

North East & Yorkshire RTC Meeting Minutes

13:00 – 16:00 Monday 07 November 2023

Attendees		
Bushra Amin	BA	Transfusion Practitioner, Calderdale and Huddersfield
Abe Aweda	AA	Transfusion Laboratory Manager, North Lincs & Goole
Adnan Akram	AA	ST3 trainee in haematology, South Tees
Rachel Allan	RA	Quality Manager, Leeds
Anna Bartholomew	ABa	Transfusion Practitioner, Northumbria
Amanda Baxter	ABax	Transfusion Practitioner, Sheffield Children's
Gillian Bell	GB	Transfusion Laboratory Manager, Doncaster and Bassetlaw
Joanne Bowden	JB	Transfusion Practitioner, Hull & East Yorkshire
Jill Braithwaite	JBr	Transfusion Practitioner, Hull & East Yorkshire
Amanda Burns	ABu	Biomedical Scientist, Hull & East Yorkshire
Steven Burns	SB	QA Manager, NHSBT Barnsley
Lorna Cain	LCa	Clinical Research Fellow, NHSBT
Laura Condren	LC	Transfusion Technical Lead, South of Tyne Clinical Pathology Services
Robin Coupe	RC	Customer Service Manager, NHSBT
Debra Cox	DC	Transfusion Practitioner, North Tees
Daisy Duthie	DD	Biomedical Scientist, Barnsley
Dave Emmitt	DE	Transfusion Practitioner, Hull
Stephanie Ferguson	SF	Transfusion Practitioner, Leeds
Sayma Hanif	SH	Haematology ACP, Bradford
Alison Hirst	AH	Transfusion Practitioner, Airedale
Alex Hogan	AH	Higher Specialist Scientist Trainee, RCI, NHSBT
George Holmes	GH	Clinical lead for Transfusion, Northumbria
Emma Johnson-Kelly	EJK	Transfusion Practitioner, Northern Lincolnshire & Goole
Lucy Johnstone	LJ	Trainee Representative
April Joslin	AJ	Transfusion Practitioner, Northumbria
Marina Karakantza	MK	Consultant Haematologist, NHSBT
Michelle Lake	ML	Transfusion Practitioner, Calderdale & Huddersfield
Joanne Lawson	JL	Blood Sciences Departmental Manager, Co Durham & Darlington
Charlotte Longhorn	CL	Patient Blood Management Practitioner, NHSBT
Kate Marklew	KM	Transfusion Practitioner, Leeds
Carole McBride	CMc	Transfusion Practitioner, Mid Yorkshire
Lisa McCallion	LMc	Transfusion Practitioner, Calderdale & Huddersfield
Chantal Morrell	CM	Quality Coordinator, Co Durham & Darlington
Alison Muir	AM	Transfusion Laboratory Manager, Newcastle
Janet Nicholson	JN	Transfusion Practitioner, North Cumbria
Anne Olaley	AO	Potential Patient Representative
Ric Procter	RP	Deputy chair , A&E Consultant and Chair of HTC, South Tees
Hansa Ramanayake	HR	International Student
Jordan Reed	JRe	Transfusion Practitioner, York and Scarborough
Emma Richards	ER	Transfusion Practitioner, Doncaster & Bassetlaw
Janice Robertson	JR	Minutes , RTC Administrator, NHSBT
Caitlin Robson	CR	PTP student, Co Durham & Darlington
Abayomi Shotade	AS	Transfusion Practitioner, Gateshead

Faye Smith	FS	Transfusion Practitioner, Harrogate
Youssef Sorour	YS	Chair , Consultant Haematologist and chair of HTC, Doncaster and Bassetlaw
Brian Taylor	BT	Transfusion Laboratory Manager, Sheffield Teaching
Angeline Thiongo	AT	Transfusion Practitioner, Sheffield Teaching
Jemma Timms	JT	Consultant Anaesthetist and chair of HTC, Newcastle
Vicky Waddoups	VW	Transfusion Practitioner, Rotherham
Tracey Watson	TW	Head of RCI Barnsley, NHSBT
Abbie White	AW	Transfusion Practitioner, North Lincs & Goole
Megan Wrightson	MW	Transfusion Practitioner, South Tees
Laura Yeates	LY	Haem SpR North East
















