

Minutes of the National Blood Transfusion Committee

Monday, 20 March 2017, 13:00- 16:30

Rooms on Regents Park, Royal College of Obstetricians and Gynaecologists, 27
Sussex Place, Regent's Park, London, NW1 4RG

Present:

Dr J Wallis	JW	Chair NBTC
Dr K Pendry	KP	Secretary NBTC
Ms C Bernstrom	CBe	EA to NBTC
Dr S Allard	SA	Royal College of Pathologists
Dr C Baker	CB	Patient Involvement Working Group
Mr S Bassey	SB	Transfusion Laboratory Managers Working Group
Dr A Benton	AB	Blood Implementation Group, Wales
Dr P Bolton-Maggs	PB-M	Serious Hazards of Transfusion
Ms F Carragher	FC	Deputy Chief Scientific Officer, NHS England
Dr C Carroll	CC	North West RTC
Dr J Cort	JC	East Midlands RTC
Dr A Dodds	AD	North East RTC
Mr G Donald	GD	Patient Representative
Mr C Elliott	CE	Institute of Biomedical Science
Ms G Gray	GG	Royal College of Obstetricians and Gynaecologists
Ms K Hearnshaw	KH	Patient Representative
Mr A Jackson	AJ	British Blood Transfusion Society
Dr N Jones	NJ	East of England, RTC
Dr G Johnson	GJ	(for Mervi Jokinen) Royal College of Midwives
Dr P Kelly	PK	London RTC
Dr S Mallett	SM	(for Andrew Klein) Royal College of Anaesthetists
Dr G Mifflin	GM	Medical and Research Director (NHSBT)
Dr A Morrison	AM	Scottish Clinical Transfusion Advisory Committee
Dr C Newson	CN	West Midlands RTC
Dr J Reid	JR	Royal College of Physicians
Mr C Robbie	CR	Principal Haemovigilance Specialist, MHRA
Dr M Sekhar	MS	British Society of Haematology
Dr N Sargant	NS	South Central RTC
Ms L Sherliker	LS	National Lead: PBM Team, NHSBT
Dr Y Sorour	YS	Chair of RTC Chairs & Yorkshire & The Humber RTC
Dr S Wexler	SW	South West RTC
Dr H Williams	HW	NHSBT Director of Diagnostic and Therapeutic Services (NHSBT)

In attendance:

Mr C Philips	CP	Head of Hospital Customer Service (NHSBT)
Ms D Watson	DW	Patient Blood Management Practitioner – Education (NHSBT)
Dr Jane Graham	JG	Consultant haematologist UHNM

Apologies:

Mr A Cope	AC	Royal College of Emergency Medicine
Ms R Gallagher	RGa	Royal College of Nursing
Dr J Graves	JG	Infectious Disease and Environmental Hazards Department of Health
Dr L Green	LG	Blood Components Working Group
Mrs S Harle-Stephens	SHS	British Blood Transfusion Society, Plymouth
Ms Catherine Howell	CH	Interim: NHSBT Assistant Director Customer Services
Ms M Jokinen	MJ	Royal College of Midwives
Mr S Khan	SK	Intensive Care Society
Dr A Klein	AK	Royal College of Anaesthetists
Prof S Hill	SH	Chief Scientific Officer, NHS England
Mr G Methven	GM	Director of Blood Manufacturing and Logistics, NHSBT
Dr S Morley	SM	Royal College of Paediatrics and Child Health
Mr J Thompson	JT	Royal College of Surgeons
Dr H Wakeling	HW	South East Coast RTC

01/17	Welcome and Apologies	
	The Chair extended a particular welcome to Ms Fiona Carragher, Deputy Chief Scientific Officer, NHS England.	
	Apologies were noted.	
02/17	Minutes of the meeting of the full Committee held on 19 September 2016.	
	The minutes of the meeting held on 19 September 2016 were agreed as a correct record.	
03/17	Regional Transfusion Committee (RTC) Chairs	
	YS gave an overview of the morning meeting highlighting a plethora of educational activities across the regions. Main concerns related to widespread staffing shortages in transfusion labs across the country.	
	JW proposed that the topic for a workshop for the RTC Chairs meeting in September will be on Consent and that Bidy Ridler should be invited to present at this meeting. This was approved.	
04/17	NBTC Workplan 2016/17	
	KP gave update on the Workplan 2016/17 highlighting ongoing work.	
05/17	DRAFT - NBTC Workplan 2017/18	
	The Draft Workplan for 2017/18 was submitted and KP added that any feedback	

