

## London Regional Transfusion Committee

### CONFIRMED Minutes of London Regional Transfusion Team Meeting

Thursday 16<sup>th</sup> April 2015

Meeting 14:00-17:00

Acrow West Boardroom, St. Mary's Hospital

#### Present:

Gavin Cho (GC) (Chair)	Consultant Haematologist, North West London
Aman Dhesi (ASD)	PBM Regional Lead, NHSBT
Jen Heyes (JH)	PBM Practitioner, NHSBT
Rachel Moss (RM)	Transfusion Practitioner, Imperial Healthcare NHS Trust
Shubha Allard (SA)	Consultant Haematologist, Barts Health NHS Trust & NHSBT
Wendy McSporran (WM)	Transfusion Practitioner, Royal Marsden NHS Trust
Dorothy Kasibante (DK)	Transfusion Practitioner, HCA International

#### Apologies:

Megan Rowley (MR)	Consultant Haematologist, Imperial Healthcare & NHSBT
Mandy Hobson (MH)	Transfusion Practitioner, Royal Free London NHS Trust
Richard Whitmore (RW)	Customer Service Manager, NHSBT
Julia Stanger (JS)	Transfusion Laboratory Manager, North West London Trust
Toby Richards (TR)	Consultant Vascular Surgeon, University College London
Antonia Hyde (AH)	Customer Service Manager, NHSBT
Megan Lawn (ML)	Transfusion Practitioner, Kings College NHS Trust
Sue Mallett (SM)	Consultant Anaesthetist, Royal Free NHS Foundation Trust
Matthew Free (MW)	Transfusion Laboratory Manager, St Georges Hospital
Hugh Boothe (HB)	Transfusion Laboratory Manager, Chelsea & Westminster Hosp
Clare Denison (CD)	PBM Practitioner, NHSBT (Maternity Leave)

#### Minute Secretary:

Angela Pumfrey (AP)	London RTC Administrator
---------------------	--------------------------

### 1. Welcome

GC welcomed everyone to the meeting.

### 2. Minutes and Actions of Last Meeting

The minutes of the last meeting held on 19/02/15 were accepted as an accurate record.

**ACTION: AP to arrange for minutes to be uploaded to JPAC website**

Actions 2.1, 4.3, 4.5, 5.1 and 8.2 are completed.

Actions 4.4 is on the agenda .

Action 8.1 – JH still to set-up meeting with Diane Munroe re. shared care information form

Actions 4.1, 4.2, 6 and 7 can now be deleted.

### 3. RTC Budget

#### 3.1 2014/15 Overview

The 2014/15 overview was circulated. There was a slight overspend. JH highlighted that we did very well obtaining sponsorship and, without this money, coupled with the high cost of venues in London, we would struggle to organise events. We are working with a small budget and try to get in as much income as possible to keep the cost of events low. The group agreed that our venues need to be of a certain standard. There was a discussion

## London Regional Transfusion Committee

around whether we should increase our delegate prices, but there was concern that this may deter people from attending. RM felt it was better to use the sponsorship money to pay towards the cost of the venue so that we can charge the delegates a lower price. It was suggested we could review again.

### 3.2 2015-16 Projection

The April RTC is costing approximately £3000 and we have three sponsors paying a total of £1200.

Costings for October RTC are not finalised.

## 4. RTC Updates

### 4.1 NHSBT Update

New patient information leaflets: 'Anaemia' and 'Frozen Components' are ready.

### 4.2 TP Group Update

The next meeting is on 23 April 2015. The work on Anti D and the Terms of Reference will be signed off.

### 4.3 TAG Group Update

Nothing to report – TLM not present at meeting.

## 5. RTC Work Plan

Any projects/objectives still in process will be carried forward to next year.

Work plan was updated to represent current activities. Full discussion was as follows:

### RTC April 2015

4 HTC Chairs are attending this year.

Updated agendas for both sessions circulated to the group. AD still to meet with Matt Free to discuss the data for their presentation.

Ask the Audience – JH has emailed the delegates to ask for questions in advance. She will forward any questions to the members before the meeting. We now have the voting pads. GC asked if we could utilise this section to answer our own questions. SA put forward a question that she would like raised about the two sample rule. AD will draft a Powerpoint presentation about the two sample rule that can be used in conjunction with the voting pads. There was a discussion with suggestions for other questions.