Apologies		
Nini Aung	NA	Consultant Haematologist and chair of HTC, North Tees & Hartlepool
John Ashcroft	JA	Consultant Haematologist, Mid Yorkshire
Claire Broere	CB	Transfusion Practitioner, South Tees
David Bruce	DB	Head of RCI Newcastle, NHSBT
Andrew Charlton	AC	Consultant Haematologist, Newcastle and NHSBT
Rachael Denham	RD	Scientific Consultant, NHSBT
Peter Douglas	PD	Consultant in Emergency Care, Chair of HTC, Northumbria
Khaled El-Ghariani	KEG	Consultant Haematologist, Chair of HTC, Sheffield Teaching
Catrina Ivel	CI	Transfusion Practitioner, York and Scarborough
Raheela Khalid	RK	Transfusion Laboratory Manager, Nuffield Leeds
Sam Kershaw	SK	Transfusion Laboratory Manager, Calderdale and Huddersfield
Mark Liversidge	ML	Transfusion Practitioner, Barnsley
Karen Nesbitt	KN	Transfusion Practitioner, Gateshead
Annette Nicolle	AN	Consultant Haematologist, Gateshead
Julie Pozorski	JPo	Transfusion Practitioner, Barnsley
Karen Simblet	KS	QA Manager, NHSBT Newcastle
Delia Smith	DS	Customer Service Manager, NHSBT
Gayle Sugden	GS	Blood Stocks Management Lead, Leeds
Rachel Wilkinson-Hall	RWH	Transfusion Practitioner, Sheffield Teaching
Karen Ward	KW	Transfusion Laboratory Manager, Northumbria
Jemma Yorke	JY	Consultant Obstetrician, Chair of HTC, Co Durham & Darlington

1.	Welcome
	YS welcomed the group.
2.	Education Section Presentations available via Janice.robertson@nhsbt.nhs.uk if required.
2.1	Update from the SHOT symposium - Patients and professionals experiences Presented by David Emmitt
2.2	Update from the SHOT symposium - Key highlights from the 2022 Annual SHOT report Presented by Abayomi Shotade
2.3	Update from the SHOT symposium - Workplace Incivility Presented by Angeline Thiongo
2.4	Update from the BBTS Annual Conference - Management of sickle cell patients with complex transfusion requirements Presented by Laura Yeates

2.5	Update from the BBTS Annual Conference - A visual interpretation of the past, present and future of blood transfusion. Presented by Daisy Duthie
2.6	Update from the BBTS Annual Conference Presented by Adnan Akram
2.7	Management of Massive Haemorrhage Activation within HUTH E.D. Presented by Joanne Bowden
2.8	Review of National Guidelines / Research Papers Presented by Marina Karakantza
3.	Apologies noted. Minutes of previous meeting, 06.06.2023 confirmed Action: Post confirmed minutes onto JPAC website.
3.1	Matters arising
Closed	Minutes of 06.03.2023 meeting, posted onto JPAC website.
4	Update from NBTC
	<p>NBTC meeting 25 September 2023, included:</p> <p>RTC chairs meeting</p> <ul style="list-style-type: none"> • RTC's presented their reports, good work going on in the in the RTC's, both operational and educational. RP presented our local patient representative terms of reference document, which was well received. • Discussed the RTC Chairs terms of reference and issues around the NBTC restructure and governance. • Presentation from Simon Stanworth – Research & Development BTRU Developing pragmatic evidence-based standards for safe and effective transfusion. • Presentation from Suzy Morton, National Education Working Group chair Rolling Programme of Virtual Education Sessions From January 2024 there will be a program for the whole year. There will still be opportunities for RTC's to do their own educational meetings. • Update on Transfusion 2024. • Update from UK Cell Salvage Action Group • Update from SHOT <p>NBTC meeting</p> <ul style="list-style-type: none"> • Update on Transfusion 2024 • Discussion around the NBTC restructure and governance changes. • Presentation from the NCA Group QS138 reaudit summary – disappointing that there has been little change since the NICE data was audited in 2021 Highlighted lack of progress around consent/supply of information on transfusion/alternatives • Updates from the working groups • Update from SHOT • Work ongoing with National TP group, work ongoing to benchmark TP requirements across sites and to assist with business cases. <p>RTC chairs and NBTC minutes https://www.transfusionguidelines.org/uk-transfusion-committees/national-blood-transfusion-committee/business</p>

