



## South East Regional Transfusion Committee 2025 Activity Summary Report Celebrating Success



The South East transfusion teams, across all disciplines, continue to rise to the many challenges put before them, and the support offered by colleagues across the region is exceptional and should be commended and celebrated.

**Howard Wakeling, SE RTC Chair**

**Regional Transfusion Committee's Business Meeting** took place on Thursday 3 July 2025 – with an early start online - the agenda included an update on Transfusion Transformation, Hospital Updates, a review of the 2025 Workplan, and updates from the NHSBT. This was followed by the national education event – the topic provided by the National Blood Transfusion Committee (NBTC) and hosted by the SE RTC.

**Regional Transfusion Team (RTT)** met four times in 2025 – 12 February, 8 May, 9 September and 10 December. The meetings are well attended and cover a spectrum of topics.



This year the RTT covered the registration costs for five delegates, working in transfusion, to attend the SHOT symposium – which proved very successful and considered money well spent. To be awarded the registration cost - each applicant had to give a reason why they should attend, and what they hoped to take away from the event. Dr Moein Karbalaieian, a haematology registrar from East Surrey Hospital gave a presentation: *From SHOT to Ward - Key Learnings from Shot 2025* at the SE RTC Transfusion Bites event (held in February 2026) – now available on the [SERTC website](#).

**Transfusion Practitioners Group (TPG)** In 2025, the South East TP Group welcomed three new members - Isla Downs from East Kent, Elizabeth Sinnett from Oxford, and Hannah Knight from Southampton.

A new logo was chosen in 2025 and now features on regional paperwork for meetings and reports



As usual, the group facilitated sharing of key topics from the various national meetings that specific members of the group attend, including the BBTS TP Special Interest Group, National TP Network, and the NBTC Haematology and Trauma Group meaning both that learning from these groups is widely shared and that concerns or questions from more TPs are fed into national conversations. A council member from Jehovah's Witnesses Hospital Liaison Committee gave a presentation at the March meeting, outlining their role as representatives.

The SETPG also continued to support each other to work through any issues at local hospitals where a second opinion was sought. This is especially helpful for any lone TPs. With this aim in mind, a feedback form was developed for each of the trusts to complete prior to the meetings which has allowed us to pull out themes, focus on the most critical incidents and develop solutions. An example of one point that was raised by the group was about varying opinions on appropriate transfusion in hip fracture patients. This then led to an interesting debate which culminated in an excellent talk by Howard Wakeling at the Transfusion Bites education event (held in February 2026) and a reminder of the importance of individualised treatment over simple thresholds.

The group has also been grateful for the attendance of our Customer Services managers, and our PBM Practitioner, to provide a way for everyone to receive NHSBT updates, including our QS138 regional audit data, and for TPs to ask any questions they have.

**Transfusion Laboratory Manager meetings** – there are two groups within the South East region: TADG (Tooting and Colindale) met on 13 March (online), a face-to-face meeting was held on 26 June with

presentations from MHRA, RCI, and CliniSys, and representatives from Haier Biomedical, QuidelOrtho, and Brenmoor, and another online meeting on 16 October. Oxford and Southampton User Group – met on 9 April (online) and 16 July (face to face) at the John Radcliffe Hospital. Alongside Hospital updates, presentations and discussions including RCI, and a recent UKAS inspection. Staffing issues were still considered the main reason for disappointing attendance at some TLM meetings.

