevant topics are discussed.
- Ensure that horizon scanning in the relevant area is a standing item on every SAC meeting agenda.
- Ensure that SAC recommendations are presented to JPAC and endorsed in a timely manner prior to incorporation in guidelines.
- Ensure timely update of relevant chapters and supplements.
- Ensure that the time of the experts is used most effectively.
- Ensure that relevant European legislation is reviewed at the request of the Professional Director. This task may need to be delegated to a few members, which should include the Chair.
- Ensure that appropriate communication takes place with other relevant groups within the four UK Blood Services.
- Be responsible for encouraging and maintaining effective communication with the other SACs.

Chairs are accountable to the Professional Director of JPAC. They are appointed by the Professional Director and the Medical Directors of the UK Services, according to the recruitment process outlined in the **JPAC Ways of Working**, and their appointment is reviewed every three years.

5.2.2. SAC Deputy Chair

Deputy SAC Chairs are required to:

- Deputise for the SAC Chair as required due to annual leave, professional or sickness absence, including:
    - Chairing SAC meetings.
    - Liaising with the JPAC Scientific Publishing Manager to respond to urgent requests for information from JPAC, UK Forum, the Services or other healthcare professionals.
- Support the SAC Chair in developing and delivering the SAC workplan through regular meetings and consultation.

Deputy Chairs will usually be existing SAC members. If there is no formal Deputy Chair, a SAC member may be nominated by the SAC Chair to temporarily deputise when required.

5.2.3. SAC Secretary

SAC Secretaries are required to:

- Organise meetings and papers.

- Document proceedings (e.g. minutes).
- Support the SAC Chair.

SAC Secretaries will usually be existing SAC members. Appointing a Secretary is optional within each SAC, left to the discretion of the Chair, though it is encouraged if no formal Deputy Chair has been appointed.

5.2.4. SAC Members

SAC members will be appointed by the SAC Chair, in consultation with the Professional Director of JPAC. The number of members will be left to the discretion of the Chair, but generally no more than 10 would be expected on each SAC. There is no maximum period for membership although each SAC's membership should be regularly reviewed by its Chair. SAC Chairs are expected to consider succession planning for outgoing members, and should aim to stagger the appointment of new and replacement members to avoid turnover of the whole committee at the same time.

Unless specifically stated otherwise, SAC members are appointed foremost as subject matter experts to fulfil the role of the SAC, rather than as representatives of their particular profession, employer or interest group. However, whilst appointments should be made primarily on the basis of individual expertise, achieving representative membership from across the four Services is encouraged, as it brings wider experience to the SAC and contributes to UK-wide consideration of the impact of decision-making.

It is also advisable that there are members from outside the UK Services to provide SACs with alternative perspectives from relevant stakeholders.

In view of the complexity of the guidelines, flexibility is required and all SAC members are expected to work responsively, efficiently and effectively.

6. Outputs from JPAC

6.1. Guidelines for the Blood Transfusion and Tissue Transplantation Services in the UK

The Guidelines for the Blood Transfusion and Tissue Transplantation Services in the United Kingdom (known as the Red Book) contain guidelines and standards to be met in the care and selection of donors and by the resulting components and products. The Red Book describes technical details of the processes involved but does not cover the clinical use of the components and products.

The contents of the Red Book are reviewed regularly. A Change Notification system is in place to ensure that new guidelines are communicated to the Services.

6.2. Donor Selection Guidelines

The Donor Selection Guidelines (DSGs) are supplements to the Red Book, divided into the following:

- Bone Marrow & Peripheral Blood Stem Cells (BM-DSG)
- Cord Blood (CB-DSG)
- Tissue – Deceased Donors Donor Selection Guidelines (TD-DSG)
- Tissue – Living Donors (TL-DSG)
- Whole Blood and Components (WB-DSG)
- Geographical Disease Risk Index (GDRI)

The entries within each DSG are reviewed regularly. A Change Notification system is in place to ensure that new guidelines are communicated to the Services.

6.3. JPAC Website

The JPAC website is available at **www.transfusionguidelines.org** and is publicly accessible.

The website hosts the Red Book and the DSGs, as well as the JPAC Document Library.

