

South West Transfusion Practitioners (SWTP) Business Meeting
Oake Manor, nr Taunton
17th October 2023

Attendance:	Trust
Stuart Lord (SL) (Chair)	Gloucestershire Hospitals NHS FT
Laxmi Chapagain (LC)	Gloucestershire Hospitals NHS FT
Karen Mead (KM)	North Bristol NHS Trust
Annie Butterworth (AB)	Salisbury NHS FT
Leah Pecson (LP)	Salisbury NHS FT
Pedro Valle-Vallines (PV)	Royal Cornwall Hospitals NHS Trust
Lucy Fallon (LF)	Dorset County Hospital NHS FT
Nicola Dewland (ND)	Dorset County Hospital NHS FT
Lorraine Mounsey (LM)	University Hospitals Dorset NHS FT – Bournemouth
Laura Davenport (LD)	Royal Devon University Healthcare NHS FT - Barnstaple
Kathleen Wedgeworth (KW)	Royal Devon University Healthcare NHS FT - Barnstaple
Lucia Elola Gutierrez (LG)	University Hospitals Bristol & Weston NHS FT – BRI
Egle Gallo (EG)	University Hospitals Bristol & Weston NHS FT - Weston
Katy Cowan (KC)	Royal Devon University Healthcare NHS FT – RD&E
Sam Timmins (ST)	NHSBT
Jackie McMahon (JM)	NHSBT

Action Log:

Updates were given for the following outstanding actions not covered in the main agenda:

Medical Schools Transfusion Training (ST):

- There is a new medical school in Worcester and SL and his Transfusion Lead have been approached by their Deanery to be involved from a transfusion perspective.
- UHBW Bristol, RD&E and Derriford all have some involvement but it is quite patchy. ST to find out who does what for each Deanery and try and get a unified approach to what we are teaching.

Terms of Reference:

- Updated governance around SharePoint regarding document control and sharing of TP's work email addresses. JM to circulate for group to review and then ratify.

Provision of lab. contact details for Retrieve Policy:

- Action closed.
- KM mentioned that her TLM is taking the current transfer of blood policy to the national lab. managers group for refreshing and document control.

Use SharePoint template for feedback to National TP Group:

- Close but keep template as a rolling action to be populated about a month prior to each national meeting.

Feedback suggestions for next Regional RTC Objective:

- ST gave a brief overview of the status of the O+ and maternal anaemia objectives. TXA has come into focus with the consistency of use across medium blood loss surgery and resistance outside of the core areas. Exploring if we can do anything regionally to allay some of the concerns.

PBM Update (ST)

- Blood Stocks: Still in pre-amber for A- platelets. Also need to focus on O neg and B neg red cells Stocks have been at 3-4 days for several weeks now and there may be some comms to come out around that. Only meeting 50% of Ro demand, which is also

impacting O neg. ST confirmed that comments about the A- platelet comms losing their impact because they have been around for so long have already been fed back by the PBM team but she will mention again at the next PBM team meeting.

- NCA: Sample collection and labelling reports now available. Looked more at the impact of electronic systems and what that means – definitely worth a look. ST highlighted an upcoming CMV- survey, in conjunction with the BSBMTCT, that will go to transplant centres first and then general hospitals and stressed it should not land at the door of TPs. ST to feedback PVV's comment that the spreadsheet for the Where Blood Goes audit didn't work properly.
- New & Updated Resources. Work being done around Consent with patient focus groups to try and expand to some kind of patient empowerment/patient focussed consent.
- BSH perioperative anaemia guideline should be available at the end of the year and align with the CPOC guidelines.
- Updated A Drop of Knowledge and A Wealth of Knowledge information packs for TPs to be released as an interactive pdf.
- New date circulated for the genotyping programme webinar. Recording will be made available via the PBM YouTube channel. ST stressed that funding for the programme will only be available until March 2024.
- QS138 NCA Audit closed and report pending. The QS138 continuous improvement tool is now live – previously discussed utilising as part of the annual survey to give more background to the PBM questions and will allow for more in-depth benchmarking.
- Anti-D aid memoire updated by SHOT.
- New and much improved NBTC website up and running.
- Blood Transfusion Training – now in second phase, since move away from LearnPro, to make it a better, more engaging and interactive learning experience.
- TXA infographics generated to promote use.
- Ironman study published at the end of the summer. Iv iron use in heart failure patients now included in HF guidelines with really positive outcomes.
- Staffing problems at RCI Filton impacting turnaround times for samples. Issues with samples going missing. Flag up asap if it looks like they haven't received a sample and highlight any serious issues with Customer Services.

