North East & Yorkshire Regional Transfusion Practitioner Group Meeting

Minutes

1pm – 4pm 12 June 2024 - Teams meeting

**Present**

* Bushra Amin (BA) Sheffield Teaching Hospitals
* Helen Barber (HB) Leeds Teaching Hospitals
* Amanda Baxter (ABax) Sheffield Children’s
* Lucy Bevan (LB) Newcastle Upon Tyne Hospitals
* Joanne Bowden (JB) Hull University Teaching Hospitals
* Michelle Cairns (MC) County Durham & Darlington
* Carolyn Carveth-Marshall (CCM) South Tees Hospitals
* Debbie Cox (DC) North Tees and Hartlepool
* Victoria Dowson (VD) North Tees and Hartlepool
* Stephanie Ferguson (SF) Leeds Teaching Hospitals
* Carolyn Hippy (CH) Bradford Royal Infirmary
* Alison Hirst (AH) Airedale Hospital
* Caryn Hughes (H) SHOT
* Catrina Ivel (CI) York and Scarborough Teaching Hospitals
* Juliet James (JJ) County Durham & Darlington
* Emma Johnson-Kelly (EJK) Northern Lincolnshire and Goole
* April Joslin (AJ) Northumbria Healthcare
* Michelle Lake (ML) - **Chair** Calderdale and Huddersfield
* Charlotte Longhorn (CL) NHSBT
* Carole McBride (CMc) Mid Yorkshire Hospitals
* Kate Marklew (KM) Leeds Teaching Hospitals
* Shruthi Narayan (SN) SHOT
* Karen Nesbitt (KN) Gateshead Health
* Janet Nicholson (JN) North Cumbria
* Julie Pozorski (JP) Barnsley Hospital
* Emma Richards (ER) Doncaster & Bassetlaw Hospitals
* Jordan Reed (JRe) York and Scarborough Teaching Hospitals
* Janice Robertson (JR) - **minutes** NHSBT
* Krishab Sharma (KS) York & Scarborough
* Abayomi Shotade (AS) Gateshead
* Faye Smith (FS) Harrogate and District
* Angeline Thiongo (AT) Sheffield Teaching Hospitals
* Victoria Waddoups (VW) Rotherham Hospital
* Abbie White (AW) Northern Lincolnshire and Goole Hospitals

**Apologies**

* Aimi Baird (AB) Newcastle Upon Tyne Hospitals
* Carol Blears (CB) Mid Yorkshire Hospitals
* Michelle Hartlett (MH) York & Scarborough
* Jill Parkinson (JP) Bradford
* Megan Wrightson (MW) - **Deputy Chair** South Tees Hospitals