### RTC October 2015

AD circulated to the group a list of topics suggested by the delegates from the last four RTC meetings. He suggested that the topic is 'Community Transfusion' as an increasing number of transfusions are taking place at home or in outreach centres, especially among the elderly. The group agreed that the topic should centre around what the service will look like in the future – Transfusion 2020 was suggested and agreed. SA and WM volunteered to lead on this. The group questioned who our audience will be – thought it would mainly be blood transfusion staff.

### RTC January 2016

AD suggested a topic centred around renal. Some of the group questioned whether there is enough on this to fill the whole day, but RM felt that this is a large topic and we should be able to find enough to fill the whole day. The group suggested a list of presentations – JH made the list. It was suggested we form a focus group. It was identified that, as our

## London Regional Transfusion Committee

audience will be staff working with renal patients only, we need to ask them what topics they would like covered. Everyone to ask the renal staff in their respective hospitals what topics they would like discussed and whether there are any new developments that could be discussed. Feedback to AD, JH and AP – could arrange a telecon if we need to discuss further.

**ACTION: All to ask renal staff in their hospitals whether they would like a renal day and what topics they would like discussed. Feedback to AD, JH and AP.**

### **BMS Education Day 2016**

We will now only hold one of these events each year or may be split into two short days. It was identified that it is difficult for laboratory staff to get the time to attend. Will be held in Tooting again.

### **London TP Group Education/Development Day May 2015**

Agenda for the day was circulated. AD talked through what the day will entail – there will be peer-to-peer learning with participants buddying up together and hands on learning.

### **London & South East Haematology & Trauma Group**

Have not met for a long time. Their next meeting is scheduled for 30 April 2015.

### **LoPAG**

RM gave feedback.

#### **Audit 1**

Data has been crunched and written up. There has been a delay because of data issues. To be presented at RTC – double dose ordering of platelets.

#### **Audit 2**

To be launched in July. This will be a snapshot of a week showing where platelets go. Will also be presented at RTC.

Wastage is going down and platelet wastage is starting to plateau.

Newsletter will continue to be produced which will highlight useful articles. No further audits planned for the moment.

### **Transfusion Training Passport**

AD reported that this is now available to view on the Skills for Health website. 'How to' guides still to be developed.

### **Regional PBM Working Group**

The group has not yet met. TR will Chair the group, but both he and SM not here today to give feedback. AD asked whether there should be one PBM working group with projects split into sub groups rather than have separate stand alone groups.

### **PBM Single Unit Policy Working Group**

JH has started working at Lewisham Hospital, but it is still early days. Data will be collated in May. Lewisham would like to focus on maternity.

### **Nurse Authorisation of Blood Working Group**

JH reported that the abstract has been submitted – it has to be made governance compliant. JH circulated to the group a draft survey for London and SEC TP's so that we can see whether it is being implemented. The group went through the questions and some amendments were made.

### **London RTC Twitter Project**

## London Regional Transfusion Committee

We have 163 followers. It is World Blood Donor Day on 14 June (theme is “thank you for saving my life”) and National Pathology Day in November (which falls on the same day as the birthday of the man who discovered ABO). JH asked for suggestions of what we should do on Twitter to mark these days. SA suggested something about sickle cell trait – she will find something to email to JH.

**ACTION: SA to email JH something about sickle cell for National Pathology Day**

### **Massive Haemorrhage DVD**

AD stated that this project has been stalled as it is a massive project. SA mentioned that there is a similar DVD that is used in Canada which is shorter that could be useful. SA and AD will try to find a copy.

**ACTION: SA and AD to find a copy of the DVD**

### **Transfusion Lanyard Card Working Group**

The cards have been produced and AD showed the group one. Some hospitals are using them already as a pilot to see whether it changes practice. It was discovered this week that one vital step has been omitted (checking against the unit tag) – a sticker will be used to add it.

### **MBOS App Working Group**

GC reported he has not had time to work on this project – still in progress.

### **TP Group Actions**

JH and WM have been working on developing Terms of Reference for the group. They feel that having a Mission Statement instead would be better. It has been drafted and will be discussed further at the TP meeting next week.

### **BMS Empowerment and Education Group**

Meeting not yet organised.

### **London Regional Anaemia Working Group**

This group arose from the TP group – EC volunteered to Chair it. EC has drafted a newsletter and the audit tool – these will be taken to the TP meeting next week to be signed off. It was felt that this working group should be part of the PBM group.

