

South East Coast Regional Transfusion Team Meeting

By Telecon

Thursday 4 April 2019

APPROVED MINUTES

<p>Present:</p> <p>Howard Wakeling</p> <p>Anwen Davies</p> <p>Fatts Chowdhury</p> <p>Visuvanathan Jeyakumar</p> <p>Nelson Johnson</p> <p>Lisa March</p> <p>Ruth O'Donnell</p> <p>Simon Rang</p> <p>Richard Whitmore</p> <p>Minutes: Frances Moll</p> <p>Apologies:</p> <p>Lynne Balderstone</p> <p>Robert Goddard</p> <p>Emma O'Donovan</p> <p>Zoe Sammut</p>	<p>HW</p> <p>AD</p> <p>FC</p> <p>VJ</p> <p>NJ</p> <p>LM</p> <p>RO'D</p> <p>SR</p> <p>RW</p> <p>FM</p> <p>LB</p> <p>RG</p> <p>EO'D</p> <p>ZS</p>	<p>RTC Chair, Consultant Anaesthetist, Western Sussex Hospital NHS FT</p> <p>Patient Blood Management Practitioner, NHSBT</p> <p>Consultant Haematologist in Transfusion Medicine Imperial College Healthcare NHS Trust/ NHSBT</p> <p>Blood Transfusion Site Lead, Ashford & St Peter's Hospital and Royal Surrey County Hospital, Berkshire and Surrey Pathology Services</p> <p>Blood Transfusion-Site Lead, Berkshire and Surrey Pathology Services</p> <p>Transfusion Practitioner, Queen Elizabeth, The Queen Mother Hospital</p> <p>Transfusion Practitioner, Western Sussex Hospital NHS FT</p> <p>Consultant Anaesthetist, Queen Elizabeth, The Queen Mother Hospital</p> <p>Customers Services Manager, NHSBT</p> <p>SEC RTC Administrator, NHSBT</p> <p>Deputy Transfusion Practitioner, Maidstone and Tunbridge Wells NHS Trust</p> <p>Chief BMS/TLM, Queen Elizabeth, The Queen Mother Hospital</p> <p>Consultant Haematologist, East Surrey Hospital</p> <p>Laboratory Manager, Western Sussex Hospital NHS FT</p>
<p>1. Welcome and apologies (apologies see above)</p>		
<p>2. Minutes of meeting held on Tuesday 11 December 2018</p> <p>There was one amendment to be made to Item 7: QS138 Tool. Final sentence to read: "<i>In November just two hospitals submitted results, which was disappointing</i>". (draft minutes had indicated three hospitals).</p> <p>With the amendment the minutes were approved for publication on the website.</p> <p>The main action points had been completed with the following item to remain on the next agenda:</p> <ul style="list-style-type: none"> RTT Membership – Continuing review necessary. 		
<p>3. Transfusion 2024 - A 5-year strategy for clinical and laboratory transfusion practice – update on Conference held on 26 March 2019</p> <p><i>HW provided members with an overview of the day, which included:</i></p> <ul style="list-style-type: none"> <i>Recognising the achievements of the NBTC since its inception 18 years ago</i> <i>International perspective on Patient Blood Management (PBM)</i> <i>Transfusion Practitioner perspective on the resources needed to implement PBM</i> <i>PBM accreditation</i> <i>Transparency, safety and efficiency in transfusion</i> 		

- Laboratory challenges
- Using big data
- New component development
- Expert panel discussion around influencing and changing practice

Members discussed some of the difficulties of introducing new guidance and encouraging the introduction of new initiatives. It was agreed that regional education days encouraged discussion and helped initiate conversations between hospital staff by sharing good practice. It was agreed that staffing is an issue in many areas and that guidance on recommended staffing levels would be useful.

4. Budget Update

- **2019/20 Budget**

At present the Budget for the coming year has not been confirmed, but there is the potential for a 10 -15% reduction. The finance report should come through at the end of April, when we also hope to be told our new budget.

- **BMS Education Day Budgets**

The London and South East Coast Empowerment Group hold education days, until now costs had been covered by the London RTT. If these events are to continue, we have been asked if SEC RTT would be willing to share the costs? Members agreed, but before committing to shared costs, the attendance and constitution of the meeting should be reviewed.

