

London Regional Transfusion Committee

London & South East Trauma & Haematology Group

Monday 9th December 2019

14:00 – 16:30

West End Donor Centre

Topic

JU welcomed the group and led introductions

Attendees

Name	Hospital	Name	Hospital
Fatts Chowdhury	NHSBT/SMH	James Uprichard (Chair)	SGH
Richard Whitmore	NHSBT	Al Hunter	NHSBT
Emily Carpenter (minutes)	KCH	Gary Wareham	KSS HEMS
Sue Hemmatapour	OUH	Ursula Wood	GSTT
Kate Maynard	NHSBT		

Apologies

Name	Hospital	Name	Hospital
Denise McKeown	SMH	Selma Turkivic	NHSBT
Shubha Allard	NHSBT/RLH	Anwen Davies	NHSBT
Ruth Smith	CUH	Kelly Feane	SGH
Vince Michael	SGH		

Minutes were agreed with minor corrections.

Matters Arising

Pre Hospital Sampling:

JU summarised developments. If air ambulance adhered to group's previously minuted advice (red stickers, request form) we could consider a trial. KCH continues to accept air ambulance samples but cannot audit as KSS use KCH form so cannot detect easily in BTL. GSTT reported that their laboratory only accept samples with hospital numbers, and are not aware that these are being added in ED.

GW reported that KSS collect approximately 2000 patients each year. 95 of these receive

a pre-hospital transfusion. Only a handful have a pre-hospital sample taken. Group discussed moving to Oxford's approach of no longer attempting to take a sample on board. It was noted that if hospital had mixed field in second sample, BTL is obliged to stick to group O anyway. FC explained that for real benefit (group specific issue) 2 samples would need to be taken by HEMS. Need update from LAS who have been trying to take other samples also.

GW informed the group that KSS use a database called HEMSbase which produces patient report form, units numbers etc which are printed out at the arrival site. There might be scope for this to print the request form in hospital as well.

Action EC: Share EHAAT request form and the creator's details via KM

Action GW: to look into if HEMSbase can print a request form. Group later decided to put this action on hold following review if we need to advise not attempting to sample.

Major Incident Numbering (Patient Safety Alert):

<https://www.england.nhs.uk/publication/patient-safety-alert-safer-temporary-identification-criteria-for-unknown-or-unidentified-patients/>

SGH are awaiting for NHS England to provide extra guidance. SMH found the guidance is not workable as it is not practical estimate DOB.

The group suggested we could send a doodle poll to establish who has achieved the DoH MI sampling guidelines. Decided to request the Emergency Planning Working Group add one questions on this to their January 2020 MI survey.

Action EC: Email to Emma Watkins with one question re. MI sampling guideline for EPWG survey in Jan 2020.

AH and RW queried if this group should have National representation. JU reminded the group that although we welcome membership from neighboring regions, our reporting route is to the London Trauma System.

FC suggested that we link in with NBTC's Emergency Planning Working group, or assist them in co-ordinating setting up a similar group to the London and South East Trauma and Haematology Group in the North and South West

Further to the RTT led trauma event, FC is coordinating a Deanery trauma education day on 18th March 2020 on Transfusion Emergencies. FC invited AH, GW and JU to speak at the event. This event is targeting ST3/4s (Haem Reg), pre part 1 exams.

Updates – Major Trauma Centers

SGH JU: Continuing CR audit. Deployed TEG6 in ED Resus. JU has written a guideline for its use. Compatible with TEG manager software, so potential for BMS access.

SMH FC: Business case for theatres and ED fridge replacement ongoing, includes plan to put plasma in the ED fridge when new fridge is live. Currently stock 8 O D pos and 4 D neg (noted ED is 10 mins from BTL) RBC wastage reduction due to collaboration with BSMS,

now focusing on platelets. Noted that the plasma would be allocated for all emergency use not just trauma. FC mentioned happy for pre thawed plasma to go to plasma exchange patients as the fibrinogen concentration was not much lower at day 5. (FV and FVIII are more labile).

KCH EC: Updating Code Red policy including a move to 4&4 pack size, and empirical use of 4:4:2:1 RBC:plasma:Cryo:Platelets after box 1 (4 RBC: 4 plasma) has been completed and in the absence of results.

RLH - no representation

OUH SH: No major update. They do have TEG manager in the lab but it is not currently active

GSTT UW: updating code red policy, looking align more to MTC code red policy to assist Doctors moving around from the London MTCs, and also moving to 4 and 4 sized packs.

CUH - no representation

RSUH- no representation

Survey Response and Trauma Group Plan for 2020

The recent attendance survey results were reviewed. Please see results embedded below.



Pan London Trauma
Group Survey Respor

The group discussed the following concepts to continue and develop for 2020:

- Illustrate a narrative on how these 4 trauma centres (+) network
- Collate our code red data and publish ?6monthly
- More info on trauma in the elderly
- Defining a model MTC
- Continue education through trauma education day and deanery transfusion emergency education day.
- Plan 2020 Trauma day for November
- Decided that it should be representative of the 4 Major trauma centres in London due to the underpinning from the London Trauma System.
- Include telecon/skype for business options for the meeting
- Update ToR to reduce yearly meeting to 2/year

- Plan survey to review standing agenda structure
- Build standing KPIs and or update template
- Ask current members if they would like to stand down, to respond and to suggest new members / deputies. Non responders would be asked if want to leave group
- Considered feasibility of meeting outside London. GW has access of a potential venue in Redhill.

Action EC: Talk to BH to build trauma group survey

Action FC and EC: to build MTC summary template

Action EC: send trauma transfusion data format to FC to consider

Action KM: Test skype for business with an out of London trauma group member

- Fatts will send round a survey format.

Other Business

- JU tendered his resignation but will consider continuing to the trauma education groups
- FC thanked JU for his strong chairship
- FC agreed to be the interim Chair

Action FC: Meet with JU and EC then send round dates for 2020.