### **New Working Group**

SA suggested setting up a new working group around the subject of inform & consent. The group felt that this was a good idea. This will be discussed further at the TP meeting next week – AD will draft something to show the group. It was asked who will lead this group. RM felt it should be a surgical junior doctor or anaesthetist and a TP and Haematologist. WM said that she has a CNS who would be very good at leading this group because she has started prescribing. RM will contact an anaesthetist and JH will ask around when she is at different hospitals. It was felt that this group would work better as a virtual group using telecons only. GC was not sure that getting a junior doctor involved would be good as they move onto other hospitals every 6 months and often leave audits undone. Title – Patient Inform & Consent – do we need a better name? RM suggested we should ask around our contacts whether there is anything to be gained by forming this group – ask the people who are doing it.

GC expressed concern that we are starting too many new groups and whether people can actually commit to pushing them forward.

## 6. London RTC KPI's

JH circulated two documents: one is a dashboard used by the South Central region and the other showing how our data could be presented potentially. JH suggested that, as a region, we report our targets and figures and upload them on the RTC website. These will be pulled from Blood Stocks Management and will be updated regularly. We could share this data both regionally and nationally. If each hospital wants to record their own data, they can be given the template to enable them to do so. RM felt it would be very useful to have all this information in one place, but GC questioned whether it would be useful. He suggested recording the Top 10 best and worst hospitals, but JH said that we do not have the manpower to do this. This will be discussed further at the RTC.

**ACTION: AD to put together an example of what the data could potentially look like and present to the RTC.**

## 7. BMS Education Day 27/02/15

Overall evaluation form from the day was circulated. Top box score was 100%.

## 8. Hospital Annual Reports

The report template was circulated. JH explained that the reports have been well received and asked the group if they wanted to make any amendments to the template. One change that JH suggested is, rather than have a comparison between the current year's blood issues and previous year's, we should record the figures for the current year with the difference from last year's figures as a percentage. This was agreed.

Other amendments:

- Ad Hoc deliveries for current year only with difference to previous year as a percentage
- Green and red triangles to be changed to black arrows
- 'Top Box score' to be changed to 'Satisfaction'

RM said that the reports should be sent out by the end of the first financial quarter, but JH said they will probably be ready before then.

GC feels the reports should be an agenda item for the HTC meetings.

**ACTION: AP to make amendments to the template**

## 9. Any Other Business

### 9.1 Changes to TP Blood Stock Management Standards Group

RM has stood down as Chair. ML will be the new Chair.

RM has been accepted onto the membership of the ISBT.

### 9.2 ISBT Website Link

SA is working on developing a link to Patient Blood Management on the ISBT website, hopefully to be launched in June.

### 9.3 ISBT Plasma Survey

The survey is launching this week. SA will send out to AD and JH so they can send out to the TP's distribution list for them to complete.

**ACTION: SA to email survey to AD and JH to circulate to TP distribution list.**

### 9.4 ISBT Conference and Exhibition at Excel Centre 26 June – 1 July

SA reported that we have 3 TP's speaking at this conference which will raise our profile as there are lot of international delegates. The TP's are having a breakfast meeting on Sunday

## London Regional Transfusion Committee

at 7.30am which is the slot given to us. There are various other events being held over the five days including the SHOT meeting and an evening party.

### 9.5 Development of TP's in Malawi

DK is working with Tom Latham to develop TP's in Malawi. There are lots of volunteers, but they need support to help engage their hospitals in the project.

## 10. Date of Next Meeting

Monday 15 June 2015 in the Boardroom, St Mary's Hospital

### London RTT

#### Action list for 16 April 2015

Item No (minutes)	Action	By Whom	Completion
2	Minutes of February meeting to be uploaded to RTC website	AP	Completed
2	JH to meet with Diane Munroe re. shared care information	JH	
5	Ask renal staff in respective hospitals whether they would like a renal day and what topics they would like discussed. Feedback to AD, JH and AP.	All	
5	Email something about sickle cell for National Pathology Day to JH.	SA	
5	Find a copy of the Canadian DVD on massive haemorrhage	SA/AD	
6	Put together an example of what the regional data could look like and present to the RTC	AD	April RTC
8	Make amendments to the annual report template	AP	Completed
9.3	Email survey to AD and JH. Circulate to TP distribution list.	SA AD/JH	

**END.**