5. RTC Work Plan

- **Review of 2018/2019 and RTC Activity Report Summary** AD explained that the summary captured the past year's achievements, and informed others of the activities within the region. It was available on the [JPAC website](#). Members agreed this was an excellent report and a good reference point for the past year.
- **Work plan for 2019/2020** AD encouraged members to consider any events, audits etc that should be added to the work plan.
The following to be added:
 - > TADG, TP meeting dates
 - > QS138 – April and Autumn dates
 - > PBM Scorecard – (revisit August 2018 audit)
 - > O neg Kell positive uptake (to be reviewed at RTT meetings)

6. Meetings and Events Update

- **RTC Education Symposium, Friday 8 March 2019**

A Bleeding Nightmare – Improving Patient Outcomes

The event had been very well supported, 100 + delegates had registered (with a waiting list), with 87 attending on the day. There had been 59 respondents to the online feedback: 85% said they would change aspects of their practice as a result of attending; 100% would recommend similar events to colleagues; 100% said it was relevant to their educational needs. The event received a Top box score of 98%.

The Presentations (where permission has been granted) have been added to the [JPAC website](#)

Blending an RTC Business Meeting with an Education Day had been partially successful. Consideration needs to be given on how to improve hospital participation and encourage a more interactive aspect to the day. This should be emphasised when information about the event is disseminated as it is seen by some as solely an education event.

- **Next RTC Education Day** (dates circulated)

Members are to let Frances know their availability. The venue had yet to be agreed, and any suggestions (particularly Hospital venues) would be welcomed.

FM to check exam dates and any potential clashes with other events.

Working Group for the next Education Day to include: RW, FC, AD, FM
The group needed to include a TP, TLM and a clinician. VJ to nominate someone from TADG; and SEC TP Chair to nominate a TP. Any volunteers?

It was discussed that consideration needs to be given to potential conflicting diary dates when planning education events. Such dates include national transfusion/haematology conferences and exam timetables. Noted that exams are often held in March/April and September/October, dates can be checked via the Royal College of Anaesthetists/Pathology websites.

7. RTC Working Group Updates

- **ICAG Consent Pad** – AD informed members that the Consent Pad had been finalised and a hard copy sent to all. Hospitals to gauge demand, before final printing numbers are agreed. TPs have been asked to complete a feedback survey to NHSBT by the end of March.
- **QS138** – AD referenced the regional results in her paper. The next audit is to be carried out this month (April). All hospitals, represented at the recent TP meeting, have agreed to take part.
Weakest compliance seen against QS1a and QS4b.
- **PBM Scorecard** – grids were circulated at the last RTT meeting; this paper shows the percentages. It gives an indication of where our strengths are within the region. The TP group agreed to repeat this audit in August.
(audit to be added to work plan).
- **BMS Empowerment Group** (Joint London/SEC) – TLMs in the SEC were encouraged to nominate staff to join the group in February. Work continues on the aforementioned TLM Toolkit and empowerment survey.
To be kept on the agenda for future review.
- **O Neg Red Cells Trials (Kell pos blood trails)** RW updated members on the two differing trials which had taken place at Tooting and Colindale centres to try to address the disproportionate ordering of O Neg Kell neg units which leads to the wastage of O Neg Kell pos units. Tooting had issued a number of Kell pos units per order, Colindale had allocated a number of Kell pos units per hospital per week. The Colindale model worked better, and this approach will be taken going forward. NHSBT will start negotiations with hospitals next week with regards to the acceptance of a fixed number of O Neg Kell pos units to be issued per week. The hope is that hospitals will be able to use these units without compromising practice. It will require Lab staff to change their practice and actively manage stock of O Neg, which will help avoid wastage of these units in the future.
- **A D Neg platelets** AD summarised the regional platelet stock audit carried out following the NBTC Components Workshop (March 2018) which outlined that platelet issues continue to decrease on the whole but demand for A D Neg platelets remains consistent; 16% of platelet requests are for A D Neg platelets, only 9% of the population are A D Neg. Seven SEC hospitals responded – hospitals were asked rather than Trusts because different sites have different practices.

RW said that NHSBT will be reinforcing the existing SLAs around platelet ordering which states that when long-dated platelets are requested, products with a minimum shelf life of 48 hours will be supplied. NHSBT will become much stricter with this to minimise wastage of platelets. This will impact hospitals ordering platelets as stock who may have been given platelets with a longer than 48-hour expiry in the past. This change will begin in this Easter's supply, initially at Manchester and Tooting, then Colindale, before being rolled out across the country.

It was acknowledged that 7 responses to the audit was a disappointing return and was suggested that a repeat of the Platelet Stock Audit could be carried out once hospitals have become used to the stricter process as this may affect if/how platelets are stocked. Platelet Stock Audit to be added to the work plan.

