EAST OF ENGLAND REGIONAL TRANSFUSION COMMITTEE

Minutes of the meeting held on 14 May 2019 at the Hallmark Hotel Cambridge
09:30am – 13:00pm

Attendance:

Name	Role	Hospital
Frances Sear **FS**	PBM Practitioner	NHSBT
Camila Conway **CC**	TLM	Ipswich Hospital
Eleanor Byworth **EB**	TLM	Colchester Hospital
Sue Turner **ST**	TP	Colchester Hospital
Debbie Asher **DA**	EPA Transfusion Team leader	EPA
Lisa Cooke **LC**	Consultant Haematologist	QEHKL
Claire Sidaway **CS**	TLM	Hinchingbrooke
Teresa Green **TG**	Lead BMS	Basildon & Southend
Ben Sheath **BS**	TP	WHHT Watford
Georgie Kamaras **GK**	HTC chair	Luton & Dunstable
Deepa Takhar **DT**	Customer Services Manager	NHSBT
Michaela Lewin **ML**	TP	CUH
Dora Foukaneli **DF**	Consultant Haematologist	Addenbrooke's
Alex Hudson **AH**	TP	Papworth
Claire Newsam **CN**	Deputy TLM	Addenbrooke's
Laura Willmott **LM**	Transfusion Manager	Peterborough
Sheila Needham **SN**	TP	Lister Hospital
Julie Edmonds **JE**	TP	Lister Hospital
Joanne Hoyle **JH**	Transfusion Nurse Specialist	West Suffolk Hospital
Gilda Bass **GB**	TP	West Suffolk Hospital
Isabel Lentell **IL**	Consultant Haematologist	West Suffolk Hospital
Alison Rudd **AR**	TP	NNUH
Cathryn McGuinness **CM**	TLM	Princess Alexandra
Loraine Fitzgerald **LF**	TP	Bedford
Tina Parker **TP**	TP	Broomfield Hospital
Julie Jackson **JJ**	TP	James Paget Hospital
Clare Neal **CNeal**	Minutes	NHSBT

Apologies: Mohammed Rashid, Nicola Jones, Kaye Bowen, Andy King-Venables, Charlotte Alford, Donella Arnett, Hamish Lyall, Alex Hudson, Janet Pring, Gerald Glancey, Lynda Menadue, Nick Sheppard, Swati Pradhan, Debbie O'Hare, Ellen Strakosch, Zoe Garside, Angelo Giubileo, Dharini Chitre, Cathy Flatters, Stephen Wilson, Shereen Elshazly, Niven Akotia, Allan Morrison

1. **Welcome:** DF welcomed those present and introductions were made. CNeal was welcomed as the new RTC Administrator.

   Minutes of last meeting: Agreed as accurate. Matters arising as follows:
   - Short dated platelets will have a minimum of 6 hours shelf life. Longer dated will have a minimum of 48 hours shelf life. You may be asked to take shorter shelf life platelets. If you agree to, there will be no refund.
   - Action 3 will be discussed later in meeting.

2. Regional Update

- **FS** presented update. Regional events will be advertised by email. Blood stocks ongoing. WBIT will be discussed later. Toolkits are up for review.
- **GB** on behalf of Kaye. Competencies for new staff are being discussed.
- **CS** Carol Harvey has stood down. Thank you to Carol for all of her input to the various groups / meetings. Attendance at the National Meeting needs to be agreed and has been suggested that a different person attends each time. **DF** thought that this would be convenient. There is a benefit to consistency of attending and reinforces the message to staff.

3. 'Waste not want not'

- **JH** presented about a project to reduce component wastage which took place at West Suffolk Hospital.

Statistics showed an improvement in wastage and implemented new records such as cold storage records which were not held previously. The project will continue for 2019. Education is key to the success of reduced wastage. **DF** congratulated West Suffolk Hospital for their dedication and motivation to this project. **DA** asked if it was hard to get A&E on board due to how busy these departments are. **GB** explained they persisted in speaking to managers and have been able to attend mandatory training in the department.

4. Discontinuation of Fax Machines – Committee Discussion

- **DA** advised that NNUH have a deadline of September to discontinue using fax machines. Is there a deadline for NHSBT and how will this be managed?

