

**South West Transfusion Practitioners (SWTP) meeting**  
**Oake Manor, Taunton**  
**Thursday 11<sup>th</sup> July 2013, 10.00 – 15.45**

<u>Attendees</u>	<u>Apologies</u>
<b>Grace Eccles</b> , Swindon (Chair) <b>Alison Western</b> , Taunton <b>John Faulds</b> , Truro <b>Nicki Jannaway</b> , Truro <b>Rob McGowan</b> , Cheltenham and Gloucester <b>Emma Chambers</b> , North Bristol <b>Veronica Sansom</b> , Exeter <b>Georgina Vincencova</b> , Plymouth <b>Alison Hill</b> , Yeovil <b>Marianne McGowan</b> , BMI Winterbourne <b>Katy Hurrell</b> , NHSBT <b>Alister Jones</b> , NHSBT	Julia Pinder, Torbay Soo Cooke, University Hospitals Bristol Sue Scott, Bath Carol McGovern, Truro Lesley Jones, North Bristol Helen Maria, Bath Kim Locke, Bournemouth Norjin Pejic, Circle Bath. Julie Dickens, Prospect Hospice, Swindon Clare Thompson, Poole Vicki Chandler-Vizard, Poole Anne Maratty, Salisbury Jaime Denham, Somerset Partnership Caroline Blake, Dorchester Claire Husain, UKSH Bristol Kathleen Wedgeworth, Barnstaple Alison Rundle, PCH Biddy Ridler, Exeter Louise Jefferies, Weston Julie Ryder, Swindon Sally Caldwell, Swindon

1.	Introduction & apologies, minutes of last meeting and matters arising	Action
	<ul style="list-style-type: none"> <li>• GE opened the meeting with a welcome, and a round of introductions.</li> <li>• Minutes from the meeting on 21.03.13 agreed as an accurate record [all actions completed].</li> </ul>	
2.	TP 'Open floor' session	
	<ul style="list-style-type: none"> <li>• <b>Nicki Jannaway</b> from Truro discussed 'my work with the medical school', focussing on the work to create a set of transfusion competencies for students at Peninsula medical school (it was recognised that transfusion training in these groups is low); these competencies to be applied to junior Drs that will work in Truro, Derriford, Torbay and Exeter. A pilot of these local competency assessments was run in April, however the NBTC felt they were not workable. The way forward is to self-assessment (possibly 'e-learning') using a knowledge assessment. A discussion around e-learning, transfusion training for Drs and the culture of 'error' followed. GV noted that LBT e-learning is a pre-requisite to competency at Derriford and that wrong blood in tube incidents are now to be reported to junior Drs' supervising tutors.  Note: Exeter medical school is separating from Peninsula.</li> <li>• <b>John Faulds</b> from Truro gave an update on vaginal cell salvage during delivery; a research project with the question 'is vaginal blood loss suitable for re-infusion?' is in the testing phase – patients receive an information leaflet, blood is collected and processed, then sent to the lab. for testing (including microbiology); no re-infusion is taking place; started in Feb. and aiming for 50 cases (41 so far); 3M helped develop the drapes to capture blood loss, so far the system appears to work.  John also gave an update on IV iron in postpartum haemorrhage: Monofer is being</li> </ul>	

	used, patients checked at 14 days have average Hb rise of 2.7g/dl; JF compared this to IV iron given in 2 <sup>nd</sup> /3 <sup>rd</sup> trimester where av. Hb rise is only 1g/dl – it is thought this is group more iron deficient).	
<b>3.</b>	<b>Non-invasive Hb monitoring</b>	
	<ul style="list-style-type: none"> <li>A presentation on non-invasive Hb monitors (made by Masimo) – the ‘Total Haemoglobin’ continuous monitor and ‘Pronto-7’ spot check device; a discussion around the potential applications of these as POCT devices followed (including the reliability of results).</li> </ul>	
<b>4.</b>	<b>New NBTC &lt;NPSA&gt; competencies</b>	
	<ul style="list-style-type: none"> <li>GE led a round table discussion on the proposed revised blood transfusion competencies distributed in May; a few TPs had fed back directly, one comment was that the questions were too open-ended, another that the term wristband appears when it is not emphasised this is for in-patients (and the out-patients could have a different form of ID); there was a question whether these were required to be written or oral answers (additional guidance required maybe); NJ noted that Truro were essentially doing this all already; a discussion around how competency and training was managed followed, with concern highlighted about using clinical educators (reduction in quality of training).</li> <li>AJ highlighted that the NBTC will be going ‘back to the drawing board’ with these competencies following certain other feed back, and they will be looking for TP representatives from each region to participate in a workshop in September. AJ offered to help co-ordinate with nominees from the South West, no objections from the room.</li> </ul>	<b>AJ</b>
<b>5.</b>	<b>Consent – Alister Jones</b>	
	<ul style="list-style-type: none"> <li>AJ delivered a presentation on the SaBTO recommendations on Consent for Transfusion (<i>A copy of the presentation will be circulated with these minutes</i>); this presentation was developed for use by TPs/HTTs within their hospitals to promote and support consent for transfusion.</li> <li>AW noted that the learnbloodtransfusion e-learning course on Consent for Transfusion was equally applicable and useful for all consent.</li> </ul>	
<b>6.</b>	<b>BBTS TP conference/group</b>	
	<ul style="list-style-type: none"> <li>AJ gave some feedback from the national TP conference in May as only one TP from the South West attended (and was not present); a good level of attendance (58), the programme was focussed towards helping the TP manage their role.</li> <li>A round table discussion on the BBTS national TP group ~ could queries be fed up to this group (and on to TP rep.s on other national committees), AJ said this should be possible in the future; when will the national TP framework be published (especially as the CPA/MHRA are asking more about TPs); AJ to follow up.</li> </ul>	<b>AJ</b>
<b>7.</b>	<b>PBMP report (Paper A) – Alister Jones</b>	
	<ul style="list-style-type: none"> <li>AJ highlighted the SW regional issues data in the report.</li> <li>No specific feedback from the group, apart from a suggestion that FFP reduction might be due to increasing awareness/use of PCC.</li> <li>AW also noted that Fibrinogen concentrate might have an impact on Cryoprecipitate use in the future.</li> </ul>	