	should be directed through CBe (celina.bernstrom@nhsbt.nhs.uk).	
	One objective is to arrange a National Symposium on Patient Blood Management to be held in Spring 2018. The aim will be to discuss and confirm the direction for PBM in the next 5 years. PBM stakeholders will be invited including representatives from NBTC. The last PBM symposium was in 2012.	
06/17	Minutes of the meeting of the Executive Working Group meeting held on 30 January 2017	
	The minutes of the meeting held on 30 January 2017 were agreed as a correct record and any outstanding points form part of the agenda for this meeting.	
07/17	National Comparative Audit of Blood Transfusion Programme	
	<p><u>Current audits</u></p> <ul style="list-style-type: none"> o 2014 audit of transfusion in children and adults with Sickle Cell Disease – report due April 2017 o Re-audit of the 2015 Audit of Patient Blood Management in adults undergoing scheduled surgery – data in analysis o 2016 Audit of red cell and platelet transfusion in adult haematology patients – due to be repeated June 2017 o 2016 Audit of Red Cell Transfusion in Hospices – completed, at report writing stage o 2017 Audit of Transfusion Associated Circulatory Overload – in progress. 	
	<p><u>Future audit topics</u></p> <ul style="list-style-type: none"> o Audit of blood sampling and labelling, collection of blood from blood bank and administration to the patient (known as the Vein to Vein [V2V] audit o Audit of the use of FFP in children and neonates o O D Neg Audit 	
08/17	Update on NICE Quality Standards	
	The following standards were published in Dec 2016: https://www.nice.org.uk/guidance/qs138	
	<ul style="list-style-type: none"> o Statement 1: People with iron-deficiency anaemia who are having surgery are offered iron supplementation before and after surgery o Statement 2: Adults who are having surgery and expected to have moderate blood loss are offered Tranexamic acid. o Statement 3: People are clinically reassessed and have their haemoglobin levels checked after each unit of red cells they receive, unless they are bleeding or are on a chronic transfusion programme. o Statement 4: People who may need or who have had a transfusion are given verbal and written information about blood transfusion. 	
	JW has reviewed the wording of the standards and proposed that the NBTC supports these in the context of the original meaning of the NICE guidelines published in 2015. With regard to Statement 3 this should be applied where a decision has been made to transfuse a single unit of red cells, or to use a 'single unit' policy in that patient, but not where multi-unit transfusion is planned. The committee agreed this interpretation as	

	outlined in detail in Paper F2.	
09/17	Maintaining standards in Hospital Transfusion Laboratories	
	KP / JW gave an overview of a workshop held in Jan 2017 to discuss the way forward with regards to supporting hospital transfusion laboratories to enable compliance with the UK TLC standards. NHSBT has agreed to work with a small group of selected hospitals to run a feasibility project looking at the impact of integrated working between NHSBT and hospital transfusion services focussing on RCI and laboratory testing. Expressions of interest from Trusts will be sought to work with NHSBT in a 2 year project	
	Action: KP/JW to agree wording of invitation for expressions of interest with NHSBT. This will be sent out via RTC administrators	
	SB highlighted some of the concerns: The BMS degree is not sufficient and does not ensure graduates are fit for purpose in laboratories. There is a lack of skill in the laboratories due to substantial loss of highly skilled laboratory staff as jobs are vacated or retirement.	
	The problems are centred around a lack of training and a staffing shortage. FC added that the issues are with pathology as a whole and HEE is reviewing the BMS workforce training issues. Problems will be illuminated by UKAS inspections.	
	One possible solution is to expand the number of HSST posts to supply Consultant Clinical Scientists in transfusion. SA said that this should not only be left to NHSBT; hospital trusts should also develop such training posts. JW noted that forced re-organisation of laboratory services risked losing highly experienced senior staff and should be approached with caution.	
10/17	Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO)	
	In the absence of Jonathan Graves JW gave a brief overview.	
	HEV screening: 100% universal testing of blood components for HEV is being rolled out and fully screened stock will be available from 01 May 2017.	
	After 1 st May, there will be some unscreened FFP which is likely to be issued within 4-6 weeks depending on demand. Hospitals will need to have mechanisms in place to deal with this temporary dual inventory. A few rarer components will take longer to use up e.g.: IgA deficient plasma. If these are requested and used they will be issued under concession as a non-HEV screened component	
	Request for SaBTO review of need for irradiation of blood components and to consider the benefits or otherwise of universal irradiation of platelets. JW has written to Jonathan Graves on this subject and the issue is currently being considered by Prof James Neuberger, Chair of SaBTO. SAC-BC have recently reviewed the impact of irradiation on platelet function and concluded that there was limited evidence of a deleterious effect on platelet function but the data available was largely for 5 day stored platelets and not for 7 days. The question of stopping irradiation altogether would be a difficult one to make in the view of lack of robust evidence in this area and the fallibility of leucodepletion as the sole protective measure for TA-GvHD.	
	Action: JW to follow up on outcome of discussions at SaBTO meeting and feed back at next meeting.	

