

Yorkshire & The Humber Regional Transfusion Committee

Confirmed Minutes of Regional Transfusion Committee Meeting (Y&H - RTC)

Wednesday 6th November 2014 13.30 – 16.30

The White Rose Centre, Leeds The Green Room, Management Suite

Present :

• Ruth Harding	RH	Barnsley Hospital NHS Foundation Trust
• Penny Cook	PC	Bradford Teaching Hospitals NHS Foundation Trust
• Lesley Hawthorne	LH	Bradford Teaching Hospitals NHS Foundation Trust
• Alison Sivyer	AS	Calderdale & Huddersfield NHS Foundation Trust
• Youssef Sorour (Chair)	YS	Doncaster & Bassetlaw Hospitals NHS Foundation Trust
• Gill Bell	GB	Doncaster & Bassetlaw Hospitals NHS Foundation Trust
• Robert Elshaw	RE	Hull & East Yorkshire Hospitals NHS Trust
• Niveen Abdullah	NA	Leeds Teaching Hospitals NHS Trust
• Fran Hartley	FH	Leeds Teaching Hospitals NHS Trust
• Kasturi Nanda	KN	Leeds Teaching Hospitals NHS Trust
• Sue Rabett	SR	Leeds Teaching Hospitals NHS Trust
• Julie Tarrant	JT	Leeds Teaching Hospitals NHS Trust
• Mike Dawe	MD	MHRA
• Satwant Gill	SG	Mid Yorkshire Hospitals NHS Trust
• Sharon Newton	SN	Mid Yorkshire Hospitals NHS Trust
• Marina Karakantza	MK	NHSBT / Leeds Teaching Hospitals NHS Trust
• Dianne Armstrong	DA	NHSBT
• Odette Colgrave	OC	NHSBT
• Robin Coupe	RC	NHSBT
• Anne Davidson	AD	NHSBT
• Rebecca Gerrard	RG	NHSBT
• John Grant-Casey	JGC	NHSBT
• Mark Rockey	MR	NHSBT
• Delia Smith	DS	NHSBT
• Emma Harrison	EH	North Lincs & Goole Hospitals NHS Foundation Trust
• Raheela Khalid	RK	Nuffield Health Leeds
• Jill Rowlands	JR	Sheffield Teaching Hospitals NHS Foundation Trust
• Tina Ivel	TI	York Teaching Hospital NHS Foundation Trust

Apologies:

• Paul Godwin	PG	Airedale NHS Trust
• Julie Guilfoyle	JG	Airedale NHS Trust
• Jill Parkinson	JP	Bradford Teaching Hospitals NHS Foundation Trust
• Rose Gill	RG	Harrogate and District NHS Foundation Trust
• Caryn Van Der Riet	CR	Hull & East Yorkshire Hospitals NHS Trust

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- Mandy O'Shea MO Leeds SPIRE
- Hans Klein HK Leeds Teaching Hospitals NHS Trust
- Carol Blears CB Mid Yorkshire Hospitals NHS Trust
- Marie Collinson-Wallace MCW Patient Representative
- Gary Steel GS The Rotherham NHS Foundation Trust
- Kathryn Griffith KG GP Unity Health, York

Education Forum

- **NCA Anti-D / Consent Audit Results**

All hospitals will receive individual reports, national figures; RTC and comparisons to your peers.

If you receive an error when opening the PowerPoint - email JGC will amend into 2003 version.

- **Affinitie**

Any questions regarding any of the audit results or the Affinitie research programme please contact JGC

- **MHRA**



MHRA - Mike Dawe

Mike Dawe

Principal Haemovigilance Specialist

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There are good practice European guidelines under GMP rules.

Action: OC will email these to the group.

OC to include email address/contact details for Mike Dawe

1. Welcome & Apologies

YS welcomed everyone to the meeting and apologies were received and noted.

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2. Minutes of the last RTC Meeting held on 3rd July 2014 and matters arising

The circulated Minutes (Paper 1) were accepted as a true record and will be placed on the website as "Confirmed".