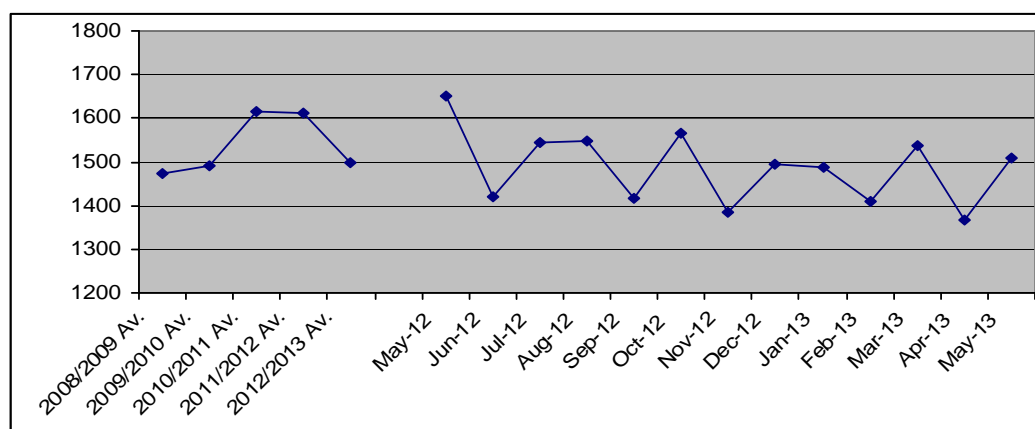
	<b>UK Cell Salvage Action Group report (Paper B) – John Faulds</b>	
	<ul style="list-style-type: none"> <li>• JF highlighted that there was a desire for this group (UKCSAG) to continue.</li> <li>• Re: proposed cell salvage ‘centres of excellence’ – JF is uncertain if this is one per country or more/less.</li> </ul>	
<b>8.</b>	<b>Group discussion of SHOT/SABRE/Near Miss incidents</b>	
	<ul style="list-style-type: none"> <li>•</li> </ul>	
<b>9.</b>	<b>Any other business (including date of next meeting and Chair)</b>	
	<ul style="list-style-type: none"> <li>• AJ: next TP meeting will be a development day in Oct./Nov. – no chair required; Nicki Jannaway has offered her services to chair at the meeting after this (early 2014).</li> </ul> <p><b>[Post meeting note: the next SWTP meeting will be held on 4<sup>th</sup> November]</b></p>	

**South West Transfusion Practitioners Meeting - Thursday 11<sup>th</sup> July 2013**  
**NHSBT Patient Blood Management Practitioner update**

