

South East Coast Regional Transfusion Team Meeting

By Telecon

Thursday 26 September 2019

MINUTES

1.	Welcome:		
	Howard Wakeling	HW	RTC Chair, Consultant Anaesthetist, Western Sussex Hospital NHS FT
	Fatts Chowdhury	FC	Consultant Haematologist in Transfusion Medicine Imperial College Healthcare NHS Trust/ NHSBT
	Simon Rang	SR	Consultant Anaesthetist, Queen Elizabeth, The Queen Mother Hospital
	Robert Goddard	RG	Chief BMS/TLM, Queen Elizabeth, The Queen Mother Hospital
	Visuvanathan Jeyakumar	VJ	Blood Transfusion Site Lead, Royal Surrey County Hospital, Berkshire and Surrey Pathology Services
	Ruth O'Donnell	RO'D	Transfusion Practitioner, Western Sussex Hospitals NHS FT
	Liz Tatam	LT	Transfusion Practitioner, Sussex and Surrey Healthcare Trust
	Anwen Davies	AD	Patient Blood Management Practitioner, NHSBT
	Lisa March	LM	Transfusion Practitioner, Queen Elizabeth, The Queen Mother Hospital
	Frances Moll	FM	SEC RTC Administrator, NHSBT
	Apologies:		
	Nelson Johnson		Blood Transfusion site lead, Berkshire and Surrey Pathology Services
	Zoe Sammut		Laboratory Manager, Western Sussex Hospital NHS FT
	Richard Whitmore		Customer Service Manager, NHSBT
	Emma O'Donovan		Consultant Haematologist, East Surrey Hospital

2.	<p>Minutes of meeting held on Tuesday 18 June 2019</p> <p>With the following amendments the Minutes were agreed as being a true record Item 7. Change nine hospitals to read twelve sites Item 9: Amend name</p> <p>Action points - there was one outstanding action, with the questionnaire used for the TLM Audit at Norfolk and Norwich Hospital to be sourced for discussion at the next meeting. ACTION RW</p>
3.	<p>NBTC Summary – HW is attending the next NBTC meeting on Monday 30 September. the day includes a discussion on demand and supply challenges.</p> <ul style="list-style-type: none"> Demand and Supply Challenges - Members had been invited to comment on a presentation given at the NBTC Executive Working group in June, circulated to the region in August. Discussion included that much of this information was presented at the RTC in March. The SEC has done a lot of work in promoting the appropriate use of O D Negative. There was always room for improvement, and members discussed the need to consider re-visiting the protocols currently in use, including phenotype requests for emergency units. The question was raised whether O D Negative blood may sometimes be used instead of group specific blood, is there room for improvement here? ACTION SR to talk with RG and LM to see if any of the practices in place in East Kent could be adopted across the region. The Appropriate Use of Group O D Negative red cells guidance NBTC had released guidance, and this was designed to ensure that Hospitals and NHSBT can work within a consistent framework, to ensure equal access for patients to available group O D negative and K Negative red cells based on need.