5. **Review of NBTC / RTC's structure**
- The NBTC are looking to fund RTC chair roles, to increase the amount of time chairs can allocate to the role to support the RTC's. Currently most of the chairs perform RTC duties in non clinical time and due to pressures from Trusts, it is increasingly difficult to engage with this.
The NBTC is developing formal terms of reference for each RTC Chair, part of this is to get some accountability for the outputs, measure the outputs, standardised across each RTC and increase engagement with [Integrated Care Board](#) (ICB).
Hopefully this will give us direct links with the ICBs who hold the funding allocations, to address repeated problems raised via our HTC reports - staffing issues, training issues, IT issues
 - Boundary Changes**
Initial thoughts are that this has gone really well, with good use of pooled resource across our groups.
A survey will be circulated to get some feedback from the group as to how we think the merge has gone and to look at areas to improve in the future.

6. **Reports from Hospital Transfusion Teams**

<p>Airedale NHS Trust</p>  <p>Airedale.pdf</p>	<p>Barnsley Hospital NHS Foundation Trust</p>  <p>Barnsley.pdf</p>	<p>Bradford Teaching Hospitals NHS Foundation Trust</p>  <p>Bradford.pdf</p>
<p>Calderdale and Huddersfield NHS Foundation Trust</p>  <p>Calderdale & Huddersfield.pdf</p>	<p>County Durham & Darlington NHS Foundation Trust</p>  <p>CDDFT.pdf</p>	<p>Doncaster and Bassetlaw Hospitals NHS Foundation Trust</p>  <p>Doncaster & Bassetlaw.pdf</p>
<p>Harrogate and District NHS Foundation Trust</p>  <p>Harrogate.pdf</p>	<p>Hull & East Yorkshire Hospitals NHS Trust</p>  <p>Hull.pdf</p>	<p>Leeds Teaching Hospitals NHS Trust</p>  <p>Leeds.pdf</p>
<p>Mid Yorkshire Hospitals NHS Trust</p>  <p>Mid Yorkshire Hospitals.pdf</p>	<p>Newcastle Upon Tyne Hospitals NHS Foundation Trust</p>  <p>Newcastle.pdf</p>	<p>North Cumbria University Hospitals NHS Trust</p>  <p>North Cumbria.pdf</p>
<p>Northern Lincolnshire and Goole Hospitals NHS Foundation Trust</p>  <p>North Lincs & Goole.pdf</p>	<p>North Tees and Hartlepool NHS Foundation Trust</p>  <p>North Tees.pdf</p>	<p>Northumbria Healthcare NHS Foundation Trust</p>  <p>Northumbria.pdf</p>

**Sheffield Children's NHS
Foundation Trust**



**Sheffield Teaching Hospitals
NHS Foundation Trust**



**South of Tyne
(Inc Gateshead, South
Tyneside and Sunderland NHS
Foundation Trusts)**



**South Tees Hospitals NHS
Foundation Trust**



**The Rotherham NHS
Foundation Trust**




**York & Scarborough
Teaching Hospitals NHS
Foundation Trust**






Key points from reports:

