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For Action

1.1 Removal of Date and Signature on Radsure Labels on Irradiated Blood Components

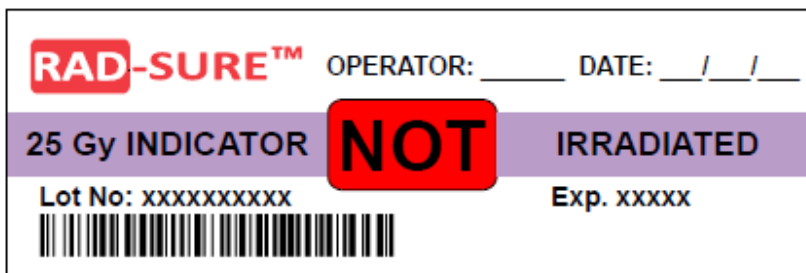
We currently provide all irradiated cellular components with a Radsure label attached to demonstrate that the product is irradiated. The operator dates and initials the label to confirm that the irradiation process has been completed and the reactive window on the label has converted.

From 1st June 2015, we intend to introduce a new internal checking process that will require the operator to confirm the label presence and change on the central IT system before the unit can be issued. At this time we will remove the date and initial boxes and no longer provide this manual confirmation. The label will show that the unit has been irradiated by its colour.

It is essential that staff who deal with blood components up to and including at the bedside are aware of these changes. We intend to minimise the crossover period but there will be a short time where both types of label will be seen.

The two label types are as follows:-

a) Pre 1st June 2015



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b) Post 1st June 2015



Graham Walters, National Hospital Services Manager

1.2 Production of Pooled Platelets in Platelet Additive Solution using the TACSI automated device

In the December issue, hospitals were informed about the introduction of pooled platelets in platelet additive solution (PAS) and plasma planned for January / February 2015. Alongside this, Filton have been looking at the automation of the pooling procedure and conducted a successful Phase 1 validation in December.

In the week commencing Monday 20th April 2015, we will begin Phase 2 of this validation, and will use the TACSI for all of Filton's production of pooled platelets in PAS and plasma, for a period of four weeks.

There is no difference in the component label to that of those produced manually i.e. "Platelets in Additive Solution and Plasma". The product barcodes were issued in July 2013; please ensure that you have updated your systems. The barcodes can be found in the following link under the heading 'Blood & Blood Components': <http://hospital.blood.co.uk/products/> & will be added to the Component Portfolio at the next revision (Feb/March).

This component does not replace the current product: 'platelets suspended in additive solution', whereby 'all' plasma is replaced with additive solution. Apheresis platelets will remain suspended in plasma.

A separate sheet is available on the hospital website with a picture of the pack and more detailed information:

Luba Kosmirak, Lead Processing Specialist

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1.3 SHOT Working Expert Group Vacancies

Invitation for expressions of interest
Serious Hazards of Transfusion: The Working Expert Group

The expert group has vacancies in three areas due to retirement and invites suitable candidates to apply to join. This is a voluntary role with no remuneration.

The subject areas are:

- 1) Transfusion-associated circulatory overload/transfusion-associated dyspnoea
- 2) Anti-D immunoglobulin incidents
- 3) A representative from the devolved countries (N Ireland or Scotland) with clinical transfusion management and leadership experience.

The activities and responsibilities of the WEG are described below.

Applicants should state in which subject they have expertise, provide a CV to demonstrate that, details of two referees. Please note the time and travel requirements for this activity in the following information. Please contact the SHOT office for further information 0161 423 4208.

Applications should be sent electronically to the Medical Director, Dr. Paula Bolton-Maggs at paula.bolton-maggs@nhsbt.nhs.uk by February 28, 2015.

For further information please follow link below:-

<http://www.shotuk.org/wp-content/uploads/SHOT-Working-Expert-Group-vacancies.pdf>

Alison Watt, SHOT Operations Manager

For Information

2.1 Red Cells in Plastic Overwrap Bags

As part of our continuous improvement programme we will be standardising the packaging of red cells issued to users. We currently have two processes in place whereby some NHSBT manufacturing sites present the red cells that are ready for issue in plastic over wrap bags whilst others do not.