4.	<p>RTT Membership – continuing Review</p> <ul style="list-style-type: none"> Clinician Representative (non-Haematology) HW had approached a colleague, but due to pressure of work, they had declined an invitation to join the RTT. This was RG's last meeting. With a representative number of TLMs, there were no plans to replace him at present. HW thanked RG for his contribution to the RTT, and members wished him well for his retirement. <p>Terms of Reference (September 2017 Version 1) – September 2019 review (members' feedback) Members had reviewed the SEC RTT Terms of Reference, alongside the generic RTC ToRs, and had no objection to aligning the Chairs membership from two to three years. No decision was reached with regard to appointing a deputy.</p> <p>Members agreed the following changes to current wording in the ToRs (3rd paragraph): <i>The RTT will develop an annual work plan for the RTC including all educational events and working groups projects and measurable annual objectives. This will be reviewed at each RTT meeting and will be hosted on the SEC RTC website page.</i></p> <p>To be changed to: <i>The RTT will develop an annual work plan for the RTC including all educational events and working groups projects and measurable annual objectives. This will be reviewed at each RTT meeting. A summary of annual progress will be uploaded retrospectively on the SEC RTC web page.</i></p> <p>Outcome Measures (1st page, last bullet): <i>Develop 'good practice guidance' for hospitals in the SEC region based on regional data and hospital initiatives presented at RTC meetings.</i></p> <p>To be changed to: Share good practice and resources, for hospitals in the SEC region based on regional data and hospital initiatives presented at RTC meetings.</p> <p>ACTION FM to update amendments, version number and review date as agreed and upload to the SEC JPAC website.</p> <p>The next review of the Terms of Reference (Version 1.1) would be September 2021.</p>
5.	<p>Budget Update</p> <p>The October RTC Education Symposium would be the first major use of the budget. Delegates were being charged £10 to attend, and the Maidstone Academic Centre had agreed not to charge for the facility, there would still be hospitality/catering costs. A decision had not yet been made regarding where the Spring RTC would be held, this would be dependent on venue availability and remaining budget following the October event.</p> <p>Members agreed keeping costs down for the delegates was very important, and enabled a wider group of staff to attend. Holding events within Trust hospitals often received good feedback locally and provided wider exposure.</p> <p>It was discussed that both the frequency and format of future events would need to change if budget cuts are made, and the need to find new locations within Trusts will be essential if these events are to continue.</p>
6.	<p>RTC Work Plan – updates</p> <p>Version 3 had been distributed, the majority of actions were completed with the following exceptions:</p> <ul style="list-style-type: none"> A number of NCA audits were awaiting final publication, target review date to be amended to December 2019 PBM Scorecard, target date to be amended to December 2019 TADG meeting postponed to November 2019, date to be amended <p>ACTION FM to update work plan with new target dates.</p>

7.	<p>Meetings and Events Update:</p> <ul style="list-style-type: none"> • RTC Education Symposium – Friday 4 October 2019. There were currently 60 attending (delegates and speakers), with a number of places reserved, awaiting completed booking forms. The invitation had been extended to London and six people had applied to attend. The programme and presenters were in place; the Royal College of Anaesthetists has awarded 3.5 cpd points for the event, and final arrangements were being confirmed. • Future Events – A National TP meeting has been organised 29 January 2020 (King's College, London). Any RTC event needs to take this into consideration. • RTC Education Event – Spring. Paediatrics – (children up to 16 years old) was suggested as the theme for the day. The following members agreed to join a working-group to discuss plans. VJ, FC, RO'D, RW, AD. Dates will be circulated for a Teleconference. ACTION FM
8.	<p>SHOT</p> <p>The 2018 report had been published on the 12th July, the report is available here.</p> <p>SHOT Key Messages:</p> <ul style="list-style-type: none"> > Learning from near misses is vital to prevent future incidents > Investigating incidents should be thorough, systematic and identify systemic issues > Staffing challenges, including staff shortages and gaps in skill mix, need to be addressed to improve safety. > Rethinking transfusion education, including more technology-enhanced learning, learning in teams, non-technical skills training, patient safety training and human factors awareness. > Standard operating procedures need to be simple, clear, easy to follow and explain the rationale for each step – this will help engage staff and improve compliance. <p>SHOT Key Recommendations</p> <ul style="list-style-type: none"> > All NHS organisations must move away from a blame culture towards a just and learning culture > All clinical and laboratory staff should be encouraged to become familiar with human factors and ergonomic concepts. > All transfusion decisions must be made after carefully assessing the risks and benefits of transfusion therapy. Collaboration and co-ordination among staff is vital. > The A-E Decision Tree to facilitate decision making in transfusion. <p>It was suggested that the SHOT key messages (the single A4 sheet provided by SHOT) should be included in the induction material for junior staff.</p>
9.	<p>Emergency Planning – FC informed members that a survey across all UK hospitals was pending, which would look at what has been implemented following the publication of the NBTC Emergency Preparedness guidance in March.</p>
10.	<p>Audit Results:</p> <ul style="list-style-type: none"> • PBM Survey – hospital results were expected to be imminent • NCA Review 2018 Audit of the use of FFP, Cryo and of Transfusions for bleeding in neonates and children – the interim review was out, with the full and regional reports yet to be published • NCA O Neg – The National results were out, the full and summary report were available via the Hospital & Science website. The regional reports are not yet available. • NCA Maternal Anaemia – the interim report was out, with full and regional reports yet to be published.

