

CONFIRMED Minutes of London Regional Transfusion Team Meeting Thursday 28th July 2016 13:30-16:30 Room 3bc, West End Donor Centre

Present:

Phil Kelly (PK) (Chair)	Consultant Physician, Kings College Hospital
Toby Richards (TR)	Consultant Vascular Surgeon, University College London
Jen Heyes (JH)	PBM Practitioner, NHSBT
Clare Denison (CD)	PBM Practitioner, NHSBT
Gavin Cho (GC)	NHSBT
Emily Carpenter (EC)	Seconded PBM Practitioner, NHSBT
Mandy Hobson (MH)	Transfusion Practitioner, Royal Free NHS Foundation Trust
Wendy McSporran (WM)	Transfusion Practitioner, Royal Marsden NHS Trust
Megan Lawn (ML)	Transfusion Practitioner, Kings College NHS Trust
Shubha Allard (SA)	Consultant Haematologist, Barts Health NHS Trust & NHSBT
Sandy Kidd (SK)	Consultant Anaesthetist, Epsom & St. Helier NHS Trust
Antonia Hyde (AH)	Customer Service Manager, NHSBT
Apologies:	
Nic Ketley (NK) Rachel Moss (RM)	Consultant Haematologist, Queen Elizabeth Woolwich Hospital Seconded PBM Practitioner, NHSBT
Hugh Boothe (HB)	Transfusion Laboratory Manager, Chelsea & Westminster Hosp
Richard Whitmore (RW)	Customer Service Manager, NHSBT
Sue Mallett (SM)	Consultant Anaesthetist, Royal Free NHS Foundation Trust
Dorothy Kasibante (DK)	Transfusion Practitioner, HCA International

Transfusion Laboratory Managaer, North West London NHS

Minute Secretary:

Julia Stanger (JS)

Angela Pumfrey (AP)

London RTC Administrator

1. Welcomes and Apologies

PK welcomed everyone to the meeting.

2. Minutes and Actions of Last Meeting

The minutes of the last meeting held on 20/05/16 were accepted as an accurate record. **ACTION: AP to arrange for minutes to be uploaded to JPAC website**

All previous actions were completed, apart from the following:

Action 3a - outstanding. The document is not yet finalised. When completed, PK will send to AP.

Action 5 – ? is this completed. RM not present to comment

Action 8.2 - Pending. JH has asked Queen's Hospital Romford for a copy of their business case and is still awaiting a reply from them. PK offered to get in touch with a contact there who may be able to help. PK asked whether it would be useful to see the clinic in action.

Action: PK to get in touch with his contact at Queen's Hospital.

3. PBM Projects

a) Obstetric Anaemia

• The study is running in all Royal Free sites and also at Royal London.

Trust



- The Royal Free retrospective data shows there is scope for improving cell salvage use and resolving obstetric anaemia in the pre-natal period.
- SA to set up a focus group to design a tool kit and flow chart. Implementation scheduled for September.

b) latrogenic Anaemia

- Running in two hospitals in South East Coast and London regions.
- Audit looking at discharge volume for in-patients identifies that there is no standard practice some hospitals throw away, while some give the blood back to the patient.
- Identified that it is a problem amongst hospitals due to lack of training and too many systems in place.
- RM to produce a toolkit so hospitals can share their practice.

c) Single Unit Transfusion

Lewisham:

• Still ongoing.

King's:

- Paper was submitted to the BMJ, but they returned it requesting changes around patient involvement. JH will amend this part of the paper and then re-submit.
- Working with DoH on health economics.
- JH is writing up the paper, but not sure where to publish it. TR suggested HSJ or dual publication to allow open access

4. RTC Work Plan

a) Amended Format

The format of the work plan has been amended and has been renamed activity log. Each topic on the front page is hyperlinked to take you to the relevant page. Copies of the log were distributed to the group.

b) October 2016 RTC Update

- Agenda as discussed on recent telecon.
- Both agendas are in draft form. Morning agenda focuses on different views on education and new methods of learning. Afternoon agenda will have a presentation by Alison Watt from SHOT on recurrent transfusion errors, followed by presentations from individual hospitals on how they counteracted these errors.

This led to a discussion about the lack of training in blood transfusion for medical students. It was acknowledged that the main reason for this is because they have no questions on transfusion in their exams and this needs to be addressed first. SK offered to speak to the Chief Examining Officer at St. George's Hospital Medical School about this. It was suggested that we carry out a survey of medical students. TR explained about a medical student network organisation called STARSurg collaborative that carries out audits on a range of surgical topics and have a very high response rate.