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| 1. | Welcome, apologies for absence | | | | |
|  | ML welcomed the group and noted apologies | | | | |
| **2.** | **Education Section** | | | | |
|  | **Infected Blood Inquiry (IBI)**   * The group discussed how IBI has it impacted the transfusion teams and how the Trusts have responded / supported the teams. * TPs have received some enquiries from patients families for details of if transfusions were given and if the transfusion contributed to medical conditions. Most of these requests were from over 30 years ago, so it is difficult to confirm details. * Freedom of information request has been received by a number of Trusts nationally requesting: * How many patients within the Trust have been infected with NHS blood products or tissue contaminated with HIV or Hep C or have developed a chronic infection from contaminated blood * How many have died * How many are still living and under the care of the Trust * What are ages, ethnicity, gender of the patients.   The group felt responses to this should come from Trust level rather than Transfusion Teams.   * Leeds Trust has received comms from Chief Executive Team advising any enquires should be directed to PALS or Communication Teams. * On a positive note, following the enquiry recommendations some Medical Directors have moved to ensure surgical teams are using Tranexamic Acid and push forward in implementation of BloodTrack systems. * The PBM team are working through the report and will look at what work will be generated to push PBM to the forefront of Trust agendas.  **Action**: Forward any ideas of how the PBM team can help to CL. | | | | |
|  | **TACO National Patient Safety Alert** Presented by Shruthi Narayan and Caryn Hughes  SN to look at providing an editable TACO investigation tool and risk assessment and including low body weight.  SHOT looking to work with PBM to provide an elearning package. | | | | |
| **3.** | **Minutes and actions from previous meeting** | | | | |
|  | Minutes of previous meeting, 27 February 2024 accepted as a true record.  **Action**: Post minutes onto the SharePoint site | | | | |
|  | No further responses received from MHRA / SHOT to regional concerns about the lack of alignment with PSIRF and the added strain when the clinical areas do not give us depth and detail when investigating incidents.  It is your CEO’s responsibility to ensure that you have sufficient resources to comply with MHRA timelines. | | | Closed | |
|  | Following the SW RTC education event Incident Management, Effective Root Cause and CAPA training delivered by Chris Robbie, which was recorded, the group felt they would not need MHRA to attend a future meeting to deliver training. | | | Closed | |
|  | SHOT to present TACO National Patient Safety Alert (see agenda item 2) | | | Closed | |
|  | Request to take ‘Hypotensive Transfusion Reaction - Scenario based discussion’ to RTT to consider post transfusion follow up audit by a research trainee has been superseded by the ‘Reporting of transfusion reactions in patients that have left the Hospital’ survey. | | | Closed | |
|  | SharePoint discussion board to be re-examined and ‘How to guide’ to be prepared including instruction on how to set up alerts for immediate, daily, weekly notification. | | | c/fwd | |
|  | Doctors non-understanding of two sample rule escalated to RTC | | | Closed | |
|  | Minutes of 04 December 2023 meeting posted onto the SharePoint site | | | Closed | |
|  | Group to feed back their expectations of delegates attending the NMA event to CI. | | | c/fwd | |
|  | Succession planning added to the agenda for the June meeting. | | | Closed | |
| **4.** | **PBM Practitioner Update**   * Support to TPs from the PBM team will not be changing. The PBM team will no longer be involved with all regional projects      * Cover for CL maternity leave has not yet been decided. * National Projects: * Anaemia * Patient Information accessibility * Baby Blood Assist * Blood Essentials is now live * Reminder to the group to submit data to the QS138 Quality Improvement Benchmarking tool. | | |  | |
| **5.** | **Highlight reports** | | | | |
| Airedale NHS Trust | | Barnsley Hospital NHS Foundation Trust | Bradford Teaching Hospitals NHS Foundation Trust | | |
| Calderdale and Huddersfield NHS Foundation Trust | | County Durham & Darlington NHS Foundation Trust | Doncaster and Bassetlaw Hospitals NHS Foundation Trust | | |
| Gateshead Health NHS Trust | | Harrogate and District NHS Foundation Trust | Humber Health Partnership | | |
| Leeds Teaching Hospitals NHS Trust | | Mid Yorkshire Hospitals NHS Trust | Newcastle Upon Tyne Hospitals NHS Foundation Trust | | |
| North Cumbria University Hospitals NHS Trust | | North Tees and Hartlepool NHS Foundation Trust | Northern Lincolnshire and Goole Hospitals NHS Foundation Trust | | |
| Northumbria Healthcare NHS Foundation Trust | | Nuffield Leeds  No report submitted | The Rotherham NHS Foundation Trust | | |
| Sheffield Children’s NHS Foundation Trust | | Sheffield Teaching Hospitals NHS Foundation Trust | South Tees Hospitals NHS Foundation Trust | | |