11.	<p>RTC Working Group Updates</p> <ul style="list-style-type: none"> • ICAG (consent pad) – this was now only available as an electronic version on the Hospital and Science website. It was agreed the name would change to the Consent Group, and TP's agreed to share their resources around consent. • QS138 – AD would be presenting the most recent audit results (April/May 2019) at the Oct Education Symposium. Twelve submissions had been received. Regional compliance for the May 2019 submissions, cumulative to date, were: QS1a (Iron supplementation pre-op) 10% (n=143) QS2 (Tranexamic acid for moderate blood loss surgery) 66% (n=227) QS3a (Re-assessment after red cell transfusion – clinical reassessment) 50% (n=225) QS3b (Re-assessment after red cell transfusion – haemoglobin re-checked) 64% (n=225) QS4b (Verbal and written information documented as given to transfused pts) 14% (n=249) <p>RTT Members discussed the poor compliance QS1a and QS4b was this a regional and national problem? Was there a better way to audit this?</p> <ul style="list-style-type: none"> • PBM Scorecard – Questionnaires were sent out in July, only 6 responses received to date. An update to be available at the next RTT • O D Negative - demand has been going up since October last year, and there were issues with demand and supply, see item 3. Hospitals encouraged to review practice in line with the released guidance. • A D Negative platelets – requests were still disproportionate to the population. The SEC region has succeeded in raising awareness of appropriate use, but demand is still increasing. • Shared Care – no progress to report at present. • London & South-East Trauma and Haematology Group – no meeting had taken place since the last RTT
12.	<p>NHSBT Update</p> <p>The PBM survey would be presented at the next NBTC (30 September), then published. SaBTO recommendations regarding vCJD risk reduction measures were updated on 9 September 2019. The following communication has been sent out by NHSBT have responded by contacting hospitals requesting:</p> <p>Plasma: Take no immediate action in relation to your FFP/cryo ordering practice/s as a result of this change; Continue to order MBFFP and MBcryo components as per current practice.</p> <p>Platelets: If you feel that this change is likely to result in a change to your current ordering pattern or demand for platelets (whether apheresis or pooled platelets) please contact your NHSBT CSM or PBMP</p>
13.	<p>TP Update</p> <p>LT's Summary of minutes and actions from South East Coast Transfusion Practitioner Meeting, Friday 13 September. Please note that full and approved minutes are not yet available.</p> <p><i>Transfusion competency work:</i></p> <ul style="list-style-type: none"> > Sharing of draft National Transfusion Practitioner competencies. > Discussion on new NMC standards of proficiency of registered nurses (Sept 2019). Chair to write on behalf of group for clarification of what the universities expect regarding transfusion, which is now listed as a separate required competency. > Similar conversation re Foundation School expectations. Group to share details of the doctors training provided in their Trusts, and this to be discussed and benchmarked against the school expectations. <p>Audit:</p> <ul style="list-style-type: none"> > List of audit templates uploaded to JPAC website including A Neg platelet demand audit from BSPS. > QS138 NICE standard regional audit results shared for Q4 Jan- Mar. Next audit planned for Q2. All TP's to raise with HTC difficulty of acquiring data for statement 1a (Pre-assessment IDA treatment).

	<p><i>Other:</i></p> <ul style="list-style-type: none"> > New transfusion reaction template approved by TPG and to be shared on JPAC website. > Workbooks for collection and administration of transfusion, used by a number of hospitals within the region, are in final review stage at Western. > A new workbook on Foetal DNA testing written within the region has been circulated to the group. > Consent –TPG to produce a list of all the methods used to promote consent for transfusion within the region. > AD and JL gave us their BBTS presentation regarding the development and challenges of our QS138 audit. KS delivered a presentation on new ideas to reduce WBIT's. <p>National TP day – 29 January 2020 (London)</p> <p>TADG meeting – the planned September meeting had been rescheduled to 1 November</p>
14.	<p>Any Other Business</p> <ul style="list-style-type: none"> • National Comparative Audits – RTT members audit selection had been circulated The top three audits selected were: <ul style="list-style-type: none"> > National Survey of red cell use > Blood Sample collection and Labelling > Overnight Transfusions or Administration of Blood at the Bedside (these had equal preference) • F1 Transfusion Training – no update at present • Three Key points for NBTC – HW informed members that the following would be raised at the NBTC meeting: <ul style="list-style-type: none"> > Lab staffing/ and Ongoing issues arising from staffing > F1 transfusion training – no update at present > Budget – to be discussed at NBTC <p>SaBTO Changes to Recommendations to be added to future agenda ACTION FM</p>
	<p>Next Meetings: Tuesday 10 December 2019</p>