Comment [A1]: Would an action be to revisit any progress at the next NBTC?

11/17	Serious Hazards of Transfusion (SHOT)	
	SHOT report and symposium. The SHOT symposium 2017 will be in Rothampstead (Harpenden) on 12 July which is the publication date of the Annual Report 2016. The deadline for abstract submission is 28 April 2017.	
	Funding concerns have settled and SHOT are within budget and are not expected to make additional savings this year.	
	<u>Governance:</u>	
	The Academy of Medical Royal Colleges did not agree to oversee SHOT. SHOT governance for practical reasons (employment and finance) will continue through NHSBT and PB-M has regular one-to-one teleconferences with Gail Miflin who reports back to the UK forum.	
	<u>Succession planning:</u>	
	Dafydd Thomas, current Steering Group Chair, will be stepping down in July 2017 and will be succeeded by Professor Mark Bellamy.	
	<u>Collaborations:</u>	
	SHOT data is being provided to the AFFINITE national research study. SHOT is assisting in the planning of two national comparative audits (TACO and vein to vein process). PB-M is assisting in writing the report for the national comparative audit of sickle cell disease.	
12/17	NBTC Working Groups	
	<u>Patient Involvement Working Group (Dr Charlie Baker)</u>	
	Here is the link to the blood transfusion consent video on YouTube http://hospital.blood.co.uk/patient-services/patient-blood-management/consent-for-transfusion/	
	Issues with accessing the consent video on YouTube were discussed. IT departments can download and create links to it where firewalls exist.	
	KP expressed a keen interest on working with CBa for the planned Consent Workshop at the NBTC/RTC Chairs meeting on 19 September 2017.	
	<u>Patient Blood Management Working Group (Ms Louise Sherliker)</u>	
	<u>LS discussed key projects which were not otherwise covered in other agenda items</u>	
	<u>Pre operative Anaemia Project NW RTC</u>	
	Need to measure results before and after to measure impact of anaemia management.	
	<u>Single Unit Transfusion Project London RTC</u>	
	<ul style="list-style-type: none"> The aim of the project was to implement a single unit red cell transfusion policy for some wards in two London NHS Hospitals (Kings College Hospital and University Hospital Lewisham) and evaluate the impact on blood usage. This project started in September 2014 and involved a member of the NHSBT PBM practitioner team working with a transfusion team and clinical area to deliver improved practice and cost savings. A paper is in preparation to be submitted for publication. 	
	<u>Iatrogenic Anaemia</u>	

A joint PBM project between St George's NHS Foundation Trust, Western Sussex Hospitals NHS Foundation Trust and NHSBT	
<p>Overview:</p> <ul style="list-style-type: none"> - Objectives: Evaluate the volume of diagnostic blood loss and its impact in adult ICU patients - Design: prospective cohort study - Patients: 40 adult patients admitted for ≥ 48 hours in ICU 	
<u>PBM QI project</u>	
Part of NCA project plan.	
<u>NBTC Indication codes 'app'</u>	
This app provides information on the NBTC indication codes for transfusion. The app will also incorporate Paediatric and Neonatal indications. Up and running on Apple devices only. JW wanted data on how many times it is accessed. LS confirmed targets will be in place and it will be monitored. Funding has been agreed to have the app on further platforms – to be launched April 2017	
<u>Anaemia Management Working Group (Dr Sue Pavord):</u>	
The main objective is to drive the agenda for PBM through the NBTC rather than allow this to be driven by an industry sponsored programme. The group met in February and is scheduled to meet 08 May 2017 in Birmingham. Expressions of interest to join the group are to be sent to Celina Bernstrom (celina.bernstrom@nhsbt.nhs.uk)	
Action: All	
Terms of Reference:	
<ol style="list-style-type: none"> 1. Produce overarching patient blood management guideline for management of anaemia 2. Raise awareness of importance of anaemia recognition, investigation and management with clinicians, patients and public 3. Develop tools to support implementation of anaemia management across primary and secondary care 4. Work with commissioners to commission pathways that support best practice 5. Develop KPIs to monitor compliance with quality standards in anaemia 	
SA asked whether the group had any support from Colleges or Professional bodies and this is to be included as agenda item for the meeting in May.	
Action: SP/CBe	
<u>Education Working Group (Dr Shubha Allard)</u>	
SA gave overview of current projects, completed projects and forthcoming projects.	
The membership has been expanded to ensure a mix of NHSBT and hospital based consultants, Patient Blood Management practitioners, Transfusion practitioners and Laboratory representatives. Additional support to be co-opted for projects as needed.	
PBM Smartphone App is a medical device to support decision making around anaemia management and use of red cells in non bleeding adult patients based on NICE and BSH guidelines: Accuracy and evaluation with pre and post App decision making amongst Consultant Haematologists completed. The App is now CE marked.	

