

SERIOUS HAZARDS OF TRANSFUSION
NATIONAL STEERING GROUP

MINUTES OF MEETING HELD 2 PM. MONDAY 18 JANUARY 1999
AT THE ROYAL COLLEGE OF PATHOLOGISTS
2 CARLTON HOUSE TERRACE, LONDON SW1Y 5AF

Present

Dr. H. Cohen (Chair) representing BSH
 Mr. J. Revill (Secretary) representing IBMS
 Dr. L. Williamson Chair of Standing Working Group
 Dr. J. Barbara representing BBTS
 Professor J. Lilleyman representing Royal College of Pathologists
 Mr. I. Cumming representing Institute of Health Service Managers
 Dr. C. Taylor representing Royal College of Physicians
 Mrs. H. Jones Acting SHOT Assistant Co-ordinator
 Dr. B. McClelland representing UK Transfusion Services
 Dr. A. J. Mortimer representing Royal College of Anaesthetists
 Mr. B. McArdle representing IBMS
 Mrs. S. Scott representing Royal College of Nursing

Apologies for Absence

Dr. E. Love SHOT National Co-ordinator
 Professor J. Lumley representing Royal College of Surgeons
 Mr. D. Economides representing Royal College of Obstetricians and Gynaecologists
 Dr. M. Ramsay representing PHLS-CDSC
 Dr. J. Bennett representing Faculty of Public Health Medicine
 Dr. B. Gibson representing College of Paediatrics and Child Health
 Dr. J. Fisher representing Royal College of General Practitioners

Welcome to new members

The following new members were welcomed to the meeting
 Mr. I. Cumming representing the Institute of Health Service Managers
 Dr. A. J. Mortimer representing Royal College of Anaesthetists
 Mrs. H. Jones as Acting SHOT Assistant Co-ordinator

99.1 Minutes of Steering Group Meetings of 13 July 1998

These were accepted as a true record.

99.2 Matters Arising

- i) Dr. Williamson outlined the response from the BMJ to the draft publication reviewing the first years results from SHOT (see 98.6.iii). Dr. McClelland suggested that an American based author be invited to produce an Editorial to support the publication. He offered to provide some names to Dr. Williamson to follow up.

ACTION - DR MCCLELLAND/DR WILLIAMSON

- ii) It was noted that a BCSH Guideline document on blood handling and patient monitoring was awaiting publication and a request was to be made to the BSH to permit inclusion of the salient points from the Guidelines into the SHOT Report.

ACTION - DR COHEN

- iii) Continued membership of existing Steering Group members (see 98.11.iii).
 Only 2 formal responses had been received. Dr. Cohen agreed to write to professional organisations to clarify the position re continued representation by the current members.

ACTION - DR COHEN

- iv) The anonymity of hospitals within the reporting scheme was being reviewed by Dr. L. Love (see 98.10.iii) who had presented apologies for this meeting. Dr. Cohen will clarify the position.

ACTION - DR COHEN

- v) New members of the Standing Working Group were confirmed as Debbie Birrell, Biomedical Scientist from St. Mary's Hospital, London and Dr. D. Gozzard from Glan Clwyd Hospital, North Wales.
 It was suggested that a nursing representative, possibly Claire Atterbury from Kings Lynne should be invited to also join.

ACTION - DR COHEN

- vi) The possibility of a nurse practitioner representative from the RCN for the Steering Group was discussed.

ACTION - DR COHEN

- vii) Dr. Williamson presented a resume of the CMO's "Transfusion Day" (see 98.17). Following this meeting the HSC 1998/999 "Better Blood Transfusion" had been published. The main features were that Hospital Transfusion Committees should be in place and that all hospitals should contribute to SHOT by 31/3/99. It was suggested that we need to raise the profile of the requirement for IT developments to assist in BT validation at the bedside as part of wider IT strategies within hospitals. Dr. Williamson has already written to Sir Miles Irving suggesting that evaluation of novel developments, including the use of bar codes at the patients bedside, could be funded and supported through the Health Technology Assessment Group (HTAG).

ACTION - DR WILLIAMSON

99.3 Financial Report and future funding (presented by Dr. Williamson in the absence of Dr. Love))

- i) The current position is for £5000 to be carried forward from this financial year as a result of the BSH grant, whilst the BBTS has agreed to provide £5000 this year.
Predicted cash flow for 1999 - 2000 is income of £45,200, with expenditure of £64,200, leaving a deficit of £19,000.
- ii) The DoH has not been forthcoming yet with any funding. In the meantime the NBA has guaranteed to fund any shortfall in 1999 - 2000. Now that the National Institute for Clinical Excellence is to be introduced from 1/4/99 it was hoped that SHOT could be included (and therefore funded) as part of the scheme.
- iii) Because of increasing workload it was proposed that an additional 0.5 WTE assistant be employed in the SHOT office.

ACTION - SHOT OFFICE

99.4 1997-8 Annual Report

- i) Launch timetable and arrangements.
Cherry Chappell, who organised last years launch, outlined the approach taken then and she recommended that a similar plan should be used this year. This was agreed with a launch date of 9/3/99. It was noted that the DoH launch for the introduction of Clinical Governance guidance was due to released before 31/3/99 and that this will have implications for the reporting of incidents to Chief Executives also.
- ii) Report contents
Dr. Williamson had rewritten Chapter 6 to clarify the situation following the changes to the reporting year. It was agreed that Chapter 4 would include SHOT member participation in national meetings and publications.
It was agreed by the Steering Group that the Report be progressed without the need for further review by members.

ACTION - SHOT OFFICE

- iii) Future activities
 - a) It was suggested and agreed that Dr. D. Gozzard be approached to investigate and coordinate a possible web site for inclusion of the Report. The RCPATH may be able to assist.
ACTION - STANDING WORKING GROUP
 - b) Dr. McClelland proposed the use of retrospective surveys. Topics suggested included surveying changes implemented following HSC 1998/999, the implementation and actions of Hospital Transfusion Committees and to obtain information on blood component usage denominators. It was stated that CEPOD uses external consultants to conduct surveys. A significant limiting factor for SHOT is the lack of the necessary funded Consultant time to become more involved in surveys and projects.
 - c) The question was asked if solvent detergent treated FFP was included in SHOT or if, because it is a pooled product, this was part of the CSM Yellow Card scheme.
ACTION - STANDING WORKING GROUP

99.5 Any other business

- i) It was pointed out that the development of SHOT would benefit from the formal allocation of Consultant time to the scheme.
- ii) Because of the requirement to review the Terms of Office for the Steering Group membership (see 98.11), Dr. Cohen asked the views of the members present re her continuance in the role of Chair for the Steering Group. This was unanimously ratified.
- iii) It was recognised that many professional groups have an input into best practice requirements for blood transfusion. Dr. Williamson agreed to provide a list of involved organisations for the Secretary to circulate to members.

ACTION - DR WILLIAMSON

99.6 Date of next meeting

Agreed for 28 June 1999 commence 2pm.