- **Airedale**
Poor HTC attendance. Lack of engagement from certain specialities, currently have outstanding paediatric guidelines that need reviewing.
Only one recent WBIT
Mandatory training compliance for clinical staff >92%
They have had episodes where we have had to waste platelets as they have been requested to be on standby for patients going to theatre (on urgent list) who have been on clopidogrel. Platelets not required and unable to be used for other patients.
We do not stock platelets.
- **Barnsley**
Using tendable /perfect ward app – Blood transfusion care pathway audit, for care pathway compliance.
Implementation of EPMA is going well.
- **Bradford**
Ongoing work around ensuring all patients who may require blood have 2 samples on the LIMS (1 valid sample) to avoid unnecessary use of O neg
Purchased Haemonetics BloodTrack TX via the Scan4Safety team, including batched products module which will improve HAS/Anti-D traceability.
Ongoing issues with ESR records being inaccurate.
IV iron service has gained momentum.
- **Calderdale & Huddersfield**
Added TACO checklist to BloodTrack PDAs
Three WBITs this year, despite BloodTrack. All human error.
All new medical staff (FY1s and rotational) attend face to face BloodTrack training.
- **County Durham & Darlington**
MHP pack contents review approved – plan to split initial pack to improve FFP wastage (MHP1 2RCC:2FFP, MHP2 2RCC:2FFP > MHP3 4RCC:4FFP:1PLTs, MHP4 4RCC:4FFP:2CRYO:1PLTs).
BloodTrack Tx business case approved (10th year of asking)
- **Doncaster & Bassetlaw**
UKAS accreditation renewal received 05/07/2023 - 0 findings for blood bank.
Completion of the NHSBT "Where Does Blood Go Survey" highlighted increase in single/ unit red cell transfusions.
Blood 360 pilot is going well
No WBIT's in 4 months up to April 2023 but have had 9 in the last 5 months.
- **Harrogate**
UKAS inspection in September, no findings for transfusion.
Established biannual MH training with ED junior docs and middle grades.

- **Hull**
Funding for blood tracking system funding has been agreed (requires new LIMS to be implemented before this can proceed). Manual blood tracking processes still being used; OTCOL wastage due to documentation not being completed correctly and unable to evidence cold chain.
Jehovah's Witness wristbands are currently difficult to source through the hospital liaison team. Raising this in the Trust and aiming to source own supplies.
- **Leeds**
Patients transferred from other Trusts - wristbands are unclear and do not specify Trust, which can cause issues with patient ID.
Project with haematology day unit to streamline transfusion service (due to increased demand on service and unit capacity).
- **Mid Yorkshire**
HTC continues to struggle with attendance and medical representation. This remains an issue as not all meetings are quorate or all specialities represented.
Successfully launched phase one of blood track in August, including new blood fridges (Haemobanks) and blood track enquiry software for the management of cold chain and collection of blood and components. Currently planning the roll out of phase 2 which for us will be BloodTrack Tx for sample taking and bedside administration.
- **Newcastle**
Implementation of the Regional LIMS. Offered product does not meet Trust expectation.
Planning an audit of cell salvage usage in the Trust.
- **North Cumbria**
UKAS visit October, minor findings.
Unable to recruit qualified BMS staff, managers routinely working on bench to maintain service.
- **North Tees**
UKAS inspection scheduled for May 2024
Looking at PBM and the use of reduced draw tubes to improve rejected samples in clinical areas. Pilot to start soon.
Business case for Safe Tx is being presented again, with the hope of approval.
- **Northumbria**
Use O D Pos for males and females > 50. No longer stock O D Neg at our base sites (only O D Pos).
Local Beriplex audit on-going.
- **Rotherham**
Successful UKAS 2023, no findings.
Request form errors identifying irradiated components for patients on request forms.
Failsafe's in place are picking these errors up, but apparent issue with number received.
- **Sheffield Childrens**
Short dated O – sent to RHH
- **Sheffield Teaching**
Introducing 7 day sample acceptance for transfusion dependant thalassaemia patients.
Wastage of red cells in obstetrics has increased recently, possibly related to staff changes and workload.
Bid for a blood tracking system has been rejected - again.
- **South Tees**
New merged Tees wide pathology services. Merging transfusion services and policies will take time and 2 years for standardised equipment/LIMS etc.
WBIT issues in community obstetrics - time pressures and distraction.