Action: OC to add Jill Rowlands to the joint TP working group

3. Y&H RTC Budget

3.1 Report and review of commitments (*Paper 2*)

OC went through the financial statement and confirmed the budget expenditure is currently on track after the RTC annual symposium, Nurse Authorisation event and today's RTC meeting. There will be a small balance at the start of January 2015 which will be spent before the end of the financial year. We will still have to continue to secure sponsorship for the next annual symposium Sept 2015.

AD added if we can advise attendance at future RTC meetings as we have to provide evidence of attendees for refund of catering costs.

RG - assuming the RTC budget will be the same next year, however there are no guarantees.

4. Regional Educational Activities

4.1 Educational Activities

- **RTC Annual Study Day**

08.10.2014 Fifty Shades of Red was very well evaluated. Top speaker was Dr Anita Hill on PNH. Alexion was a good sponsor to accompany this presentation. Overall, all speakers were very well evaluated. Excellent venue providing good facilities; central and good ample car parking. However we had a high number of non attendees, whose names will be placed automatically on the reserve list for next year.

A few negative comments on food but the event is free. A special mention from a Haematology registrar who commented that it was the best organised event she had been to; even compared to very expensive professional conferences. YS agreed attendance from special registrars was very good - an excellent transfusion education day for them to attend.

AD commented a few of the lectures were too clinical for some of the nurses / delegates who attended, however the main objective is to influence the practice of key clinicians, usually senior staff, and the programme is tailored accordingly; the RTC supports this approach. The flyer next year will indicate the event will be more suitable for senior nurses, staff etc.

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17.11.14 Nurse Authorisation event. AD confirmed we are planning to run another event next year. Trusts should not compare the 1 day course to the 4 day NHSBT course. The trust has to decide which one suits - they are not interchangeable.

30.09.15 Annual Symposium – Theme “Surgery” – The journey of a patient

Ideas were discussed for topics:

Consent - documentation

Bridging / new anticoagulant - Prof Mike Makris, Dr Van Veen.

Significance of antibodies and the reason for the delays, nurses contacting the lab etc

Role of the lab around surgical patients - why are samples needed 4 days before - generic title,

New BCSH guidelines on massive haemorrhage (on post op)

Action: AD will draft a programme and will need suggestions - journey of the patient.

All – please email AD with topics / ideas / speakers.

4.2 Audit Working Group update

The massive haemorrhage results were presented at the BBTS; co-presented by Penny Cook and AD.

AD proposed a quick platelet audit across the region. This has been copied from the North West RTC and data entry closes at the end of November. Platelet usage in this region has increased by 9% which is the highest in the country It will be interesting to see what the results are and benchmark against the NW. .

There are no plans for a regional audit next year. Only Affinitie and NCA audits will be carried out during 2015. However, AD suggested we could look at the use of O Negative.

5. Reports from RTC Chairs and NBTC meeting 29.09.2014



Anaemia Invest/
Management



PBM Update



RTC Issue Data



Transfer of Blood
Guidance



Platelet Hospital
letter



SHOT Summary 2013



PBM
Recommendations



Standardised
Request form

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The following topics were discussed:

1. Using appropriate blood products for renal patients in our region. Patients with no special requirements on record - this is a problem nationally. Once again it was encouraged that the treating physicians in tertiary centres inform district hospitals if any special blood product requirements are necessary for patients i.e. irradiated etc.
2. Intraosseous blood samples - how should these be dealt with by the lab. RG kindly passed on a poster that was presented at BBTS with regard to Hb, no national guidance - feels that this will be an ongoing problem.
3. Increased platelet usage throughout the region is a national trend due to an increased use of intensive treatments in haemato-oncology patients.
4. The TLM Leeds group - emergency transfer of blood has been discussed and they are considering to follow the regional document as opposed to the national. This will be reviewed again at the next meeting.
5. O Negative - we need to explore the reason why we are using O Neg as there is a concern re demand and supply. AD - asked for people to share their good practice if they are using low numbers.