To standardise our process and presentation of Red Cell components we will issue all red cells without an over wrap bag from the middle of April 2015. The whole consignment will continue to be wrapped in a single, tagged bag. This change will enable us to streamline the pre issue processes to provide uniformity and efficiency within the supply chain.

This change will also enable future technological advancements to be introduced in the supply chain that require standardised packaging methods.

Graham Walters, National Hospital Services Manager

2.2 Provision of components for IgA deficient patients who have experienced previous reactions

Patients who are IgA deficient and who have no history of transfusion reactions (or who have never been transfused) can receive standard red cells.

There are a small number of patients nationwide who are IgA deficient and have a history of severe reactions. Historically, an effort was made to find rare IgA deficient components for these patients, but this could result in delayed or under-transfusion, or delay/cancellation of clinically important procedures. There is increasing evidence that washed components can be substituted.

- *In life-threatening situations*, e.g. major haemorrhage, standard components should be used and the patient closely monitored throughout the transfusion.
- *In less urgent situations, or for elective transfusions*, washed red cells, and/or platelets suspended in additive solution should be used. These should be requested via Hospital Services. IgA deficient FFP is available and should also be requested via Hospital Services. These are all non-standard components and require approval by an NHSBT consultant.

Hazel Tinegate, Patients' Clinical Team Consultant

2.3 Patients give Top Score to Therapeutic Apheresis Services

In November 2014 Therapeutic Apheresis Services conducted their annual survey to measure patient satisfaction. The survey was carried out across all six of the units located in Bristol, Oxford, Manchester, Liverpool, Sheffield and Leeds.

NHSBT has a long history of providing life-saving and life-enhancing therapeutic apheresis services within the NHS, and provides access to a portfolio of therapies across a range of clinical specialties using technology that exchanges, removes or collects certain components within the blood. The main therapeutic apheresis procedures offered by TAS are:

- Extracorporeal Photopheresis (ECP)
- Plasma/Red Cell Exchange
- Peripheral Blood Stem Cell Collection

In 2012, TAS conducted its first baseline survey to measure patient experience and achieved a 'top box' score of 95% i.e. 95% of patients surveyed rated their experience as 9 or 10 out of 10. Subsequent surveys carried out in Spring and Autumn 2013 returned top box scores of 100% and 97% respectively.

We are delighted that the 'top box' score for the Autumn 2014 survey was a very positive 100%.

The next patient experience survey will be conducted in November 2015.

The full report is available to view on our dedicated hospital facing web pages:

<http://hospital.blood.co.uk/patient-services/therapeutic-apheresis-services/patient-and-user-feedback/>

Hannah Scrimshaw, Administration Manager - Therapeutic Apheresis Services

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Blood and Transplant

2.4 SHOT Updated Questionnaire Datasets are now available

The SHOT questionnaires were updated in January 2015, and pdf versions of these revised datasets are now available to download from the SHOT online reporting system (Dendrite). These datasets can be used for reference when gathering information for SHOT reporting.

To access these, registered SHOT reporters should log into the SHOT online reporting system and click on the 'Documents' button. (This is the third button in the middle of the 'Main menu' page). Select the dataset required and click 'download'. They can also be printed at this point if a paper copy is required.

If you require any assistance, please contact the SHOT office 0161 423 4208 or e-mail shot@nhsbt.nhs.uk.

Alison Watt, SHOT Operations Manager

For Training

3.1 MSc in Transfusion and Transplantation based at NHSBT Filton

This University of Bristol MSc course is designed for NHS staff training to Master's level and is suitable for those working towards Clinical Scientist Registration.

Students have access to modern training facilities and national expert lecturers.

The course is IBMS accredited and is ideal for career progression for biomedical scientists already working in Hospital transfusion/haematology posts.

Train your staff on this internationally recognised course.

<http://hospital.blood.co.uk/training/programme-details/>

Dr Tricia Denning-Kendall, Teaching Associate and MSc Course Director

3.2 Training & Education Events and Courses

A full list of NHSBT training events, which are open to hospital personnel, is available on the our website at <http://hospital.blood.co.uk/training/index.asp>

If you have any queries regarding the above, please do not hesitate to contact your local Customer Service Manager, Patient Blood Management Practitioner or either of us using the details below.

For further information please visit the NHS Blood and Transplant hospitals website on:

<http://hospital.blood.co.uk/>

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