RTC Update

RTT met a couple of weeks ago.

- Maternal Anaemia survey results to be presented at the November RTC meeting – hopefully will have some recommendations and action points to feedback to those who took part.
- TXA discussed as regional piece of work.
- Next proposed education event around Hazards of Transfusion – please forward any suggestions for anything you would like to see covered.
- Potential for lab-focussed platelet survey led by TW-B and IS – just a few questions to identify regional practice and any actions required.
- Proposal to open up TP SharePoint to TLMs as it hosts a lot of information that they would find helpful.
 - This was discussed and there were some concerns raised that it may no longer be a 'safe space' for open TP regional discussion and queries, and the TP aspect could be diluted. ST agreed to investigate if it is possible to limit access to some areas of the site and will also canvass group opinion via an email poll. The result can then be reported back to the RTT and if it is a 'no', other alternatives can be explored.
- It was agreed to demonstrate the MH Toolkit at the next RTC to garner more support for people to use and adapt locally.

- Potential Regional NMA
 - ST updated that the RTC Chair has been in touch with the NE region who have a long standing regional NMA and is setting up a call with their Lead. The biggest concern is around the volume of work and the commitment required from the speakers and personnel delivering the course. KM mentioned that in Scotland they pre-record the session and TPs moderate. This could be a way forward if trusts were confident this platform could deliver the theoretical knowledge required, and we could still have Q&A's, polls, etc to make it more interactive. The NE also do a really good session at the end of their course looking at clinical scenarios – questions beforehand. ST to take back to the RTT as a potential way to make a regional course feasible. It was also discussed that some participants felt that the NHSBT course contained too much information about the science aspect and ST will feed this back. ST agreed to provide an overview of the NHSBT course and pre-course learning for AB to give an idea of what it covers.
- NBTC/Hospital Services Review – ST updated on work around the NBTC/RTC structure – fall out from pandemic and blood shortages highlighted we need a bit more clout with clinical directors, NHS England and regional partners so looking at ways to deliver it. There may be an update at the November RTC meeting. There is also an ongoing hospital services review around how the PBM and CSM teams work.

National TP Network Update (SL)

- Virtual meeting last month, nothing major to feedback. TP 2024 conference planned for next year and steering group organising content.
- Agency staff and e-learning. Some agencies have their own e-learning platforms and are sending staff to hospitals saying they are transfusion trained. This led to a discussion around how this was managed in individual trusts.
- Shared Care Working Group – potential to become national working group under NBTC. Hopefully will get a standardised document coming out around transplant/special requirements. Paper currently with NBTC and if it is accepted, the ask will be for two representatives from each region to sit on the Group.

BBTS Feedback (KM/PVV)

The conference was really good but there weren't many representatives from the south west or the TP group.

- As part of the TP session, PVV talked about the pitfalls of electronic tracking systems, and there were talks about improvement and the importance of making sure special requirements are recorded on blood request forms.
- KM mentioned that the BBTS group get a TP article in Blood Lines magazine which is open to anyone from the TP group. Let KM know if you would like to contribute.
- Haemonetics would like to push within BBTS to standardise practice and produce documents for trusts. KM discussed with Haemonetics the sort of issues they would look at and they said they would be happy to run a regional workshop to address issues together. We would need to do some background work to collate everyone's issues and get some main themes and ST agreed to set up an informal drop-in session towards the end of November to compile priority challenges and look at a day to reach out to both Haemonetics and MSoft. Once we have an idea of 'top box' issues, ST, SL, PVV and KM can discuss how to run the day. ST will also feedback to the RTC Chair as this had previously been discussed at RTT.