DT advised that at present an alternative way of communicating has not been found, therefore they are encouraging hospitals to continue to use fax machines where possible. Some hospitals are not replacing broken fax machines. Some hospitals have a generic email account, others who do not have this could look at having one set up. **DA** asked if this should be a NHS.Net account. This was agreed. **TP** advised they have had 2 incidents out of hours where they have not received a follow-up phone call. Incidents like this should be reported.

DF suggested a short survey for all hospitals on their preference / restrictions i.e. not being able to have a NHS.Net account due to lack of licences.

DT reiterated that all re-call emails / faxes should be followed up with a phone call. Any incidents where this does not happen should be reported. Also any incidents where there is not enough information given must be followed up.

5. Wrong Blood in Tube Benchmarking

- **FS** advised there is currently no full data to share. Some data was missing from the SNAP tool, once this is added, the information can be analysed further. The available data did show there were 4 key trends which included, staff group – midwives, staff being interrupted, IT systems not working and culture – always done this way / happens routinely.

LW advised that Peterborough hand write all labels. **JJ** said there has been some issues printing labels. **ML** advised Papworth hand write labels at the bedside. Addenbrooke's has had 10 WBIT in 2 months due to IT not being utilised, member of staff not wanting to disturb bay of patients at night. **LC** felt there is an issue with lack or computers / chargers / space. It is important to ensure that the IT is correct and fit for purpose.

DF noted it would be a struggle to identify ways to change culture.

JJ Outpatients don't have wrist bands therefore it is being looked at whether they can have and ID card which they keep and can be scanned. Checking first name is not enough as they have seen the issue of two maternity patients having the same first name and surname.
GK discussed a pilot that is currently taking place, results should be available for October's meeting. The pilot is looking at only one sample being taken unless a patient is actively bleeding / there are suspicions of bleeding. The second sample will be taken in a number tube that has come from the lab.

6. O D Neg Update

- **DF** presented an O D neg update.

An open dialogue needs to be in place between NHSBT and hospitals. There are toolkits available.

OD Negative group – if staff from Lab group want to become involved they can. **DF** can provide further information on this.

7. Transfusion Practitioner Competencies

- **ML** showed the committee a TP competencies workbook that has been put together for Addenbrooke's. This could take a 2 year period to complete and has been put together so that it is suitable for all levels of staff. Once the competencies workbook has been completed, it can still be used in order to re-fresh skills and confidence where needed. Daily working would generate evidence for portfolio.

ML is happy to share.

8. NHSBT Update

- **DT** presented an NHSBT update.

DT advised that all blood bag leaks should be returned including those received on arrival, at bedside or found in the fridge.

Everyone should be encouraged to use the Hospital and Science Website more as this will have updates on it and information about surveys that may have gone out.

9. AOB

- 14th June is World Donor Day. There are some events taking place including a mass donor session, a donor will be given a VIP look around and there is a stand in Addenbrooke's concourse. **ML** asked for ideas of how to make the stand more interactive – please email these to **ML**.

- **DF** discussed needing to do more locally so there is standardisation and guidance available across the region. Train the trainers - presentations could be made available and hospitals invited to view / use these. This region is active and this group is important. There is a gap in trainees (Consultant Haematologist).

- **October Meeting –** Donor Team, Carol in new role. **CM** suggested Air Ambulance as they now carry blood – this is new so may be better at later meeting.

  LF discussed 3rd stage of labour.

DF Anaemia Pathways – discuss more / presentations. Do hospitals want to share successes / difficulties.

DF Emergency planning – updated guidance. Familiarise yourselves and see how this fits to practice.

10. Date of Next Meeting and Close
31 October 2019, 09:30am – 13:00pm – venue to be confirmed

Presentations circulated with the minutes

- **FS – Update**
- **JH – Waste not want not**
- **DF – O D neg update**
- **DT – NHSBT Update**

Actions:

No	Action	Responsibility	Status/due date
1	Fax Machines – send all recurring events to ?? to look into. Short survey to hospitals to find out preferences / restrictions.	ALL	
2	WBIT – escalate to NBTC	NJ	
3	TP Competencies Book Shared	ML	