

**MINUTES OF THE  
SERIOUS HAZARDS OF TRANSFUSION (SHOT)  
EXECUTIVE GROUP MEETING  
HELD ON FRIDAY 30 AUGUST 1996  
WEST END DONOR CENTRE**

**Present:** Dr L Williamson (Chair), Dr D Norfolk, Dr E Love,  
Dr R Evelyn, Dr P Skacel, Dr A Todd

**In Attendance:** Dr H Cohen, Mr J Revill, Mr P Gibson

**ACTION**

**1. Apologies:**

None

**2. Minutes of the Executive Group Meeting - 18 March 1996:**

These were accepted as correct.

26 SEP 1996

**3. Minutes of Steering Group - 18 May, 1996:**

**3a Matters Arising - Page 2:**

**Involvement of Eire:**

A copy letter of confirmation had been received from Joan O'Riordan. The question of whether Eire needed individual representative was discussed. Dr William Murphy is the new Medical Director for Eire and Audrey Todd will approach him to discuss the matter. Some hospitals in Eire are on the NEQAS scheme and therefore will be on the mailing list.

**Approval of Participating Bodies:**

A letter of interest but no nomination had been received from the Royal College of General Practitioners. *After the meeting, Dr Judith Fisher's name was received as RCGP representative.)*

**3b Minutes of the Ad Hoc Steering Group - 12 July 1996:**

**Page 1, 96.11: SHOT Questionnaires:**

Dr Cohen had not yet received a reply from the British Paediatric Association. The BPA representative had been asked to examine the questionnaires to ensure that they were appropriate for neonates.

**Note: The introductory letter to Haematologists should include reference to the fact that the reporting scheme applies to all ages of recipients.**

HC

4.

**Relationship Between Steering and Executive Groups:**

This was discussed at length. It was decided that Terms of Reference for both Steering Group and 'Executive Group' (see below) should be included in the overall Terms of Reference. The function of the Steering Group is to set the overall strategy, approve major policy changes, and to ensure that all representative bodies have an input. The importance of "ownership" by the Steering Group of the scheme was stressed. Hannah Cohen was concerned that at the moment the Steering Group appears to be more of a liaison group.

It was agreed that the Executive Group, which is an operational group, should be re-named as the Standing Working Group with representation as follows:

- Chair of the Steering Group
- Secretary of the Steering Group
- 2 National Co-ordinators for non-infectious and infectious hazards.
- There would be a maximum of 8 in the group with the ability to co-opt as necessary with the approval of the Steering Group and within the Standing Working Group there should be at least 2 Haematologists responsible for Blood Banks in hospitals, at least 1 Technologist and 2 Blood Centre based Consultants.
- The Standing Working Group (SWG) will report to the Steering Group as a fixed agenda item and the Steering Group Minutes will be circulated to all SWG members.

It was agreed that the Terms of Reference of the SHOT scheme should be circulated with the letter to the Haematologists.

**5. Reporting Form and Questionnaires:**

LW had received a number of comments for changes in the questionnaires. It was agreed that no further changes to reporting form or questionnaire should be made prior to the launch. The SHOT office will keep all comments on file and review the questionnaires at 6 months or other appropriate times.

EL/LW

There was a need to clarify 'near miss' events. For the purposes of SHOT this does not mean events where a wrong transfusion occurred but there was no clinical adverse effect. These types of events should be reported. This will be clarified in the letter to Haematologists, i.e. the adverse event report is irrespective of the clinical outcome. 'Near miss' is defined as error discovered before transfusion took place. Users will be encouraged to review these at local hospital transfusion committees.

"No return" cards were discussed. These could be sent out 3 times each year independently, using the NEQAS mailing list but not the NEQAS scheme. It would be important not to identify hospitals on the return cards. It was recommended that a very brief interim report be sent with the mailing of "no return" cards, indicating the number of hospitals participating in the scheme. It was felt that the design of these cards could wait until the Assistant SHOT Co-ordinator is in post when EL with the Assistant Co-ordinator will design a card and send a draft to all SWG members for comment.

