Guidelines to be followed by centres, services and units in order to be designated as Reference Centres, Services and Units of the National Health System, as agreed by the Interterritorial Board

31. ALLOGENIC HEMATOPOIETIC PROGENITOR CELL TRANSPLANTATION IN CHILDREN

A. *Rationale for the proposal*

► Epidemiological data (incidence and prevalence).	In 2007, 2021 Hematopoietic Progenitor Cell Transplantation have been performed in our country (44.85 pmp), out of these 1312 were autologous (29.2 pmp) and the other 709 were allogenic (15.7 pmp). These transplantations are mainly indicated for lymphoproliferative diseases (62%), leukaemia (27%) and other (11%).
► Data on the use of the Allogenic Hematopoietic Progenitor Cell Transplantation in children.	127 allogenic transplantations have been performed in children, 62 of them are from related donors and the other 65 are from unrelated donors.

B. Guidelines to be followed by Centres, Services and Units in order to be designated as Reference Centres, Services and Units for allogenic hematopoietic progenitor cell transplantation in children

If the unit would fulfil the JACIE[1] (Joint Accreditation Committee of European Society of Blood and Marrow Transplantation) criteria only the completion of results indicators would have to be assessed.

► Specific professional experience: - Activity: • Number of Allogenic Hematopoietic Progenitor Cell Transplantation procedures in children that should be performed in a year to ensure an adequate care.	A minimum of 30 Allogenic Hematopoietic Progenitor Cell Transplantation (considering both the related donors and the unrelated donors) performed in the last 3 years and, out of these, at least 3 in children per year.

- Other data: research on the subject, postgraduate teaching, continuing training, etc.	- Accredited postgraduate teaching: unit participation in the internship and residency programme of the centre. - Continuing training programme standardized, and authorized by the centre board of directors.
► Specific resources of the Reference Centres, Services and Units:	In addition to the human and material resources, applied to the paediatric environment, collected in the Royal Decree 1301/2006, November 10th, establishing the general basis for quality and safety in donation, harvesting, assessment, processing, preservation, storage, and distribution of human cells and tissues and approving the coordination and functioning regulations for its use in humans, the unit must have the following resources:
- Human resources required for the adequate performing of Allogenic Hematopoietic Progenitor Cell Transplantation procedures in children.	- Doctor specialized in haematology, paediatrics or oncology.
- Basic education of the team members[a].	- Doctor specialized in haematology, paediatrics or oncology with at least 2 years experience in Hematopoietic Progenitor Cell Transplantation in children.
- Specific equipment required for the adequate performing of Allogenic Hematopoietic Progenitor Cell Transplantation procedures in children.	- The centre must have all paediatric specialties required for an adequate programme performing allogenic hematopoietic progenitor cell transplantation in children, including isolation and intensive care units.
► Resources from other units and services besides those belonging to the Reference Centres, Services and Units required for the adequate performing of Allogenic Hematopoietic Progenitor Cell Transplantation procedures in children.	- Histocompatibility laboratory accredited by an international organization.
► Procedure and clinical results indicators of the Reference Centres, Services and Units [b]:	**The indicators will be agreed with the Units that will be designated.**

► Existence of an adequate IT system (Type of data that the IT system must include to allow identification of the activity and evaluation of the quality of the services provided)	Participation in the Registry of the European Group for Blood and Marrow Transplantation (EBMT) and that the Spanish Group for Haematopoietic Transplantation (GETH) and the Spanish Group for Bone Marrow Transplantation in children (GETMON) may access the data or participation in the GETH/GETMON registry, completing the corresponding Spanish form "MED-A" and monitoring forms, notifying of all casuistic and progress monitoring. - The unit must have the required data which should be sent to the Spanish National Health Service Reference Centres, Services and Units Appointment Commission Secretariat for yearly reference unit monitoring.

[a] *Criteria to be assessed by the Appointment Commission.*

[b] *Clinical results standards, agreed to by the experts group, will be assessed, initially by the Appointment Commission, while in the qualification process, as more information from the Reference Centres, Services and Units is being obtained. Once qualified by the Appointment Commission, the Quality Agency will authorize its compliance, as for the rest of guidelines.*

Bibliography:

[1] Available in http://www.jacie.org/portal/jacie/standards . Last updated 19-05-2008.