

United Kingdom Transfusion Laboratory Collaborative (UKTLC)
Minutes of a meeting held on 17 May 2017
at 12 Coldbath Square, London, EC1R 5HL

Present:

Rashmi Rook (RR)	(Chair)
Alison Watt (AW)	(SHOT)
Caroline Subramaniam (CS)	(UKAS)
Debbie Asher (DA)	(Eastern Pathology Alliance/ TLM)
Hema Mistry (HM)	(SHOT)
Claire Witham (CWh)	(UKNEQAS)
Lee Wong (LW)	(NHS Wales)
Marie McQuade (MM)	(NHS Scotland)
Chris Robbie (CR)	(MHRA)
Megan Rowley (MR)	(RCPath)
Paula Bolton-Maggs (PBM)	(SHOT)
Catherine Young (CY)	(IBMS, Minutes)

1. Introductions/ Apologies

RR welcomed everyone to the meeting. Caroline Subramaniam and Alison Watt were welcomed to their first meeting of the collaborative. Apologies were received from Alison Geddis (NHS Northern Ireland), Malcolm Needs and Chris Ward (IBMS), Anna Capps-Jenner (CCMO's NBTC), and Julie Staves (BBTS/ CMO NBTC).

2. Actions from last meeting

Membership of UKTLC

RR agreed to update the list of stakeholders for the UKTLC and send this to CW. The group agreed to consider changes to the UKTLC Terms of Reference document including adding information such as length of term as Chair. RR to circulate this document for further comments.

ACTION: RR/ALL

Staff capacity planning guidance

The group agreed that the guidance document produced on the topic of capacity planning is lengthy and a better way of communicating this information could be considered. RR explained she would circulate the document for further comments and simplifying to maximum 2 pages if possible.

ACTION: RR/ALL

RR to contact Malcolm Needs and Chris Ward regarding further actions from the last meeting.

ACTION: RR, CW, MN

3. TLC 2017 Survey results

HM reported that the results of the recent TLC 2017 survey confirm and reflect much of what was expected by the group, and what is being experienced in the workplace. She explained that the three main points resulting from the survey were in relation to staffing, transfer of knowledge and skills, and capacity for training and development. It was thought that these three concepts all affected one another.

The group reviewed the circulated document of the survey key findings. A positive point recognised was that there was a higher response rate from laboratories in 2017 than in previous years. HM requested feedback on the diagram on page one and it was discussed as to how to make this eye-catching and related to errors and patient care. A modification to figure 4 was suggested to display data regarding band 6's and above only. Hema Mistry agreed to make the suggested changes.

ACTION: HM

There was discussion of the factors which could confound survey results or render them insignificant such as staffing differences throughout the week and proportion of responders not answering a question. It was agreed that within the next six months the group would define what the term "technical lead" refers to in terms of the survey, in order to ensure accurate answering of questions using this term.

ACTION: RR, ALL

The group were unanimous that having 51 questions in 2017 rather than the higher number of 90 questions as in 2015 had made the survey easier to complete. It was suggested that for future surveys, some key questions or topics could be selected from the current list and in-depth questions asked to bring insight in these areas. It was also mentioned that it may be useful to add a question on the topic of capacity planning.

HM concluded that the main outcomes of the 2017 survey highlighted issues and changes in the areas of staffing and finance, including addressing vacancies, increased use of locum staff, retirement and workload. She requested that any further feedback or comments on the survey be sent to herself and RR by the end of next week using the circulated electronic document.

ACTION: ALL

4. Actions and plans 2017-18 to address survey findings

RCPATH Council report

The UKTLC group members affiliated with SHOT and RR agreed to work with MR to summarise the key points from the 2017 survey report into a shorter document for her to take to the RCPATH council on which she sits. MR indicated that the UKTLC survey could be raised as an agenda item at the next RCPATH council meeting on the 29th of June, or at a subsequent meeting.

ACTION HM, PBM, AW, MR, RR

Communication and networking

DA highlighted that laboratory staff may be using UKTLC standards as a way to confirm their deficiencies and limitations rather than as a tool to quantify and analyse their deficient areas in order to address problems effectively. It was commented that the standards could help with the development of capacity plans, which inspectors would be looking to see. The group agreed that going forward in 2017 communication and networking throughout the UK should be encouraged to discuss the shortfalls highlighted by the 2017 UKTLC survey.

The collaborative discussed the positive implications of the survey, including the indication that there is an increase in automated processing and improved IT. It was recognised that the report of the survey would go to upcoming meetings for SHOT. PBM agreed to provide feedback to the group after taking the report to the NBTC executive meeting in June.

5. IT/LIMS issues

MR discussed her recent IT data analysis, research into categories of errors and in particular the variation in efficiency of the many LIMS systems across the UK. She proposed the idea that it would be beneficial to move towards implementing an industry standard compliance for LIMS systems. She suggested that this would greatly improve errors with the flag and clinical communication systems, as well as standardize the software from one laboratory to another.

Members of the group were supportive of this idea and discussed possible first steps and individuals to involve. MR agreed to set up a group to initially discuss which aspects of various LIMS systems were effective and to agree on common requirements from software providers. She indicated that this could occur in late 2017 or early 2018, and that future steps could involve hosting an event for software providers.