	Proceeding with usability amongst trainee doctors and then undertake post implementation study looking at impact on junior doctor practice.	
	Transfusion Education Initiative: pilot course aiming to improve transfusion training of junior doctors using Team Based Learning and social media to enhance participation and maximise learning opportunities, as well as generate some enthusiasm for transfusion medicine. Planning two single day events, with online tutorials using social media; Interactive lectures. Participants will be encouraged to undertake a transfusion-related Quality Improvement Programme within own Trust.	
	<u>Transfusion Laboratory Managers Working Group (Stephen Bassey)</u>	
	KPI for O neg needs changing.	
	<ul style="list-style-type: none"> • Overall wastage rates reviewed • Growing concern over staffing, staff training and networking • Use of MHRA forum to explore staffing issues 	
13/17	NBTC Membership and Declarations of Interest (DOI)	
	Any amendments that are to be made to the NBTC Membership are to be sent to CBe.	
	JW highlighted the importance of completing the Declarations of Interest form. Those failing to do so will have their expenses withheld from payment.	
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	Action: All	
14/17	NHSBT	
	RCI turnaround figures have improved.	
	Core Systems Modernisation – The work is on target with the first part of the system due to go live in autumn 2017. Trusts may be asked to increase their stocks over the changeover period.	
	Supply Modernisation Project for North of England. – progressing well and recruitment underway.	
	Leeds / Sheffield project has seen positive customer engagement. Meeting with stakeholders to discuss the next steps scheduled for June 2017.	
15/17	Medicines and Healthcare Products Regulatory Agency (MHRA)	
	SABRE update report was received (Chris Robbie). JW asked whether there was a move towards analysis of joint reports for SABRE and MHRA. Reporting into Europe may change post Brexit.	
16/17	NBTC Budgets	

	Budget update report (Ms Louise Sherliker)	
	LS extended thanks to all who have adhered to new travel guidelines to avoid overspend.	
18/17	Any Other Business	
	Dr Andrew Klein succeeds Dr Susan Mallet as NBTC representative for the Royal College of Anaesthetists. Thanks for Dr Mallett's contributions were noted	
	Dr Sarah Wexler has formally taken over from Dr Sarah Allford as South West RTC Chair.	
19/17	Date of Next meetings	
	NBTC/RTC Chairs – Autumn meeting Monday, 18 September 2017 at Friends House, 173-177 Euston Road, London, NW1 2BJ	
	The group voted on the meetings being conducted in cabaret style and the majority agreed that the new format was an overall success. CBe to orchestrate the same layout for the September meeting.	
	Action: CBe	

Summary of Agreed Actions: Meeting held on 20 March 2017

Minute Ref	Agreed Action	Responsibility	Completion /Review
09/17	Maintaining standards in Hospital Transfusion Laboratories		
	Reference supporting hospital transfusion laboratories to enable compliance with the UK TLC standards. NHSBT has agreed to work with a small group of selected hospitals to run a feasibility project looking at the impact of integrated working between NHSBT and hospital transfusion services focussing on RCI and laboratory testing. Expressions of interest from Trusts will be sought to work with NHSBT in a 2 year project. Agree wording of invitation for expressions of interests with NHSBT to be sent out via RTC Administrators.	KP/JW	
10/17	Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO)		
	Review of need for irradiation of blood components and to consider the benefits or otherwise of universal irradiation of platelets.		
	Follow up with SaBTO on discussions at meeting and feed back to the NBTC.	JW	
12/17	NBTC Working Groups		
	<u>Anaemia Management Working Group (Dr Sue Pavord):</u>		
	The main objective is to drive the agenda for PBM through the NBTC rather than allow this to be driven by an industry sponsored programme. The group met in February and is scheduled to meet 08 May 2017 in Birmingham. Expressions of interest to join the group are to be sent to Celina Bernstrom (celina.bernstrom@nhsbt.nhs.uk)	All	
	<u>Terms of Reference</u>		
	Investigate likely support from Colleges or Professional bodies.	SP	
	Add to next NBTC Anaemia working group meeting on 08 May 2017.	CBe	
13/17	NBTC Membership and Declarations of Interest (DOI)		
	A reminder to those that have yet to fill in their Declarations of Interest and send to CBe.	All	