MINUTES **UHBNT Hospital Transfusion Committee**

Clinical Oncology Tutorial Room, 3rd Floor, Oncology Block, QEH 12.30 -14.00 14 August 2002

Present

Dr Heidi Doughty HD Mrs Jacquie Roper JR Mrs Siobhan Heafield SH Mrs Jo-Anne Lacey JL Dr Mav Manii MM

Apologies

Mrs Margaret Gately MG Mrs Jane Ives JI Dr Glvn Wvnne-Jones Mr Paul Saunders

Agenda item Action

Welcome and Introductions 1.

The committee has been reformed under a new Chair. The meeting had been called at short notice in anticipation of forthcoming CNST inspections. HD apologised for the late change of venue.

The committee should note that the last formal HTC had taken place in August. 2001. Unfortunately, the mintes for this meeting had been lost. Since that meeting there have been a number of meetings between committee members in order to prepare the reivised edition of the new hospitla protocol.

A list of the new membership was circulated. All members were asked to confirm contact details. AII

Background documents 2.

HD

The following background documents were circulated

- Better Blood transfusion HSC 2002/09
- CNST level 1 revised criteria
- Draft copy of the Terms of Reference

The documents should be sent to all those not present

HD:

3. External reviews

SH/JR

- CHI, Autumn

Evidence folder sent CNST 16/17 Oct

SH

CPA

31 Oct/1 Nov

JR

The main shortfall appears to be training and documentation of training.

4. Where are we now?

HD

Hospital Policy Will be presented at the Sept meeting

SH

Intranet Webpage now established under departments
 All to review and consider what other information/documents should be included. Send recommendations to HD

Induction programmes

HD

- PRHOs and SHOs covered during induction days with follow-up lectures during year's programme
- SpRs and new nurses can be covered by trust induction day. HD to provide copy of induction package to JL. Packet includes:
 - a) Powerpoint handout on trust
 - b) SHOT form
 - c) Questionnaire and feedback form

HD/JL

Porters – cover with new facilities appointment

HD'

Hospital transfusion practitioner

HD

All professional backgrounds would be suitable – however the initial job description should probably be aimed at a nursing background. HD to co-ordinate with Helen Moss and JR. Margaret Gately to be reader.

HD/MG

Incidents

HD

Present reports produced monthly by risk management. Approximately 6 incidents are reported – many of which are related to portering problems. The risk needs to be qualified as service or clinical and degree of risk. Reporting is being changed with 'Action taken' included.

Wastage

HD/JR

Wastage is currently about 100-150 units of red cells a month. At a unit cost of £100, this represents a sizeable loss. It was suggested that Information could support laboratory services to identify root causes of waste. SH to negotiate and contact JR SH/JR

Budget

JR/HD

The present costs are £4.4 million. The trust has done well to reduce red cell use by 4.75% despite increase in activity at a cost saving of £130,000.

5. A.O.B

HD briefly presented a key paper by Hunter et al, describing an animal model demonstrating transmission of prions by blood transfusion.

HD reminded the HTC that MSBT is likely to announce that all donors who have received blood components during a certain time frame will no longer be eligible to give blood. The minimal impact of this decision will be a 15% reduction in the blood supply. The National Blood Service is also considering a worse case scenario of a temporary reduction of 50%. The trust will need to identify how they will respond to this external threat. The figures do suggest that Trusts with red cell salvage will be in a stronger position to continue their elective procedures.

6. Plan of campaign Discussion of actions and time scales All Most of these points should be closed by the next meeting.

Membership – 2 weeks.

HD

- Confirm final membership with key personnel from theatres and facilities.
- Confirm patient representation with Jenny Dodds
- Forward HTC TORs to Commandant RCDM for his review

HD

Medical Director - 2 weeks

 Brief the medical director who will be key to emergency planning for the hospital in the event of blood reduction.