ACTION: MR

6. Feedback: Scotland/ Wales/ Northern Ireland/ Private sector/ BT committees

Scotland

MM reported that the Scottish Government had asked the Scottish National Blood Transfusion Service (SNBTS) to undertake a large sustainability exercise. Questions from the 2015 UKTLC survey were used to discern whether laboratory managers were concerned about maintaining MHRA/UKAS standards and an adequate staffing skill levels now and in five years. Surprisingly, it was found that more central, as well as remote and rural laboratories did have such concerns due to factors such as experienced staff retiring and increased workloads.

MM explained that the relatively low activity in Transfusion laboratories leads to multi-disciplinary staff having less experience in transfusion and lacking the qualifications advised by UKTLC standards. She informed that some remote and rural laboratories had reported severe understaffing at crisis level due to staff sickness and failure to recruit to posts.

Wales

LW explained that 19 laboratories are supplied in the smaller, Welsh region. She shared that there was an effective system in place whereby HCPC registered university graduates are recruited at band 5, but it was recognised that there is less availability of staff at higher bands. LW indicated that it would be beneficial to recruit at band 5 from a larger pool of candidates across the country.

TLMs

DA discussed that in the certain regions there is pressure to train employees because recruiting at band 6 and above has proved difficult. Sometimes band 5 individuals were allocated to band 6 posts, to be converted once they had completed their IBMS specialist portfolio.

7. MHRA update, inspection findings, other issues.

CR explained that approximately 350 more human error reports had been received in 2017 than in 2016, and often it was inconclusive whether these were accurate evidence of staffing and workload pressures or incidents that could be excluded as one-off events. However, it was thought that a significant number of reports were due to workload being higher than expected and staffing being lower than expected. It is expected that the number of reports will continue to increase.

CR reported that 60 MHRA inspections had been completed in 2016 however this had been reduced to 16 inspections in 2017. Only one 2017 inspection had an outcome of "critical", which had been

due to senior management deviations and poor document control. Improvements were being made to address these deficiencies.

RR raised whether significant changes could be made to the Blood Compliance report to better identify sites with problems. CR agreed to act as a communicator between the group and the MHRA on this matter. RR agreed to circulate ideas for review of the Blood Compliance report to the group for input in the coming weeks.

ACTION: RR

8. UKAS update, Inspections, other issues

CS explained that a current issue of interest within UKAS involves difficulties with laboratories establishing clinical competencies and demonstrating this with evidence. She informed that a paper was being written to provide some guidance on the evidence a laboratory is responsible to collate. She explained it is thought the problems in providing this evidence may be due to a communication barrier between clinical teams.

CS also noted that UKAS now requires objective evidence such as case studies as demonstration of competency, as opposed to a previous system where often tick sheets and signatures were accepted. She reported that UKAS were meeting their targets and have only seen improvement to laboratories following inspections and follow-up work.

RR enquired as to whether there was any further planning with regards to the possibility of closer working between UKAS and the MHRA. CS explained that there was currently nothing further to report on this item but that this possibility had neither been accepted nor rejected.

9. UK NEQAS – update

CWh reported that following three of the last four distributions of UK NEQAS, discussion had centred on failure in the process of exclusion and positive ID of antibody identifications. She explained that this could be due to a decrease of specialist knowledge transfer within laboratories. She informed that exercise E6 would be produced in June 2017 and would be sent out with questions that were removed from the UKTLC survey.

CW discussed that herself and a colleague were in the process of writing presentations to address the topics of: current practice with enzyme screening cells and panels; the relative number of errors associated with antibody identification and component selection from benchmarking data from TACT (Training Assessment and Competency Tool).

MM informed that the Trust at which she is employed is eager to introduce the use of second panels and queried as to the financial implications of this. CWh agreed to provide information regarding this.

10. SHOT – update

PBM explained that the current SHOT report is in development at the design stage and contains many fascinating cases. She informed that the report would be published at the SHOT symposium in Harpenden on 12th July, and should be accessible electronically. Regarding the symposium, 31 abstracts had been submitted for external review, as well as 13 applications for the 2 “best practice” slots. Talks being arranged include one on patient safety by Dr Phil Hammond, a talk from a donor, and a debate on the topic of responsibility for group O negative units.

PBM reported further news that all hospitals complete reporting through one portal as of 25th March. She reported that Dafydd Thomas would be Stepping down as Chair and Mark Bellamy from Leeds would be stepping up to this position. It was discussed that there had been a lot of national and international interest in SHOT, which is being represented at meetings and events within the UK as well as countries such as South Korea. Group members discussed work being done to improve categorisation of TACO, TAD and TRALI cases, and on methods of addressing ABO cases of manslaughter.

HM requested that collaborative members contact her with any matters from a laboratory perspective that should be raised at the SHOT symposium.

ACTION: ALL

11. IBMS/ BBTS update – Training/ Education

RR indicated she would contact CW regarding apprenticeships under this item.

ACTION: RR/CW

12. AOB

Nothing was raised under this item.

13. Dates for next meeting

CW would circulate potential dates for the next meeting of the group.

ACTION: CW