The website is maintained by the JPAC Scientific Publishing Manager and the JPAC Administrator, in conjunction with the third-party service provider.

6.3.1. Red Book and DSGs (live version)

The current version of the Red Book and each DSG is available on the website and is maintained as a digital (online) resource only. Previously published hardcopies of the Red Book are now considered obsolete.

Changes to the guidelines indicated by issued Change Notifications are reflected on the website on the date of publication. Each DSG entry indicates the version of the guidelines at which an update last occurred and describes the reasons for change from the previous entry.

6.3.2. Source files (offline version)

Static versions of the live JPAC Donor Selection Guidelines are available to be downloaded for offline (i.e. non-networked) use, known as source files. These include:

- PDF versions of each complete DSG and the GDRI
- A combined offline browser version (formatted html pages) of the WB-DSG and GDRI.

The currently available Source Files represent the current live version of each DSG and a new source file is generated by the JPAC Office whenever a change is made to a particular DSG. During the Change Notification pre-publication stage (i.e. Quality Assurance departments of the four Services have been informed of an upcoming change), both the current and new versions of the source files are made available on the website. When a Change Notification is published, the new version of the source file becomes the current version, and the previous version is removed from the website.

Guideline users can issue printed controlled copies of the Source Files but control of such copies is the responsibility of each Service. JPAC ensures that any changes to the live guidelines are equally applied to the Source Files (and informs Quality Assurance departments of the four Services through the Change Notification process) but is not responsible for informing individual users of changes to the files or a failure to update locally stored versions accordingly.

6.4. Document Library

The Document Library is a repository for documents relevant to the Services. Some of the documents are issued by, or on behalf of JPAC, whilst others are directives, guidelines or advice originating from other sources.

6.4.1. Change Notifications

Change Notifications are the formal notification path used by JPAC to notify users of its guidelines of upcoming approved changes to the Red Book and the DSGs. They describe the relevant changes (e.g. current, new and removed text), the chapter or DSG entry to which they will apply and the publication date.

Change Notifications are prepared by the JPAC Office and co-signed by the Professional Director of JPAC and the Chair of the relevant SAC responsible for the change.

The issuing of Change Notifications occurs in two stages:

- **Pre-publication** – a Change Notifications is circulated to Quality Assurance departments in the four UK Services ahead of the planned publication date, to allow sufficient time for gap analysis, and changes to procedures, staff training and materials that might be required for implementation.
- **Go-live** – the Change Notification is enacted on the planned publication date, with the changes made to the Red Book or DSGs.

The pre-publication period for Change Notifications is agreed between the relevant SAC Chair and the JPAC Scientific Publishing Manager, and will vary according to its scope and urgency:

- Urgent changes – 1-2 weeks.
- Most changes – 4 weeks.
- Significant changes – 6-12 weeks.

Once published, Change Notifications are available on the website.

6.4.2. Risk Assessments

Risk Assessments of transfusion transmissible infectious agents are carried out by SACTTI on a rolling basis. Most Risk Assessments have a 2-3 year review period but are also updated whenever a significant change is identified.

A list of current Risk Assessments is available on the website. Full Risk Assessments are not routinely published for public access, although they may be requested from the JPAC Office.

6.4.3. Position Statements

Position Statements are reviewed regularly and revised as required. Updated Position Statements may also facilitate necessary revisions to the Red Book or the DSGs.

Current Position Statements are available on the website. Previous versions of Position Statements are available from the JPAC Office on request.

6.4.4. General Documents

The website currently hosts two types of General Document:

- Documents issued by JPAC that are not Change Notifications, Risk Assessments or Position Statements
- Documents otherwise affecting the UK blood supply that are not issued by JPAC

Documents issued by JPAC are reviewed regularly and updated versions published as required. While the JPAC Office makes every effort to ensure the latest version of documents not issued by JPAC are available, it cannot guarantee those documents are reviewed regularly or that updated versions have been forwarded to JPAC Office for publication on the website.

6.4.5. Supporting Papers

Documents which have supported a change to the guidelines, usually submitted to a JPAC, EWG or SAC meeting as an accompanying paper, are made available on the website where applicable. Supporting papers which are not available in the Documents Library are available from the JPAC Office on request.