MH Survey/O+ Policy Compliance

On the back of the MH Toolkit, the proposal is for a quick feedback survey on what everyone is doing to identify any gaps/differences and try and standardise things a bit and also to gauge O+ compliance.

Regional NMA Course Discussion

Following the discussion under RTC Update above, it was agreed to feedback to RTT/RTC that as a region, we would like an RTC, TP-led course but need to decide how to take it forward. KM will approach Scotland for more information on how they run their course and said that the NE would be happy to share content.

It was felt there is regional capability to put the course on and it wasn't dependant on input from NHSBT but would need commitment from core people for a year or two to get it established. ST can help implement but can't help deliver due to her involvement with the NHSBT course.

Roundtable Discussion (All)

The following was discussed:

- Placement of patient wristbands in theatres.
- Doctors not putting the correct transfusion rates on charts; requesting and authorisation practices – KM happy to share NBT's competency framework and ST suggested if not happy with practice, take it to HTC and make sure it is minuted.
- Salisbury trying to get back on track with their training now that new TPs in post.
- Transfer and Retrieval policies and training for transfer/retrieval staff/incorporating in local policies. KM to let ND have sight of the SW regional policy.
- KW – now more than 12 months since full electronic blood tracking and EPR; complete confidence in IT systems and majority of staff have taken it on board; follow-up traceability is much easier and transfusion staff are 'on it' with regard to their training because they need their bar code access. Now have more rejected tx and WBIT samples but this could be because of closer monitoring.
- Air Ambulance trial next month – patients may receive one or two units of whole blood.

Presenting at SHOT (PVV)

PVV talked about his experience of presenting RCHT's take down poster at SHOT. A limited number of the take down labels are free for a trial from RCHT.

QS138 Demo (SL)

Six sites registered and one has entered data. If everyone likes the idea of including in the annual survey, you will need to set up an account and register.

SL gave an overview of how his trust uses it. They used the existing QS audit data and it was straightforward and very quick to enter data. Participation helps to identify gaps in practice. You only need to enter data on 10 cases and it can be done as often as you want and you don't have to report on all 4 quality standards. Data also goes into model hospital. Details of the QS138 audit tool and how to register are in the meeting slidedeck, which is on the TP SharePoint site.

AOB (All)

Karen Mead to review competency documents on SharePoint.

SharePoint training will be covered via the drop-in call.

KC to review TP powerpoint training.

SW TP Group Meeting, 17.10.23

Action Log:

Action	Actioner	Completed
Establish who does what with each Deanery with regard to transfusion teaching	ST	
Circulate updated ToRs for comment	JM	
Feedback comments about A- platelet comms	ST	
Forward any suggestion for topics to be included in Hazards of Transfusion study day to ST/JM	All	
Investigate if it is possible to limit access to specified areas on a SharePoint site	ST	
Circulate poll to the group re TLM access to the TP SharePoint	ST	
Circulate link for ordering blood for training purposes from NHSBT	ST	
Feedback outcome of discussions on regional NMA to RTC Chair/RTT	ST	
Liaise with the NE region and Scotland re sharing the content of their NMA courses	KM	
Provide AB with an an overview of the NHSBT NMA course and pre-course learning	ST	
Feedback comments that the NHSBT NMA has too much science content	ST	
Set up informal call to discuss/collate issues with Haemonetics/M-Soft for potential regional workshop	ST	
Update RTC Chair/RTT with workshop proposal	ST	
Let ND have a copy of the regional Retrieve policy	KM	
Review the TP Competencies on SharePoint	KM	
Review the TP Training PowerPoint	KC	