**Transfusion Practitioners and Transfusion Laboratory Managers’ joint meeting** was held online on 30 September. It was a packed agenda with five key presentations – What’s new from SHOT; Dried Plasma and Dried Cryoprecipitate; Major Incident preparedness – tabletop exercise; learnings from Mass casualty exercise, NHSBT updates and a look at the RTC workplan for 2026. Bringing these two groups together always provides lively and productive discussions and one of the presentations has led to a new RTT working group being formed to look at O Neg Substitutions – regional audit to be devised for 2026. Presentations are available via the [NBTC/SERTC webpage](#)



**Education Event:**

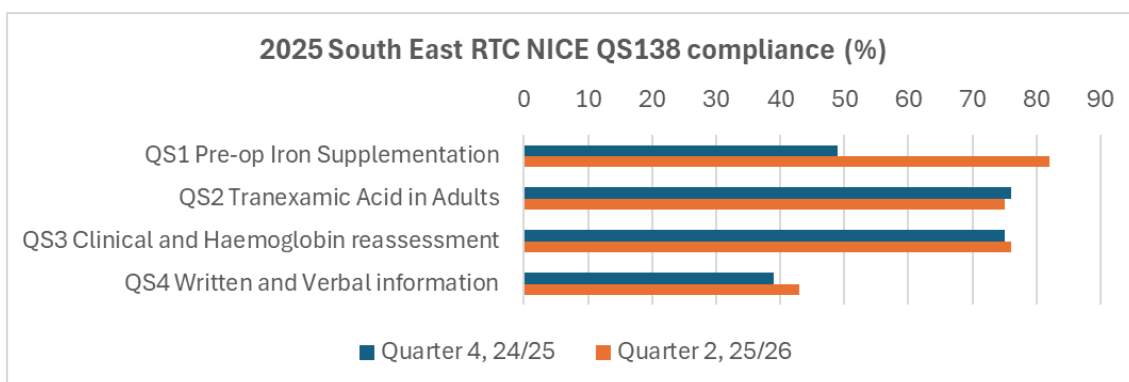
NBTC allocated topic – **Management of adverse events including: PSIRF, Human Factors and Safety** – was hosted by the South East RTC on 3 July via Teams. 176 delegates attended on the day, providing very positive feedback after the event. Using a five-star rating the event achieved 4.7. Six Presentations were given, including two case studies, the latest insights from SHOT and MHRA; Human Factors and Reducing Risk; Patient Safety Incident Response Framework (PSIRF) - Impact on investigations of Transfusion Incidents; and enhancing the capture, interpretation and use of safety intelligence in Haemovigilance: Opportunities and Challenges. Presentations available via the [NBTC/SERTC webpage](#).



**QS138 Quality Insights** – South East biannual audit of NICE Quality Standard QS138

Strong regional quality improvement activity continued in 2025, with 23 hospitals taking part in the biannual audit cycle. More than 2200 regional cases were audited last year, taking the South East’s cumulative total to over 6400 cases since launch.

Regional results across the four quality statements (QS) from the two audited quarters can be seen in the chart:



Finding pre-op iron deficient anaemia cases is increasingly difficult as patients appear to be being treated earlier in their care journey. Where found, many sites now have established preoperative anaemia pathways to identify and treat these cases. Whilst QS1 remains the most difficult to audit, it is important to celebrate the good practice seen during the review process, as well as addressing improvement opportunities.

Use of tranexamic acid (TXA) for adults in moderate blood loss surgery remains one of SE’s stronger areas, with three quarters of cases audited being given TXA. This currently falls just short of the 80% target set out in recommendation 7ai) of the Infected Blood Inquiry report. Much variation for use has been seen across specialities. [NICE updated QS2](#) in February 2026, broadening TXA eligibility by removing the previous

'expected moderate blood loss criterium'. QS138 Quality Insights is currently under review with platform and guidance alignment planned by the Autumn cycle. It will be interesting to see how the wider audit net impacts compliance.

Reassessment after transfusion, a marker of a single unit approach, consistently reveals good practice across the region. This is important as the [2024 SHOT report](#) continued to highlight the increasingly alarming rate of national Transfusion-Associated Circulatory Overload reports.

Regional figures for providing patients with information about transfusion remains a concern, particularly the provision of written information. In 2025, SaBTO updated and strengthened the '[Patient consent and shared decision-making for blood transfusion](#)' guidance with a strong focus on the importance of giving patients a voice to enable informed consent *or refusal*, a defined process and better documentation processes. Frimley Health and Hampshire Hospitals were explicitly identified as having good practice, their documentation templates are signposted as supporting materials on the [SHOT website](#).

