

Education Event - *The Patient Experience* - Summary Wednesday 4 May 2022 Microsoft Teams

| Howard Wakeling RTC Chair | Consultant Anaesthetist | University Hospitals Sussex NHS Trust |
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| Kerry Dowling RTC Deputy Chair | Presenter/ Transfusion Laboratory Manager | Southampton University Hospitals Foundation Trust |
| Abena | Presenter | |
| Dr Brittannia Volkmer | Presenter | |

| Welcome | HW welcomed delegates from across the country and introduced the three presenters. |
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| Abena – Sickle Cell Disease Exchange Transfusion Patient | Abena outlined the impact of Sickle Cell Disease on her life. Her experience at different hospitals, and in A&E managing pain; and the need for medics to listen. Quotes from her presentation included: "my first exchange was nerve racking!'d never heard of it before and it's not widely spoken about within the Sickle Cell community, not a lot of people know about it" " it took a while but exchange transfusions are definitely working for me"; "when you go in, you feel tired, after exchange, it's almost like someone's giving you a brand new battery" " you're looked after, people are checking on you" However - |
| | "when you're in pain it's much harder to communicate " "every Sickle Cell patient should carry a card, I also have my care plan on my phone this definitely helps, but if the medics don't truly understand Sickle Cell, or they don't understand your treatment plan that when it's a struggle." " I say listen to your patients and check with them – and trust them, there have been many times I don't feel I can trust the doctor medics need to listen to the patient, they know their care plan, we know what we need" |
| | Useful resources: Sickle Cell Society Patient Information Leaflet NHSBT Automated Red Blood Cell Exchange treatment for the prevention of crisis and complications relating to Sickle Cell Disease leaflet https://nhsbtdbe.blob.core.windows.net/umbraco-assets-corp/14544/auto-rbcx-sickle-cell-flyer.pdf https://www.sicklecellsociety.org/wp-content/uploads/2021/11/No-Ones-Listening-Final.pdf https://edm.parliament.uk/early-day-motion/59617/health-inequalities-for-patients-with-sickle-cell-disease |
| | Guidelines: Red cell transfusion in sickle cell disease. Part I: principles and laboratory aspects https://onlinelibrary.wiley.com/doi/full/10.1111/bjh.14346 |



Red cell transfusion in sickle cell disease Part II: indications for transfusion https://onlinelibrary.wiley.com/doi/full/10.1111/bjh.14383

Position paper on International Collaboration for Transfusion Medicine (ICTM) Guideline 'Red blood cell specifications for patients with hemoglobinopathies: a systematic review and guideline' on behalf of the Transfusion Task Force of the British Society of Haematology Guidelines Committee

https://onlinelibrary.wiley.com/doi/full/10.1111/bjh.16405

Management of sickle cell disease in pregnancy. A British Society for Haematology Guideline https://onlinelibrary.wiley.com/doi/full/10.1111/bjh.17671

NICE Spectra Optia for automatic red blood cell exchange in people with sickle cell disease https://www.nice.org.uk/guidance/MTG28
Videos

PBM England YouTube: Setting up and Performing a Manual Exchange Red Cell Exchange in Sickle Cell Disease (Under 40kg)

https://www.youtube.com/watch?v=e2itKcfXQAE

PBM England YouTube: Setting up and Performing a Manual Exchange Red Cell Exchange in Sickle Cell Disease (Over 40kg)

https://www.youtube.com/watch?v=5QFiLziDxbc

Kerry Dowling

A pre-recorded video of a Trauma patient was shown, in which he recalls his personal story - a pedestrian in a road accident, with traumatic injuries, his time in A&E, and the care along the way in his recovery.

Kerry presented another patient's story, from his motorbike accident, treatment by the air-ambulance team, through to A&E and final discharge from hospital.

Key points

- Major trauma in the lab is led by protocol but it's important to remember that there is a very sick patient at the end of every sample or call and this should be included in lab training and education
- Trauma patients are often unaware of transfusion care at the time, but are very grateful for everything the laboratory does in combination with the Trauma multi-disciplinary team
- Due to modern trauma care patients are surviving very severe injuries that would previously be unsurvivable
- Be aware of Injury Severity Scores an indication of how severely injured the patient is
- Major Trauma patients have a long road to recovery. Care doesn't end after hospital discharge. Often injuries are life changing

Dr Brittannia Volkmer

Dr Volkmer presented BOOST (Building Optimised Outpatient Services in Transfusion)

She outlined the study objectives:

- To engage in active and open discussion about the patients' perceptions being presented
- To devise, where necessary, any recommendations for practice change



• To consider which recommendations are of priority to address and how this might be done

And the following Intervention options were put forward for consideration:

- Staffing capacity review & building shared decision-making culture
- Provide patients info about safe lab practices and offer visits
- Review existing space and unit expansion
- Information leaflets

Resource: NICE guidance available at <u>www.nice.org.uk / https://www.nice.org.uk/Guidance/ph6</u>

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