A further suggestion was for each hospital to have a designated blood transfusion medical representative to give advice to medical staff with issues surrounding blood transfusions.

Action: SK to speak to Chief Examining Officer at St. George's Medical School re. blood transfusion exam questions



c) Trauma Group Update

- Met on 25th July 2016.
- Decided to hold another trauma network education day next year and then once every 2 years
- Aide memoire for major incidents to be created.

ML said there is a Pan London Major Incident plan but it has not been circulated to hospitals Many of the transfusion measures have been dropped for the peer review of major trauma centres, but are still included for trauma units.

d) LoPAG Update

- Met on 20th July 2016.
- Champions Day will be held on 23rd November at NHSBT Tooting.
- RM will step down as LoPAG Chair when she leaves NHSBT in October. Expressions of interest sent out for new Chair.

e) Nurse Authorisation Group Update

 Have drafted an email to the NMC Director of Policy to request standards for nonmedical authorisation of blood to be added to nurse prescribing,

This led to a discussion about the nurse prescribing courses held by NHSBT. JH mentioned that these courses are always over-subscribed. SA said we need to make sure we cater to all areas in these courses, i.e. adult, paediatric, neonates. Delegates are surveyed 6 months post-course to see whether they are authorising blood independently.

f) Twitter

We now have 277 followers.

TR suggested having our own Facebook page, especially as there is nothing on Facebook about blood, anaemia, etc. EC and JH will set this up.

Action: JH and EC to set up Facebook page

g) Massive Haemorrhage DVD

The one produced by the North West is out, but no one has been able to get a copy of it. The group suggested that, rather than London producing an actual DVD, which will be expensive, we just upload the film onto our You Tube channel.

TR reported that animated films are becoming more popular. The PBM team feels we should stick with our original plan as it is an educational resource. An animated film could be a later project.

5. RTC Business Meeting Evaluation Form

The North West region has an evaluation form for the business meeting part of their RTC meetings, which was circulated with the agenda. JH feels that some of the questions would be relevant to us and asked the group whether we should adopt such a form. The group thought it was a good idea, but should not include an evaluation of the morning speakers. PK suggested we add a question "what did you take away from this meeting that you will take back to your Trust".

6. National Pathology Week 7 – 11 November 2016

SA is planning to do something around the patients' viewpoint. At Barts Health and Colindale they will have someone from the RCI lab and a patient talking about sickle cell.



Other hospitals are welcome to follow the same format. It could be added onto the end of another meeting or as part of a grand round.

JH suggested we could do a small regional campaign – she and SA will speak after the meeting. Suggestion for a topic was "what it takes to get a safe unit of blood or platelets".

Action: SA and JH to speak about campaign

7. Any Other Business

7.1 London RTC You Tube Account

The name of the London RTC account will be changed to London PBM in the hope that this will raise its profile in searches.

7.2 RNOH Anaemia Clinic

TR reported that the clinic is now up and running. He mentioned that RNOH would like to set up a pre-operative anaemia clinic also and feel this would help in research into orthopaedic surgeries.

7.3 Patient Representative

JH asked the group whether we should have a patient representative on the committee, bearing in mind we tried this in the past, but it did not work. The group thought it would be more beneficial to have a patient that we could draw on when we need to rather than a permanent committee member. TR thinks a patient user group would be very useful. It could be a virtual group rather than a face-to-face one. RTT members to identify patients who they feel would be good as representatives and give us their names. TR offered to help in the formation of this group.

Action: To identify possible patients for the user group.

7.4 Megan Lawn's Retirement

ML announced to the group that she is retiring and this will be her last RTT meeting. PK thanked her for her contribution to the committee.

8. Date of Next Meeting

Thursday 27th October 2016 0930-1230 Mint Wing, St. Mary's Hospital

London RTT - Action list for 28th July 2016

ltem No (minutes)		By Whom	Completion
· /	Minutes of May meeting to be uploaded to RTC website	AP	Completed
2.	Get in touch with contact at Queen's Hospital	PK	·
	Speak to Chief Examining Officer at SGH Medical School re. blood transfusion exam questions	SK	
4f	Set up Facebook page	JH/EC	
6	Campaign for National Pathology Week	SA/JH	
7.3	Identify patients for user group	All	

Actions Outstanding from May Meeting

а	Document advising junior doctors which tests to order to be	PK	Pending
	sent to AP		
5	Collate good practice guidance from renal day	RM	To be confirmed
8.2	Obtain anaemia clinic business case from Queen's Hospital	JH/PK	Pending



END