

## EAST OF ENGLAND REGIONAL TRANSFUSION TEAM

Minutes of the meeting held on 14 May 2019 at the Hallmark Hotel Cambridge  
14:00pm – 16:00pm.

### Attendance:

Name	Organisation	Name	Organisation
Dora Foukaneli <b>DF Chair</b>	Papworth	Claire Sidaway <b>CS</b>	Hinchingbrooke
Frances Sear <b>FS</b>	NHSBT	Michaela Lewis <b>ML</b>	CUH
Clare Neal <b>CNeal Minutes</b>	NHSBT	Claire Newsam <b>CN</b>	CUH
Debbie Asher <b>DA</b>	NNUH	Gilda Bass <b>GB</b>	WSH
Lisa Cooke <b>LC</b>	QEHKL		

**Apologies:** Nicola Jones **NJ**

**1. Welcome:** **DF** welcomed those present.

**2. Minutes agreed and Action plan 2018 – 19 updated**

### 3. RTC Business – Matters Arising

- Clearer communication moving forward. It was felt that the concerns regarding follow up phone calls to faxes was more about the follow up to the complaint about it. Customer Services Team would need to look at this. Need to have feedback if there is no follow up communication.
- Presentations; WBIT for October meeting. ?Air Ambulance for next Feb meeting.
- Education working group; Presentations on cloud – can put information on there such as presentations but may not have the maintenance to support it. This could be trialled. NB NHSBT have WShare available, but only limited time window for sharing via links
- Training Registrars – national gap. Curriculum under revision. DF agreed with Isabel to have a list of competencies / knowledge. This would be used to plot against experience gained within hospital settings.
- Learning / developing needs to be hands on. Get involved in teaching others.

### Action Plan

- Quality Improvement & Development
  - Carol Harvey coming to next meeting to discuss change and validation
  - News section on JPAC– need to update.
  - Toolkits – up for revision.
- Improvement of Patient Provision and Safety
  - Pre-op anaemia – Packs went out to GP's 3-4 years ago. Addenbrooke's re-visiting. Is there an option of putting leaflets on the GP intranet on Hospital websites– speak to GP Liaison. GP's may not be able to attend events but can access information on-line. Maybe go and talk to GP Practices – they are creating large consortiums. Information can be disseminated. Bouncing a patient back at pre-op stage to GP causes delays to their pathway.
  - Snapshot Survey – on agenda.
  - WBIT – hospital / clinical area missed out. Now amended & data being analysed
  - Shared Care – **DF** did not have slot at Blood Club, slot is at next meeting. ?results of audit. **CN** had data at last meeting.
  - Neonatal Exchange – not sure if action completed, could ask Deepa if Mohammed not available

#### 4. Venues for RTC / RTT

- Limited budget for meetings. Hallmark is increasing from approx. £500 to £1300 but can offer the smaller room at a lower cost. Cambridge area all around £1000+. Can get Addenbrooke's free if booked in advance but there is the cost of parking which could affect attendance. Possible venues are available on October.
- **DF** suggested keeping the October meeting at Hallmark. Concerns that if there is a large meeting, not everyone will fit into the smaller room comfortably. **FS** will see if there is room for possible negotiation.
- Look at possible venues to see what is available – Peterborough, Huntingdon, West Suffolk, St Ives, local halls. NB **CNeal** and **FS** have now had feasible quotes for Cambridge area

#### 5. Future Workplan for RTC / RTT

- Action plan to be updated with future work arising from this meeting

#### 6. Education Events for 2019

- Midwives – date for next year possibly May / June. **GB** suggested looking at content so that issues are covered. **DF** noted that 7 events have taken place with the same format. It was discussed that maybe allowing more interaction would benefit those attending. **DF** suggested going to the hospitals to deliver sessions which can be targeted for each area. **CS** experience is that mandatory training is a priority and therefore slots for other topics are limited. Will approach hospitals to ask.
- Podcasts / You tube / Skype / Instagram / Twitter are all options to get education material circulated.

#### 7. Audit

- Brian Hockley can help with surveys / audit. He could come along to appropriate meeting if it is beneficial.
- Data set needs to be agreed to ensure appropriate questions are being asked so people will answer. What data do you want to show?
- Plan to conduct survey of pre-op anaemia, pathways and regional algorithm. **FS** will discuss with **BH**
- Discussion over lab staffing survey; rather than one off survey to use a survey or SNAP data collection which can be repeated at regular intervals to allow benchmarking and any trends. **DA** has sent initial ideas for questions to **FS**. **FS** will discuss with **BH** and **RTT** to progress.

#### 8. Shared Care – Audit

- Already covered.

#### 9. AOB

- **DA – NJ** had mentioned the National Meeting. **FS** was going to chase as not heard any more.
- **LC** asked if there is a lab survey. The staff can be asked. If data is collected, where is this fed back to? You need to be careful what questions you are asking. It needs to be short / snappy so you can see trends / ups and downs.

#### 10. Date and time of next meeting and close

31<sup>st</sup> October 2019, 14:00pm – 16:00pm, Venue to be confirmed

**Actions:**

No	Action	Responsibility	Status/due date
1	Meeting to discuss Transplant Education Day	DF / NJ  FS / CNeal – plans for date and venue	
2	Decide survey questions – laboratory staffing survey	FS liaise with Brian Hockley  ALL – Ideas to FS	
3	Update action plan	FS / CNeal	
4	Shared care to blood club	DF	