A regional QS138 Quality Insights questionnaire was carried out in April to assess the impact of introducing bi-annual regional auditing. The results were written up as a 'Slow and Steady wins the rACE' entry for the 2025 SHOT Symposium and won best poster. As an output, the region will now submit case studies to share learning on where improvements in practice have been made. The winning poster is available to view on the [South East pages of JPAC](#).

The bi-annual audit cycle will continue in 2026. Nationally, 164 hospital sites are registered to use QS138 Quality Insights, with >16,800 cumulative cases audited since launch.



**Congratulations** to Anwen Davies (PBMP South East) and Sally Richardson, (TP, Conquest Hospital, East Sussex FT), who won best poster award at the 2025 SHOT Symposium:

Anwen writes: *What a pleasure it was to represent the South East Transfusion Practitioner Group with our winning poster '[Slow and Steady Wins the rACE](#)'. The category – Acknowledging Continuing Excellence (ACE).*

*The poster outlined the unwavering hard work of the SETPG over the last 8 years, dedicated to improving compliance to NICE QS138 Quality Standard, ultimately improving patient care. The SETPG are worthy winners, and we were delighted to accept the prize on their behalf. We thoroughly enjoyed the day, including our 'Just a Minute' session.*

**Customer Services Team** saw changes in 2025 as the region said farewell, with grateful thanks, to Carol Stenning, and welcoming back Rhian Edwards to the post of Customer Services Manager for Southampton.

**National Transfusion Practitioner Network Project (NTPN):** Representatives from the South-East region have been collaborating with other Transfusion Practitioner (TP) representatives from across England to create an introductory workbook for TPs to work through within their first 2-3 years of practice, and to supplement their local learning. The overall aim of the workbook is to provide a national, standardised baseline educational tool for new and existing TPs. This will be launched at TP2026.

**Congratulations** to Julie Staves, who was appointed BBTS President in 2025.



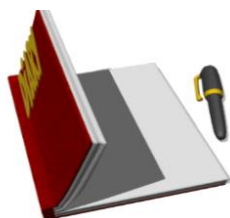
The Council is BBTS's governing body and membership consists of the President, Vice President, Executive Director, Treasurer, Honorary Secretary and elected members.

Julie is the Transfusion Laboratory Manager at John Radcliffe Hospital, part of Oxford University Hospitals.



**Congratulations** also to Professor Mike Murphy, Consultant Haematologist, known to many of you as the NHSBT Consultant for the former South-Central region, who has been recognised for his outstanding contributions in the field of blood transfusion. Mike (seen here on the left) was presented with the Emily Cooley Award at the Association for the Advancement of Blood & Biotherapies (AABB) Conference. The Emily Cooley Award is one of the AABB's most prestigious awards given to Mike in recognition of his many years of strong and generous leadership in the blood and biotherapies field, both in the UK and throughout the world.

Anwen Davies and team had the pleasure of holding a **PBM Pop Up** stand in Medway Maritime Hospital. Joined by their brilliant Transfusion Practitioner, Kathleen Sharp and many supportive colleagues, there were lots of meaningful conversations with patients and staff about blood health, anaemia management, shared decision making and safe transfusion practice. If you are interested in hosting a PBM Pop Up stand, please contact the PBM Team.



**Diary dates for 2026:**

- RTT Meetings:** 6 May; 10 September; 2 December
- TP meetings:** 16 June; 10 December
- TP/TLM joint meeting:** 20 October

**Projects for 2026:**

- RTT Working Group – O-Neg Substitutions Audit
- NBTC/RTC Education Topic: *Consent & Legal aspects of Transfusion, including Infected Blood Inquiry (IBI) Update*
- Transfusion Bites - RTC Education Event