	<p>Raising Tx with digital leads in the trust. Due for presentation form Haemonetics</p> <ul style="list-style-type: none"> • South of Tyne Pathology 3 laboratory sites, across 2 Trusts therefore standardisation in processes. No EBMS at 1 Trust, therefore traceability is a constant battle#. • York & Scarborough Increase in WBIT incidents this year vs 2022 2D barcodes added to wristbands to enable further electronic processes in the end to end systems in the future <p>Suggestions for key speakers / topics for future RTC meetings</p> <ul style="list-style-type: none"> • Leeds - The use of leuco-depleting filters in cell salvage - clinical decision whether to use or not in emergency situations, but to remain available. • Northumbria - Use of drones in blood transfusion? • Northern Lincolnshire & Goole - Management of NOAC'S, PSIRF • Rotherham - What are other trusts doing with regards to criticality scoring of events/ how do they implement locally?
7.	Budget
	<ul style="list-style-type: none"> • NE&Y RTC have funded the following: <ul style="list-style-type: none"> ○ Delegate fee for three delegates to attend The SHOT symposium on 04 July 2023 and BBTS Annual Conference on 10-11 October 2023. ○ Venue hire for Transfusion Practitioner face to face meeting • Funding is available for educational events (not post graduate). • Projected balance £5357.41
8.	Haemostasis and Thrombosis Matters
	<ul style="list-style-type: none"> • No update
9.	NHSBT Updates
9.1	<p>Customer Service</p> <ul style="list-style-type: none"> • Communication sent 23 October 2023 Low stock of O D Negative and B D Negative Red Cells Since the communication B D Negative Red Cells have improved but O D Negative Red Cells remain vulnerable. Reminder for labs to enter stock figures as early as possible in the day, this assists in giving visibility of stocks across the blood supply system. • Communication sent 01 November 2023 Joint Statement from NHSBT, NBTC, UK Thalassaemia Society and Sickle Cell Society - Removal of maximum age requirements for red cell transfusion to patients including those with Haemoglobinopathies It has been agreed that the BSH guidelines on red cell transfusion in sickle cell disease and on pre-transfusion compatibility procedures in blood transfusion laboratories will be updated in this respect. RC requested the group advise if their Trust has adopted the measures or when this will take effect.
9.2	<p>Quality</p> <ul style="list-style-type: none"> • No update.
9.3	<p>Patient Blood Management</p>  <p>PBM Update .pdf</p> <ul style="list-style-type: none"> • CL passed on her apologies for cancelling her attendance at HTC meeting etc., due to the PBM restructure. Action: if you are interested in hosting a 'PBM pop up' event, please advise CL.

9.4	<p>RCI</p>  <p>RCI update.pdf</p>
10.	Education and Training
10.1	<p>Update on 2023 events</p> <ul style="list-style-type: none"> Major Haemorrhage: Medical, Obstetric and Trauma 1pm to 4pm Wednesday, 27 November 2023 via teams Over 700 delegates registered.
10.2	<p>Non-Medical Authorisation</p>  <p>NMA update.pdf</p>
10.3	<p>National TP events</p> <ul style="list-style-type: none"> Transfusion Practitioner Conference scheduled for 2024 Volunteers were requested to speak about an average day in the life of a TP
10.4	<p>Scientific and Technical Training</p>  <p>SciClinTraining-Update Nov 2023.pdf</p> <ul style="list-style-type: none"> 36 learners and attended the first advanced transfusion masterclass for pan-reactive case studies and they have had some excellent feedback. As there has been a huge demand for this course with the HEE funded places, they are looking at putting on an additional date (further info to follow).
	<p>Future Education Events</p> <p>Canvassing for topics, please forward any suggestions to JR. Details of virtual education programme available via https://www.transfusionguidelines.org/uk-transfusion-committees/regional-transfusion-committees/virtual-education-sessions</p>
11.	Audits / Standards / Studies
11.1	<p>National Comparative Audits</p> <ul style="list-style-type: none"> NCA QS138 Re-Audit 2023 Awaiting report. Bedside Transfusion Audit 2023 Start date pushed back to March 2024 due to capacity and survey fatigue.
11.2	<p>Regional Surveys</p> <ul style="list-style-type: none"> No update
12.	Reports from RTC groups
12.1	<p>Transfusion Practitioners</p> <ul style="list-style-type: none"> Last meeting 26 September 2023 Held in Darlington Arena and attended by 27 delegates. Sponsored by HemoClear cell salvage microfiltration system Key themes were continued staffing issues, increase in incidents, this may be reporting culture, pressure and distraction contributing to errors. Engaging meeting with good participation from the group.