- **Shared Care** (Cross-regional group) – VJ said this was always discussed at TADG, there was still a problem in hospitals about getting the correct information, the RCI reports were not being implemented fully. A view expressed at TADG was that the labs don't get the correct information on time.
- **London & South-East Trauma and Haematology Group** FC updated members on the recent meeting, where pre-hospital sampling had been discussed. The Essex Air Ambulance had devised a pro-forma, which looked like a hospital request form. If all the HEMS copied this scheme it would be much easier for all staff to be trained up. At present there were many different practices.

RW said there needed to be identification of the Major Trauma Centres, that some practices were being adopted by the smaller hospitals who were beginning to see many more traumas, and therefore their practices were beginning to alter. However, the discrepancies between big and smaller hospitals need to be recognised, for example pre-thawing plasma works in big hospitals but not in a small hospital where you might not have another major trauma for a while, leading to wastage.

- **Harvey's Gang** – continuing to roll-out. Malcolm Robinson had now retired, but was continuing his "guardianship" of Harvey's Gang.

8. NHSBT Update

RW highlighted the following (see earlier discussions):

- NHSBT are meeting only 52% of Ro demand, alternative rr blood is provided where orders are not met.
- A D Neg Platelets – NHSBT would be adhering to the SLAs (as detailed previously).
- O Neg Kell pos red cells– rollout of Colindale approach to be introduced from next week.

9. TP Update (December 17 and March 22) LM reported the following:

- Reviewed SEC SHOT data Jan-Dec 2016 for reporting of Acute Transfusion Reactions (ATRs). 1 TACO reported by SEC in 2016. SEC reported 0.06 ATR per 1000 components issued in 2016 and then 0.25 per 1000 components in 2017. TPs are reporting appropriately when they are made aware of ATRs but possible under reporting from the clinical areas. Each Trust to reflect, monitor and educate clinical areas where appropriate.
- Andrea Harris (Professional Nursing Development NHSBT & Secretary for BBTS) attended the December meeting – presented to the group about BBTS to encourage TP members.
- 22/03/2019 - Farewell to our outgoing Chair Nicky McVeagh. Handover from outgoing Chair & Deputy Chair (Lisa March) to new TPG Chair – Jo Lawrence (TP, Berkshire & Surrey Pathology Services, Frimley Park Hospital) and new Deputy Chair – Barry Johnston (TP, Brighton and Sussex University Trust).
- Two new TPs welcomed; Charlotte (Charlie) Newman from Darent Valley and Claire Barnes from Eastbourne.
- QS138 - All present agreed that, where possible, the online regional audit tool will be used.
- ICAG Pad - NHSBT still awaiting feedback from potential users. An email survey was sent out asking hospitals for an estimation of demand.
- Standardised transfusion reaction form - Liz Tatam & Keith Kolsteren have completed their work on composing standardised transfusion reaction forms; one for clinical and one laboratory use. These are now in use in East Kent. Agreed to make the forms available via

the JPAC website. A word doc will be provided upon request, so individual Trusts can individualise them.

- Suggested topic for the next regional education day – mums/babies/paediatrics.
- Work plan tracking – AD shared with the group the idea of having a TPG work plan spread sheet to track projects/initiatives and their actions/progress. All agreed this was worthwhile implementing for the group.
- Audit – the group are to compile a list of audit templates to list on the JPAC website. TP contact details will be provided for each template. Templates will be shared upon request.
- FY1 competency log sign off – The group will benchmark the FY1 Blood Transfusion training currently provided within the SEC and review recommendations for junior doctor training. This follows a number of TPs being asked to sign off FY1s as competent in blood administration. TPs feel uncomfortable doing so as it was felt that there was insufficient evidence to support competency.

TADG (December 14 and March 28) VJ provided the following update:

December 14 meeting:

- Malcolm Robinson's last TADG as a chair.
- Discussed Brexit and reagent supply and implications.
- Incident reporting and improvement of quality management by MHRA.
- Neonatal using adult blood.

March 28 meeting:

- There had been a good attendance, at St Mary's with a busy agenda.
- Blood compliance report now on agenda - content very good.
- New managers to network role – now covering two different hospitals, some managing two/three sites at once. It was always challenging.
- Local issues were raised.
- MHRA inspections were discussed.

10. Any Other Business

- **National Comparative Audits** - AD informed members that the results were due out this month – item for the next agenda, when they could be fully reviewed.
- **NBTC Emergency planning** - FC updated members on the background to this document, which had been raised at the March Education Day. It was available on the [JPAC website](http://www.transfusionguidelines.org/uk-transfusion-committees/national-blood-transfusion-committee/working-groups). (www.transfusionguidelines.org/uk-transfusion-committees/national-blood-transfusion-committee/working-groups)
- **Blood Consultative Committee** This was a summary of the committees meeting with full minutes available on the gov.uk website.

Next Meeting: Tuesday 18 June 2019