| South Tyneside and Sunderland NHS Foundation Trusts  No report submitted | | York & Scarborough Teaching Hospitals NHS Foundation Trust |  | | |
|  | Key points / common themes from reports:   * Staffing and workload pressures. * Positive identification of patients * Lack of funding for electronic systems * Communication and engaging with clinical teams / wards / deportments following incidents to disseminate learning * Agency staff.   Suggested agenda items for future meetings:   * Airedale – Input / learning points re: Cerner Millennium * Bradford - Infected blood inquiry – discussion around recommendations and how trusts are managing to implement PSIRF and satisfy MHRA without adding lots of extra work * Calderdale and Huddersfield - Special requirements / Cell salvage / HLA matching * Doncaster and Bassetlaw - PBM initiatives/strategies other trusts have adopted * Leeds - Talk from EMBRACE team in regard to transferring children and babies and transfusion * Mid Yorks - Policies and how they are managed. Competencies, and methods used to assess competency * Northumbria - SHOT representation at meetings * Sheffield Teaching - How to adapt to reporting to SHOT/MHRA using PSIRF/how to bridge the gap. Discussion around what changes other trusts have had to make in response to CAS Alert./share and significant gap analysis findings. * Rotherham - Consider discussion on A Pos emergency platelet and consideration to ordering/ universally irradiating A Neg to improve use if transferred between Trust hospitals – conversation topic picked up on from LoPAG meeting – how can networks better improve transfer of platelets to possible reduce wastage * York & Scarborough - Update on progress with transgender patients from Durham/Darlington | | | | |
| **6.** | **Regional Transfusion IT Group** | | | |  |
|  | * The group has not met since June 2023.   **Action:** Confirm what SHOT SCRIPT is covering to avoid duplication.  **Action**: Circulate a survey to collect views of the group re: way forward | | | |  |
| **7.** | **Non-Medical Authorisation update** | | | | |
|  | * CI passed on thanks from the NMA working group to LB for presenting Legislation & Consent at the June event. * 2024 dates: 25 September / 05 December. * If you would like to join the working group or have any questions or queries, contact [catrina.ivel1@nhs.net](mailto:catrina.ivel1@nhs.net) | | | |  |
| **8.** | **National TP network (NTPN) feedback** | | | |  |
|  | * No attendance from the group at the last meeting, the next meeting is scheduled for the end July. * TP2024 events ‘A Day in the Life of …’ on 14 and 15 May 2024 were well received, awaiting evaluation. * The TP Competency framework is now with Jen Rock, T2024 Transfusion Education Specialist. Surveys have been circulated but the response rate is low. | | | |  |
| **9.** | **Succession planning** | | | |  |
|  | * Terms of reference state that the term of the chair will be three years. ML has been chair of the group for three years in September 2024 and will be retiring at the end of 2025.   **Action**: Forward expressions of interest to JR | | | |  |
| **10.** | **Any other business** | | | |  |
|  | * September face to face meeting * Request for speakers ‘Sharing of good practice’ (3 x 10 minute slots) ER volunteered to present ‘Star award for multi discipline working during massive haemorrhage’ **Action**: Contact ML if you would be happy to present * Reports format – group agreed that the reports should be forwarded in time for the chair to review and putt out key points. **Action**: Consider doing some of the questions on the reports via Mentimeter or similar platform * If you require any assistance to attend the face to face meeting in September (car shares etc) please advise JR. | | | |  |
| **11.** | **Date of next meeting** | | | |  |
|  | * 10:00 – 16:00 Wednesday 11 September 2024   The Darlington Arena, Neasham Road, Darlington, County Durham, DL2 1DL | | | |  |

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| Action List | | |
| **Item No** | **Action** | **By** |
| 2 | Forward any ideas of how the PBM team can help with enquiries arising from the IBI, to CL. | All |
| 3 | Post minutes of previous meeting, 27 February 2024, onto the SharePoint site | JR |
| 3 | SharePoint discussion board to be re-examined and ‘How to guide’ to be prepared including instruction on how to set up alerts for immediate, daily, weekly notification. | CL |
| 3 | Group to feed back their expectations of delegates attending the NMA event to CI. | All |
| 6 | Confirm what SHOT SCRIPT is covering to avoid duplication with the Regional Transfusion IT Group | ML |
| 6 | Circulate a survey to collect views of the group re: way forward of the Regional Transfusion IT Group. | ML/CL |
| 9 | Forward expressions of interest for chair of the group to JR | All |
| 10 | Contact ML if you would be happy to do a 10 minute presentation on sharing of good practice at the September meeting. | All |
| 10 | Consider doing some of the questions on the reports via Mentimeter or similar platform | ML |