

EAST OF ENGLAND REGIONAL TRANSFUSION TEAM

Minutes of the meeting held on 26 September 2024, 13:30pm – 15:00pm at The Red Lion, Whittlesford.

Attendance:

Name	Organisation	Name	Organisation
Lynda Menadue LM	RTC Chair and HTC Chair - Peterborough	Julie Jackson JJ	TP / Joint TP Group Chair, James Paget Hospital
Dora Foukaneli DF	Consultant Haematologist NHSBT	Clare Neal CN <i>Minutes</i>	RTC Administrator, NHSBT
Frances Sear FS	PBMP, NHSBT	Suzanne Docherty SD	Consultant Haematologist, Norfolk & Norwich Hospital
Shinsu Kuruvilla SK	TP, QEHL	Michaela Rackley MRa	TP, Royal Papworth
Emily Rich ER	TP / Joint TP Group Chair, NWAFT		

Apologies: Joanne Hoyle **JH**, Mohammed Rashid **MR**, Isabel Lentell **IL**, Lisa Cooke **LC**, Katherine Philpott **KP**

1. **Welcome LM** welcomed everyone to the meeting. Introductions were made.

2. **Minutes of last meeting: LM** those in attendance agreed the previous minutes and these will be uploaded to the website.

Actions from previous meeting

	Detail	Responsibility	Status
1	Platelet Audit <ul style="list-style-type: none"> Finalise Questions Circulate to RTC Collect Data Discuss Issues Feedback Data 	FS / CN	Data collected, awaiting report in order to look at recommendations.
2	RTC Action Plan	CN update and send to LM for approval. Add to website	CN amends following every RTC.
3	Education Working Group <ul style="list-style-type: none"> Major Haemorrhage Simulation 		06.11.2024 IL to share previous / future MH Simulation information – Jan RTC
4	Reaction Flowchart	CN to ask JJ for final version and circulate to RTC	Complete
5	Major Haemorrhage Guidelines	<ul style="list-style-type: none"> LM to email trauma contacts about flowchart. Happy to endorse a single protocol. Paeds flowchart to be emailed by 	Complete

		CN to Claire Sidaway and DF to review with paediatricians	
6	Usage and Wastage from Bloodstocks	Add to TP / TADG agenda in September – feedback to RTC September	Complete
7	Add budget to RTT as AOB	CN	Ongoing

3. RTC Business

- **Matters Arising**
Amber Alert

- **LM** we need to support anyone cancelling operations. We can escalate to NBTC that some information is not clear. **FS** I think it has been picked up elsewhere. **DF** Lise Estcourt presented last week at BBTS. 80% of O negative goes to medical patients. If we want to make a change, it is not fair to target surgical patients. **LM** if 80% is going to medical, how many are not haematology patients? **SD** an awful lot are haematology oncology patients. **LM** there is only so much I can challenge a haematologist but is there an area that can be challenged? **DF** there is an intention to revise the NICE guidelines to capture medical patients. There is a trial that tranexamic acid is not useful for haematology patients.
- **JJ** since pandemic we are seeing a lot more anaemia patients who are not seeing their GP so not being treated. We are trying really hard to redirect them back to primary care as they are costing a lot of money. If we had an anaemia clinic or if GPs were looking after deficiencies this would help massively.
- **DF** we need to know who these patients are and their characteristics? The question is are we ready to audit this?
- **JJ** I didn't see the report from the NCA. It was a fact-finding mission looking at every unit over a few weeks. **FS** there is a draft survey – I haven't seen results. **LM** who do we ask for results, could you ask? **DF** Lise Estcourt had some data. It is good to say we are looking at exploring options.

Infected Blood Inquiry

- **LM** we need to wait until recommendations are accepted. I think there will be a push for tranexamic acid.
- **JJ** there must be working groups for some of the points raised.
- **SD** I am going to try and take to our HTC. Is it hard to add a line to WHO checklist. **LM** if you add one thing, others want to start adding to it too.
- **JJ** we put NICE guidelines into our policy. There has been kick back from orthopaedics.
- **DF** I think the biggest problem is how we demonstrate compliance. How are we capturing this information? **LM** we can add blood loss to the sign out on the WHO checklist.
- **JJ** data collection depends on hospital system. **LM** you could pick blood loss off EPIC.
- **DF** vascular surgeons do not use tranexamic acid. They refuse in the absence of trials in relation to vascular. **LM** it is the same issue with colorectal.
- **DF** the element that needs to be satisfied is the informed consent so the patient is aware. **JJ** we use the NICE guidelines. **DF** Addenbrooke's commissioned an audit on consent for the Trust, there were recommendations specific for transfusion. A working group was set up and consent forms revised. QR code for leaflets. The next step is to make it digital. **SD** are you able to share documents? **LM** we would love to see that.
- **LM** circulated Peterborough's blood prescription chart. This shows areas for signing when information / consent given.