**SW RTC blood component issues: 2008 onwards**

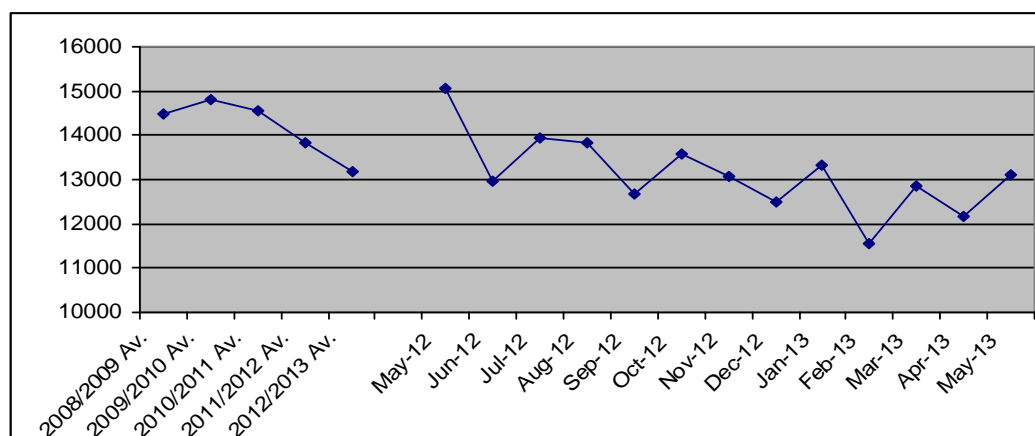
**Platelets**

A 7% drop in regional issues from 2011/12 – 2012/13 (continues to better national figures); issues continuing to hold / reduce.  
 Thanks for all the good work on this!!



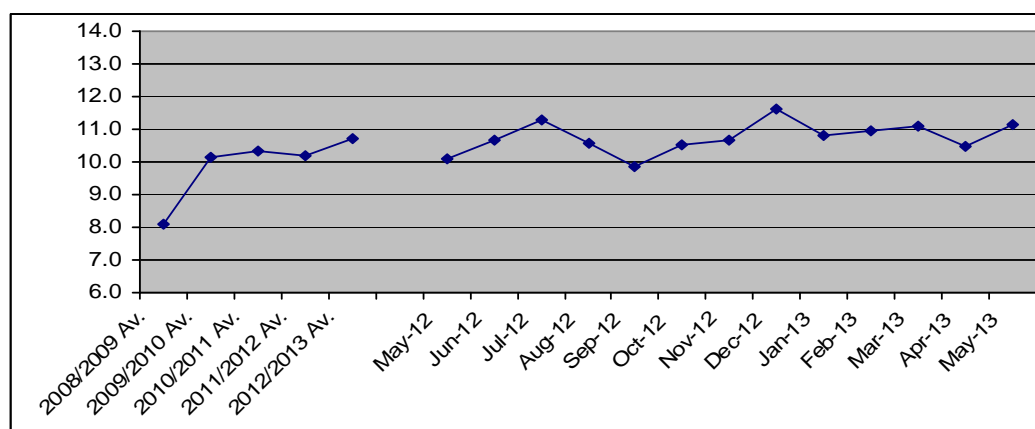
**Red cells**

A significant reduction in red cell use nationally has implications for planning at NHSBT; there is a pressing need to determine any specific reasons so as to establish if this will drop will remain / continue.  
 Thank you for your good work in reducing (inappropriate) use of red cells!!



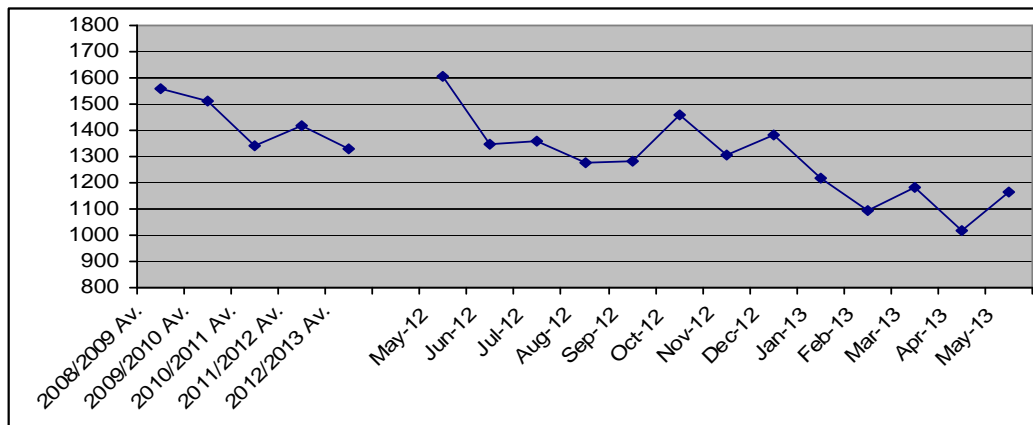
**O- red cells (%)**

%age issues is gradually increasing; please continue to monitor and challenge inappropriate use.