	<p>An email endorsed by the group is to be sent to SHOT and MHRA. This will outline concerns about the lack of alignment with PSIRF, decline in engagement from clinical areas due to increased pressures, time spent on TACO (awareness, audit, recommendations, reporting etc.) Next meeting 04 December 2023 – via teams</p>
12.2	<p>Centre Users Groups</p> <p>Barnsley – via teams 18 October 2023</p> <ul style="list-style-type: none"> • Presentations on T2024 RCI projects and electronic requesting / reporting. • Updates from NHSBT departments. <p>Newcastle - Face to face meeting held 21 September 2023. Key points:</p> <ul style="list-style-type: none"> • Presentations on ‘What is happening in NHSBT/IBGRL reagents and Update on T2024 RCI projects • Updates from Trusts in the region included an item on the Northumbria Drone Project. • Updates from NHSBT departments. • The regional ‘Procedure for the Transfer of Blood Components Between Hospitals’ incorporating an option for GNAAS to access blood if required, is under review and will be ratified at the next meeting.
12.3	<p>NBTC Laboratory Managers Group</p> <p>Face to face, full day meeting 14 September 2023</p> <ul style="list-style-type: none"> • Update from the military, looking at: <ul style="list-style-type: none"> • Use of drones • Passive powered storage containers to move blood around, extending shelf life • Dried plasma • Global blood tracking project • Staffing issues in terms of recruitment and training within laboratories. Chris Robbie advised that problems with staffing and increase in workload contributed to 15% of serious adverse events. • Considering a nationwide approach to training for new TLMs Proficient managers to pass on experience to those new in post. Looking at developing a welcome pack / toolkit and mentoring. • Are your organisations aware of ‘My medical choice’ https://my-medical-choice.org/ American company setting up a ‘National Safe Blood Donor Database’ Advertised as an emergency medical alert system to record what you want in terms of choice. Statement “The Safe Blood system gives members the option to make their own private arrangements for compatible donors for blood and blood products in the event of a serious accident where a blood transfusion and/or blood components are required. MHRA are aware and advise that legal teams within the Trusts should be notified if any patients mention this.
12.4	<p>Trauma Network update</p> <ul style="list-style-type: none"> • Feedback from Merseyside paediatric major incident involving 5 or 6 casualties. The labs were not advised of the incident. Trusts requested to review EPR documents and how early they contact the lab in regard to blood requirements.
12.5	<p>End to end transfusion IT group</p> <ul style="list-style-type: none"> • Julie Staves to present on IT guidelines at the next meeting, date to be confirmed.
13.	A.O.B.

- Lorna Cain (LCo), Universal Components Team, advised the group that part of NHSBTs strategy is to have more Universal Components following an increasing demand from hospitals. The team has been working to develop universal blood components that could be transfused to patients irrespective of their blood group. They need to understand if this is worth doing, if there is value in it and if there is, how do we optimise the development of these components. To that end, a platelet survey will be circulated on 21 November 2023. There are two versions, ones for TLMs and one is for TPs and hospital consultants. The survey consists of 12 questions so should not take long to complete, the team are really keen to hear your views and your input would be really helpful for development of these components.
- YP advised the group that he is stepping down as RTC chair of the region after 11 years. He expressed his thanks to everyone in the regions.
The group wished YP well for the future.
RP will step into the RTC chair role
Action: Expressions of interest for deputy chair role should be forwarded to richard.procter@nhs.net
- JT asked if anyone using reticulocyte haemoglobin equivalents as a primary investigation. No comments from the group.
Action: Take to PBMP team to check outside of region.

14. Date of next meeting

- To be confirmed

RTC – Action list

Item No	Action	By Whom
3	Post minutes of previous meeting, 06.06.2023 onto JPAC website.	JR
9.3	If you are interested in hosting a 'PBM pop up' event, please advise CL.	All
13	Expressions of interest for RTC deputy chair role should be forwarded to richard.procter@nhs.net	All
13	Ask PBM team to check if anyone using reticulocyte haemoglobin equivalents as a primary investigation.	CL