- **LM** shared email sent by Julie Staves / Kerry Dowling **CN** has circulated this to East of England RTC.
- **EB** what is your view on what we supply to the air ambulance. We currently supply 4 O negative units a day. We are holding more stock to supply this. **LM** should we suggest they hold 2 instead 4. 2 go on the helicopter and 2 go in the car. **FS** I think this is being looked at for all air ambulances. **LM** you can say it has been discussed at RTC. Suggest one unit per vehicle. **EB** they were receptive to having one unit in boxes instead of two. It hasn't been implemented yet. One box goes in car and one in helicopter. **LM** please feedback whether you do change this. **JJ** how often do they use it all?
- **LM** I have not managed to get our packs changed from 3 to 2. **FS** you may need to compare with other hospitals of a similar size.
- **DF** in the helicopter they only carry one bag. They don't know what they are attending.
- **MRa** we had a talk from blood stocks about O positive issue. There are research papers on it. **DF** how are they going to audit this? Is there some documentation.
- **Action Plan – CN** will update and circulate / upload to website.
- **Budget**
 - **JJ** the TP group would like to base one of their meetings within a hospital simulation suite. There would be a cost for this. **LM** is happy to support this out the budget. Is there any way anything can be booked within this financial year? **SK** we started simulations at QEHKL a few months ago. We run a 3 hour session. We include a presentation, case study and run two scenarios. We run this for only 6 people at a time. **LM** West Suffolk are hopefully presenting at the January RTC. Can you present what you do and the process of how you do it? **JJ** the day for the TP Group will be about setting it up as well as running the sim. **LM** I would like the team running it to bring back some outcomes to the RTC following their meeting (September 2025).
 - **CN** two RTCs will be funded out the budget and also the Joint TP / TADG meeting.

4. Education Working Group

- The next Education Working Group will take place on 6th November 2024.
- **Mums Babies and Blood – LM** a speaker is needed for consent processes and challenges. **CN** to email **SD** and Tamsin Poole at Addenbrooke's. **LM** would like to look at the case studies when available.
- **East of England RTC Education Event – LM** we are looking at having another RTC education afternoon following the RTC in May 2025. Could everyone consider and share possible subjects to focus on.

5. Audits

- **Platelets - FS** we need volunteers to review the data from the platelet re-audit recommendations. **DF** happy to look at it. **LM** suggested **IL** as another volunteer. **JJ** volunteered. A TLM will also need to be involved - ? ask **KP** to liaise with TLMs.
- **FFP/Cryo –** needs to go to RTT to start looking at questions.
- **FS** would East of England complete the O positive survey. **JJ** not enough people completed the O negative survey. **LM** would we like to put out the O positive survey? **FS** we could plan for it. **LM** asked **FM** to send the survey to her to review and decide.

6. Any Other Business

- **DF** are we able to move forward with putting educational material onto the East of England Deanery website? Can we make links with these platforms so they are aware of materials available? **LM** we can try and get information put on but I am not sure where it will go as its not part of the curriculum. They need to change the curriculum. **DF** we can share information already available. We can start with anaesthetists and then look at the more junior roles. **LM** I have access to bridge but don't have access to upload. **DF** even if we can start by agreeing selected material. **LM** discuss at next Education Working Group. **FS** we have a lot of links for

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various groups. **LM** take to EWG. PBM information such as peri-operative iron, TXA, obstetrics is all available. **DF** the East of England major haemorrhage algorithm is also a good tool to share. We need to remember what we have shared, where we share it and when to revise the information. **FS** blood essentials can be shared. **DF** information will need to be bitesize.

- **SK** we have a consent form that we use, I can forward to circulate to the group. We may add a QR code for leaflets. **LM** we need to look at consent. This could maybe be a subject for the RTC to look at.

LM thanked everyone for coming.

Date and Time of Next Meeting: 2025 dates have been arranged and circulated.

Actions:

	Detail	Responsibility	Status
1	Unclear information on Amber Alert to be escalated to NBTC	All advise LM LM to escalate	Ongoing
2	Circulate information on consent audit commissioned for Trust	DF to CN to circulate to SD / LM	ASAP
3	Units carried by air ambulance	EB feed back to group if this is reduced	
4	Simulation Presentations / Feed back	<ul style="list-style-type: none"> • IL West Suffolk • SK QEHL • TP Group 	<ul style="list-style-type: none"> • Jan 2025 RTC? • Jan 2025 RTC? • Sept RTC 2025?
5	Action Plan	CN update and upload to website	
6	Mums Babies and Blood Consent Presentation	CN email SD and Tamsin	ASAP
7	RTC Education Afternoon – following May RTC	Subjects – please advise of ideas	
8	Platelet re-audit	Review data for recommendations – LM, FS, DF, ?IL, JJ, ?TLM	CN emailed contacts to see of anyone else wants to add information. Ask Brian to close and run report. Set up a meeting to discuss.
9	FFP / Cryo Audit	RTT to look at possible questions	? January 2025
10	O positive survey	FS to send to LM	
11	Education material for East of England Deanery	Discuss at Education Working Group	06/11/2024