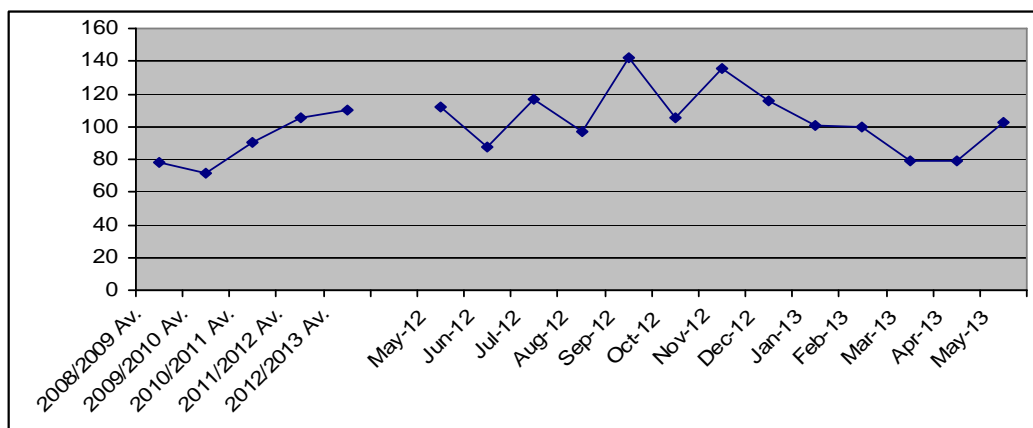
### FFP

Issues are declining in the region, despite an expected increase in use of FFP in shock packs/protocols.

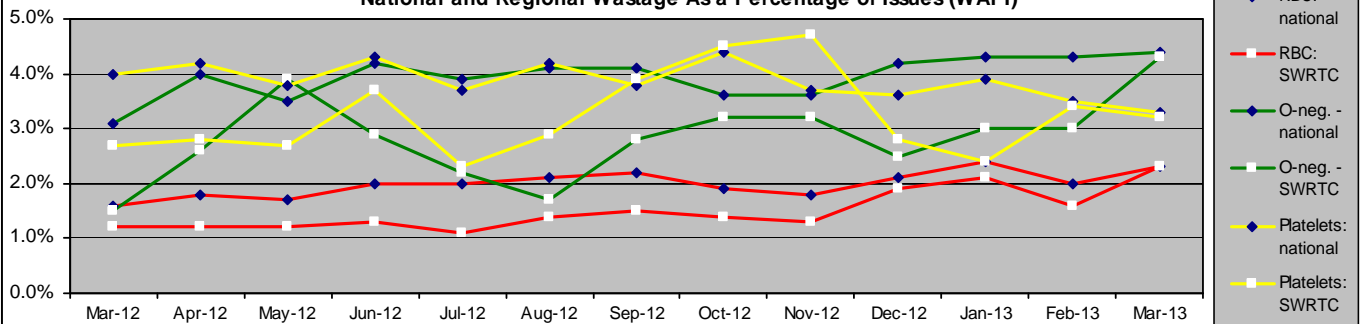


### Cryoprecipitate (pooled)

Year on year increase in issues continues, but less so in 2012/13 (tailing off toward the end of the year); any thoughts on future direction?



National and Regional Wastage As a Percentage of Issues (WAPI)



### Regional Events

16<sup>th</sup>-19<sup>th</sup> Sept: Non-medical authorisation of blood course, Filton Blood Centre, Bristol  
19<sup>th</sup> Nov: South West RTC, Oake Manor, Taunton

### National & International Events

23<sup>rd</sup>-25<sup>th</sup> Sept: IBMS Biomedical Science Congress, Birmingham; [www.ibms.org/go/congress](http://www.ibms.org/go/congress)  
16<sup>th</sup>-18<sup>th</sup> Oct: BBTS Annual Conference, Birmingham; [www.bbts.org.uk/](http://www.bbts.org.uk/)

### For further information please contact:

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Katy Hurrell Patient Blood Management Practitioner (Exeter), [katy.hurrell@nhsbt.nhs.uk](mailto:katy.hurrell@nhsbt.nhs.uk) , 01392 310135

### Useful links:

SWRTC website:

<http://www.transfusionguidelines.org/Index.aspx?Publication=RTC&Section=28&pageid=1062>

NHSBT Hospital Liaison monthly 'update':

<http://hospital.blood.co.uk/>



## **For the SWTP meeting – 11/07/2013**

UK Cell Salvage Action Group - Update

John Faulds

### **Presentation at BBTS**

There will be a UKCSAG representation at BBTS meeting on the 18<sup>th</sup> October 2013, titled "Get Your Own Back".

### **UKCS Database**

The funding for the UKCS database has been carried forward into this financial year, where they are looking at funding a PBM tool that includes cell salvage.

### **JPAC Website**

A new host platform has been purchased for a new JPAC website. With the new website planned from Autumn 2013.

The UKCSAG will update sections on website.

### **Australian Guidelines on Cell Salvage**

The Australian group requested using some of the UKCSAG tools in cell salvage, the group has approved their use.

### **Quality Assurance**

The document has been sent out to the group for final approval.

### **Training**

The group are looking at the possibility of having centres of excellence in the use of Cell Salvage?

Factsheets are been updated.