

POCT COMMITTEE MEETING

15th September 2021 2pm (Teams Meeting)

Present

Name	Title	Initials
Joanne Hodson (Chair)	Consultant Neonatal Nurse	JH
Nicola Hodges	POCT Co-ordinator	NH
Rob Mackenzie	Consultant Respiratory Physician	RM
Tracey Hope (Notetaker)	NICU Data Clerk	TH

		Action
1.	Apologies	
	Leon Massey, Fran Mills, Julia Vasant, Kyle Day, Vicky Smith, Sarah Meisner	
2.	Actions from previous meeting	
	 Urinalysis – 1 connected to PoCcelerator middleware – problems to still iron out. Ketone meters – patient ID's, trying to share audits but not working. Stopped this year's audit as of no use & & some meters not used on wards or misused. Evidence shows no improvement 	NH
	 Datix – 21 areas & time consuming. Risk register – target areas & email managers cc. in Bernie Marden & Toni Lynch Also see attached action list tracker – to be reviewed at each meeting. 	JH
3.	Operational performance	
	Because of so few attendees the meeting was not quorate, so this is by way of an update only, therefore ongoing decisions will be delayed.	
	 Gas analysers – being monitored via Datix. Covid testing - 8 new analysers, can be used for ID testing & maternity. Acute stroke unit also requested analysers. NH - support staff leaving, no replacement so back to needing ad-hoc help – to raise need for support with Medical Director 	JH
4.	Developments & organisational change	
	 DNA Nudges – all returned, consensus not to continue using. ID Now – 6 in 4 areas. 8 more to come need to be connected to middleware & Millenium. 	NH

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	 Urinalysis meters and Software – 1 connected today. DDIM – now closed to further actions. TEG manager – delayed to 1st October for removing generic log in. Users entered as barcodes. Ketone meter requests – requests from Diabetes team – all working well. New Hemocue Meters – n/a RAU (ACE ward) blood gas analyser – in SAU now & working well. Unipoc software upgrade – in place, some niggles. MES tender – not complete yet & not including POCT. Hopefully tender in place by end of year & look at beginning of 2022 for procurement of new POCT equipment. 	
5.	Quality	
	 ED dirty analyser – much improved Datix – mostly around EQA Hemocue – fit for purpose, minimal engagement with Theatres has improved. Unsure if quality control being run & performing properly as a lot of EQA failures. Misused & poor quality samples, results unreliable. Training needs to be in place. EQA – respiratory ward – difficult to engage in training & sample prep & storage problematic but analyser working ok. Ongoing issues in NICU as glucose reading failing & MSS contaminations - Roche suggest running quality control. New Matron in Paeds introduced new teaching regime – will wait to next audit to embed & put on risk register if no change. Complaints and compliments -none received. Improvement/change projects – no progress at present. 	
6.	Training	
	Competency and training compliance	
	 E-learning videos – NH currently unable to produce due to lack of support staff. Involve use of ward staff? 	NH
	 Access Control – training system in process for urinalysis meters. 	
	 Gas analysers – BBC & SAU struggling with getting training in place & MAU started but still problematic. 	
7.	AOB	

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POCT engagement ongoing problem due to impact of pandemic & staffing issues & difficult to progress issues, as Board meetings not going ahead either – to email and encourage better attendance.
 GOLD – seeking Matron's from areas where there are ID Now's to go for training.

Date and time of next meeting: to be arranged - January 2022

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