MM/HD

Hospital transfusion Practitioner

- HD to provide draft and distribute to JR/HM/MG 1 weeks HD
- Return draft in 1 week

 JR/HM/MG

6. Date and Venue of next meeting

Thursday Sept 12th 2002, 12.30 –13.35 Provisional meeting place Room 44f Nuffield house

SH

Minutes Dated 14 Aug 2002-08-14 Prepared by HD, Reviewed by MM

UNIVERSITY HOSPITAL BIRMINGHAM NHS TRUST

Job Title: Hospital Transfusion Practitioner

Grade: Nursing G Grade

Managerially Responsible to: Consultant in Transfusion Medicine

Business Manager - Laboratory

Professionally Accountable to: Nurse Education Co-ordinator

Job Summary

The post-holder will encourage, promote and facilitate 'Better Blood Transfusion' across the Trust in accordance with the Health Service Circular 2002/2009. The post-holder will work as a member of the Hospital Transfusion Team and will develop and deliver educational packages to all staff groups involved in the blood transfusion process. The post-holder will work with the team to monitor practice, identify problems and to develop deliverable action plans. The role of the Transfusion Practitioner will be key to the Trust risk management strategy and the clinical governance agenda.

Principal Responsibilities

- Develop and facilitate the implementation of policies designed to improve the effectiveness of blood transfusion medicine in the Trust.
- Liaise with all groups of staff and patients to promote the optimal use of blood and blood alternatives within best practice and clinical guidelines.
- Develop and implement a programme of education specific to blood transfusion, in line with national guidance.
- Using appropriate mechanisms maintain, monitor and report up-take of blood transfusion training.
- Provide relevant evidence relating to blood transfusion for CNST.
- Act as a resource for staff on issues relating to blood and blood components.
- Provide expert advice and support to patients and the multidisciplinary team on issues associated with blood transfusion.
- Take a lead role in implementing audit methodologies and benchmarking, to assess new and established practices and effect change in practice.

- In conjunction with the Risk Management Department investigate and resolve actual and potential problems associated with transfusion.
- Prepare accurate and concise written reports as requested.
- Provide leadership, motivation and vision regarding the contribution of the hospital transfusion team to patient care.
- Facilitate liaison between the laboratories services and the clinical areas
- In conjunction with the haematology Business Manager develop systems ensuring the cost effective use of blood and blood components.
- Forge links with external bodies involved in blood transfusion including the National Blood Service, and the British Blood Transfusion Society.
- Lead on submitting Trust data to the Serious Hazards of Transfusion scheme.
- Participate in the presentation of audit and research findings, as requested.

The post holder is expected to be fully conversant with the NMC Code of Conduct and associated national guidelines and abide by their guidance.

The post holder will adhere to and promote Trust policies, procedures and guidelines related to professional practice and general issues, i.e. Health & Safety, Equal Opportunities etc.

NOTES

This is not intended to be an exhaustive list of responsibilities but more an outline framework against which the post-holder will be given flexibility to define detail. Any changes will be subject to consultation with the post holder.

All employees must adhere to and perpetuate Trust Policies and Procedures relating to:

Health and Safety

No Smoking at work

Equal opportunities in Employment, including responsibilities under the Disability Discrimination act.

UNIVERSITY HOSPITAL BIRMINGHAM NHS TRUST

LABORATORY SERVICES & DIRECTORATE OF NURSING AND ORGANISATION DEVELOPMENT

HOSPITAL TRANSFUSION PRACTITIONER GRADE G

PERSON SPECIFICATION

COMPETENCE	ESSENTIAL	METHOD OF ASSESSMENT
EDUCATION/ QUALIFICATIONS/TR AINING	Registered General Nurse Evidence of personal/professional development	Application Form
EXPERIENCE	Minimum of 5 years post-registration experience in an acute setting Minimum of 2 years at F Grade or above Teaching experience Demonstrable evidence of change management in a clinical setting	Application Form
SKILLS	Well developed leadership, interpersonal and communication skills Proactive and self-motivated with the ability to motivate others Broad knowledge and understanding of nursing organisational issues in an acute Trust Knowledge and understanding of the DoH initiatives to promote Better Blood transfusion Knowledge of NHS modernisation agenda together with an understanding of current issues in nursing policies and practice Ability to produce clear, accurate, written and verbal reports Good presentational skills Understanding of clinical governance and benchmarking	Interview
OTHER	Demonstrates professional attitude and credibility	Application Form Interview
17: 37 370003		References

Htpjd/had/0902