A debate around the table regarding O negative use; Doncaster & Bassetlaw are using red bags which state "Emergency O negative units; for use in cases of life threatening haemorrhage" these act as a good deterrent. [Action: Gill Bell to send link for these red bags.](#)

6. Regional TP Group

Date of next meeting is 11th December 2014, here at The White Rose. The Group have decided to continue to use this venue / format of meetings with SR being the chair and education sessions in the morning. Next year a joint education day is being planned with the East Midlands TP group.



Y&H TP Report

7. Use of blood in the region

- NHSBT KPI's



KPIs Quarter 2
2014-15 Highlights

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If you would like the full report please email DS.

8. Issues from Hospital Transfusion Teams

8.1 Summary of points raised by HTC's

5/14 HTC reports received prior to the meeting.

Barnsley - good to see progress with PBM. Once only competency assessment.

Leeds - no real concerns - ongoing issues re staffing etc.

Mid Yorks - went through the PBM recommendations - empowering staff for inappropriate requests.

Sheffield Children's - financial constraints.

York - HTC has set up a sub committee for PBM -trying to get focus on GP's.

D&B - Online training - using the TACT tool. Gone live this week for BMS staff. Bill Chaffe did a presentation at the last TLM meeting.

Rotherham - issue raised during RTT meeting, regarding emergency communication from NHSBT and the use of out of date fax machines.

C&H - good pre-op assessment clinics. Constraints – lack of senior staff at HTC's.

Sheff Teaching - electronic blood tracking now on hold.

North Lincs - has a PBM lead , 2 consultants both on each site.

TI - regarding transfusion reactions – the group discussed where and who do patients contact out of normal hours. The patient information leaflets advise all patients to be referred to A&E if a delayed transfusion reaction occurs.

8.2 Round table discussion

Ongoing concerns regarding the lack of patient ID and what the regional approach is in respect of wrong blood in tube incidents. Bag of blood to be checked with wrist band. Raise awareness by running patient safety awareness training days with scenarios. Reminders on badges / pens to check the bag.

9. Training and Assessment in Blood Transfusion



SPN Review NBTC
Sept 2014

Updated guidance was issued at the last NBTC, the group discussed various ways of individual training to be at least every 2-3 years, induction, face to face or e-learning. Training records ideally to be on ESR.

Mid Yorks use the E Roster system - do a monthly report that gives a percentage of each

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department then is circulated to chief nurses etc. A lot of initial work but the staff receive an alert with a 3 month warning. Their ward manager also receives the same warning.

Action: Sharon Newton to share how this process is done via the RTC.



E roster information

10. AOB

Group discussion on the 2 sample rule for every patient including emergency patients.

RE confirmed Hull are rolling this out using the Canadian system (NQAS) with blue tops. This was agreed at consultant level.

JR - have been doing 2nd sample for 10 years. Established culture and their policy states 2 samples taken at different times by different members of staff. They have a professional accountability to carry this out.

D&B – Indicate they need a 'check sample' instead of a '2nd sample'.

SG raised whether we can have a talk at the next RTC meeting on how anaemia clinics are set up and managed in the region and perhaps include this at the next annual symposium.

11. Future RTC meetings

Thursday 7th May 2015, The White Rose Centre, Leeds

Thursday 5th November 2015, The White Rose Centre, Leeds

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RTC – Action list 6th November 2014

Item No	Action	By Whom	Completion
Ed Forum	Email good practice European guidelines to the group	OC	January 2015
	To include email address/contact details for Mike Dawe	OC	December 2014
2	To add Jill Rowlands to the joint TP working group	OC	December 2014
4.1	Will draft a programme and will need suggestions - journey of the patient	AD	January 2015
	Email AD with topics / ideas / speakers	All	January 2015
5	To send link for pre-printed red bags	GB	January 2015
9	To share how this process is done via the RTC	SN	January 2015