# **London Platelet Action Group**



# **LoPAG Steering Group Minutes**

# Wednesday 9th September 2020

# Via Microsoft Teams

Attendance	Role	Organisation
Kelly Nwankiti (Chair)		Kings College NHS Trust
Sara Hammond	TP	Barts Health NHS Trust
Rebecca Patel	TP	Northwick Park Hospital
Wendy McSporran	TP	Royal Marsden NHS Trust
Helen Wadham	TP	Guy's & St. Thomas' NHS Trust
Jeyapalan Dharshana		Guy's & St. Thomas' NHS Trust
Ursula Wood	TP	Guy's & St.Thomas' NHS Trust
Andrea Marshall	PBM Development Manager	NHSBT
Kate Maynard	PBMP	NHSBT
Selma Turkovic	PBMP	NHSBT
Angela Pumfrey	RTC Administrator	NHSBT
Apologies		
Gill Rattenbury	ТР	Chelsea & Westminster NHS Trust

# Item 1 – Welcomes and Apologies

KN welcomed everyone to this virtual meeting. There is no representative from UCLH.

## Item 2 - Minutes from Previous Meeting

The minutes of the last meeting were accepted as a true record.

It was noted that all the proposed educational events had to be cancelled due to Covid. The BMS educational event went ahead remotely in July with the same agenda. The champions day will have to be held remotely.

No. 28 – UCLH are doing a local A neg audit next month.

No.36 – Platelet Survey: KN has the results

## Item 3 – London RTC Platelet Issue & Wastage Data (BSMS)

KN explained that the data is skewed because of the change in situation due to Covid. It was noted that UCLH total wastage for 1 year upto June is very high. The group questioned whether the data is correct as UCLH were late in amending their standing orders when Covid hit. ST will keep an eye on the figures and may have to meet with them.

## Item 4- A and AB Neg Platelets

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ST gave the presentation. It was noted that, during lockdown, the demand from Kings College was much lower, but demand generally throughout London is high. UCLH has decreased their platelet orders throughout the year.

It was reinforced that AB -ve platelets should only be ordered for AB -ve patients.

KN thinks a lot of work needs to be done at NHSBT issuing centres regarding platelets. They should do the same as they do for red cells, such as issuing substitutions.

### Item 5- PAG Update

PAG started up again in July. They intend to hold virtual meetings 4 times a year, but are still reviewing the membership to see if the current members want to remain on the group.

## The meeting was recorded from this point onwards

## Item 6 – SaBTO Changes and Amendments to Guidelines

No one reported any problems with implementing the changes. KN is having issues at Kings College with the removal of flags in general, but especially for platelets. She cannot persuade the lab to remove them because they are still cautiously following the Club 96 protocols. Several hospitals stated that their labs are also cautious, but they are not having the same issues.

One issue that hospitals highlighted was that they have been ordering pooled platelets, but receiving apheresis, which they feel is sending out mixed messages. KM explained that NHSBT has a large stock of apheresis which they need to use up. She asked whether it would be useful if they gave an explanation as to why they have substituted apheresis, but KN appreciated this would be a lot of work.

## Item 7 – Red Cell Contamination in Platelets

KN wanted to warn the group about it this issue. She has seen an increase in patients having transfusion reactions such as loin pain. The advice is [TS1] not to use AB platelets, but these reactions are also occurring in pooled platelets. KN stated that NHSBT is only checking by colour, i.e. does the bag look bloody. She has photos of bags that look like they have been contaminated by blood – she will email these to the group and will also send to NHSBT. She has spoken to other hospitals and NHSBT, but no one had reported similar problems, but she thinks it is probably because people are not looking.

FC clarified that NHSBT does check whether there is blood in the bag, not just by looking at the colour, and queried whether the colour change could be caused by bacteria. She advised that any such bags should be returned to NHSBT for culture check.

WMS reported that they have seen these reactions at Royal Marsden, but did not realise what was causing it.

#### Item 8 – NHSBT Block Contracting

This is a central government decision because Covid has hit NHSBT financially. Hospitals will now be charged a standard monthly price based on previous usage rather than just paying for the products used. It will be a block payment which covers all the products you used during the month. It will be reviewed on a monthly basis and then reviewed every 3 months, so next review will be in October. Still apply for credits and it will be taken into account in your next block payment.

It may mean some hospitals are charged more as it is done per hospital, but should even itself out throughout the year. It will probably affect hospitals that are changing their blood usage following Covid, because the charges are based on usage from last year

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ST requested that hospitals that have changed their policy that will affect their demand let her know and also email the NHSBT Covid recovery email address of these changes: <u>covid19bloodrecovery@nhsbt.nhs.uk</u>

#### Item 9 – LoPAG Newsletter

KN is hoping to restart the newsletter.

List of topics/suggestions for the newsletter were given at the last meeting and were read out. FC thinks the most pertinent issue to concentrate on is wastage.

KM suggested it is presented in a different format rather than just chunks of text, e.g. an Excel spreadsheet. KM suggested a dashboard so hospitals can compare themselves against each other. It was agreed that hospitals would like to see other hospitals' data so they can compare themselves to similar hospitals.

Action: KN and UW to discuss a new format for the newsletter – anyone else wants to help out?

# Item 10 – AOB and Date of Next Meeting

a) KM informed the group that she will be going on maternity leave later this month, returning the middle of next year. KN thanked her for her hard work. ST said they can contact her in KM's absence.

There will be cover for KM, but they are unlikely to start until December.

The next meeting will be a Microsoft Teams meeting -2-4pm is a good time for everyone Provisional date is Weds 9<sup>th</sup> December

The slide deck from this meeting will be made available to the group by KM.