EL

**6. Administration of the Scheme:**

The budget administration is being handled by Steven Morgan, Northern Financial Director, and will be devolved to Wendy Traverse, Financial and Contracts Manager for the West of Pennines Blood Centres. She is based at Manchester. It was felt that the provisional proposal for Eire to contribute £2000 should be revised to £3000, based on its population size. There was concern that the South West Zone had shown reluctance to

contribute to the scheme and members requested that EL discuss this again with Steve Morgan.

EL

7. **Formal Approval of Participants:**

Formal approval has been received as follows:

IBMS, RCN, RCOG, RC Anaesthetists, Irish Republic.

Provisional approval has been received by:

RCPATH, Faculty of Public Health.

Approval is awaited from BSH, UK BTCs, BBTS, BPA, RCS, RCP, PHLS/CDSC.

LW agreed to pursue the CDSC. Written endorsement is needed from all participating bodies prior to the launch.

LW/HC

8. **Launch:**

Peter Gibson declared that he felt that SHOT had already been "launched" as a good amount of information had already been made available to users via BSH and BBTS meetings etc and to NBS staff via the JSCC.

He therefore felt that a launch "event" was no longer required and that dissemination of the fact that the scheme is in existence hinged around the BMJ editorial written by LW, Julie Heptonstall and Kate Soldan. Press releases and the messages which will be passed to professional bodies must link into this. LW has since circulated an updated BMJ editorial for comment and it is hoped to publish the editorial in the BMJ on 16 November 1996, meaning that a press release will be required by 14 November 1996. The press release will also be sent to professional bodies.

PG will re-draft a press release which will be seen by the Steering Group prior to issue.

PG

It was agreed that copies of the BMJ Editorial should be circulated in confidence to members of the Steering Group for comment prior to submission to BMJ.

The contents of Consultant Haematologists' Information Packages was discussed and will include the following:

- An introductory letter from HC.
- Copy of Terms of Reference.
- A list of Steering Group and Standing Working Group members.
- Copy of the press release and 4 or 5 Initial Reporting Forms and information sheets.
- Chief Executives will receive a letter from HC and press release.
- Blood Bank Chiefs will receive a copy of the letter to Haematologists and Terms of Reference.

***Note added after the meeting: NBS Consultants will also require packages. It was suggested that this would be more or less identical to the hospital Consultants' packages.***

Packages will be sent out around the day of the launch. It would not be possible to circulate all hospitals and other individuals at once but individual hospitals, i.e. Consultants, Chief Executives and Blood Bank Chiefs should be mailed simultaneously.

Clerical help in Manchester will be a problem as at the same time Manchester Blood Centre will be newly "launched" into the PULSE NBA computer system and will also be dealing with the transfer of Reference Services from Manchester to Lancaster. It was felt that clerical assistance could be obtained at overtime rates.

EML

As far as Scotland, Northern Ireland and Wales is concerned, they will be sent material to allow them to make their own arrangements.

PG

9.

#### **Long Term Future:**

LW had attended the Haematology SAC at the Royal College of Pathologists at the invitation of Professor John Lilleyman. There was now much more interest at the College, in particular in finding a long term home for SHOT, although it was still felt by the College that funding should come from the Blood Services. There will in future be a joint College of Pathologist/College of Physicians SAC and some consideration will be required as to who will be the joint representative on the Steering Group.

HC had spoken to Professor Lilleyman more recently about these matters. There had already been discussion at

Council level and a report is expected by the end of September.

HC

HC raised the issue of membership of the Steering Group and the role that they play. BSH in particular wanted an active role with feedback and the ability to comment and influence actions. Concern was expressed that this should not slow progress of the scheme.

**10. Any Other Business:**

None.

**11. Date of Next Meeting:**

No date set. Further meetings may be required as necessary but a formal meeting may be held in February 1997.