

SW RTC Meeting

26TH MAY 2021

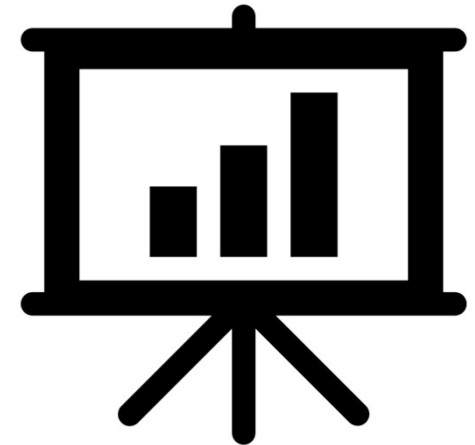
(VIA MICROSOFT TEAMS)

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THE SURVEY - 2019/2020

- Formally known as the database survey
- First attempt to update and improve data collection to keep relevant and useful.
- Attempting to change the way the data is used and formatted, and made more accessible
- This year we had 15/ 17 NHS trusts respond and 1 private hospital - 88%.



PBM BENCHMARKING SUMMARY

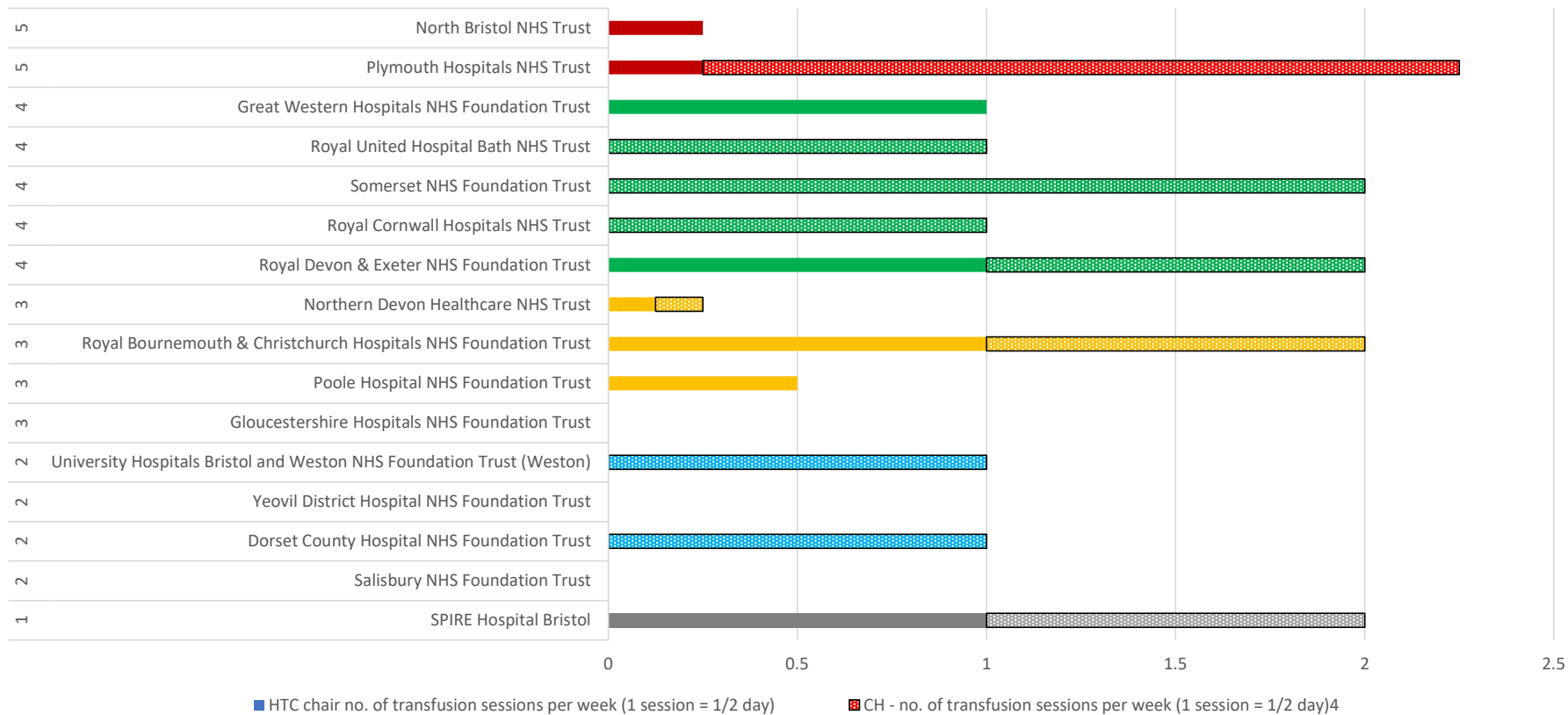
Patient Blood Management Benchmarking Summary-2020					NHS				
BSMS category - High					South West Regional Transfusion Committee				
									
	Great Western Hospital	Royal United Hospital	Royal Devon and Exeter	Royal Cornwall Hospital	Somerset NHS FT				
Q.S 1 – Pre-operative Iron supplementation	✓	✓	✓	✓	✓				
Q.S 2 – TXA for Adults - predicted moderate blood loss	✓	✓	✓	✓	✗				
Q.S 3 – Hb reassessment between transfusions	✓	✓	✓	✓	✓				
Q.S 4 – Provision of patient information for consent	✓	✓	✓	✓	✓				
Electronic tracking	LAB, COLLECTION, TRACKING, ADMIN	LAB, COLLECTION, TRACKING, ADMIN	LAB, COLLECTION, TRACKING, ADMIN	LAB, COLLECTION, TRACKING	LAB				
Single Unit Transfusion -Policy	✗	✓	✓	✓	✓				
-Compliance	✗	?	60 %	?	?				
Cell Salvage – Working Hours	✓	✓	✓	✓	✓				
Out of Hours	✗	✓	✓	✓	✓				
TEG/ ROTEM	✗	✓	✓	✓	✗				
O + Policy	✗	MEN	✗	✗	MEN				
Transfusion Triggers	✓	✓	✓	✓	✓				

Trust Information



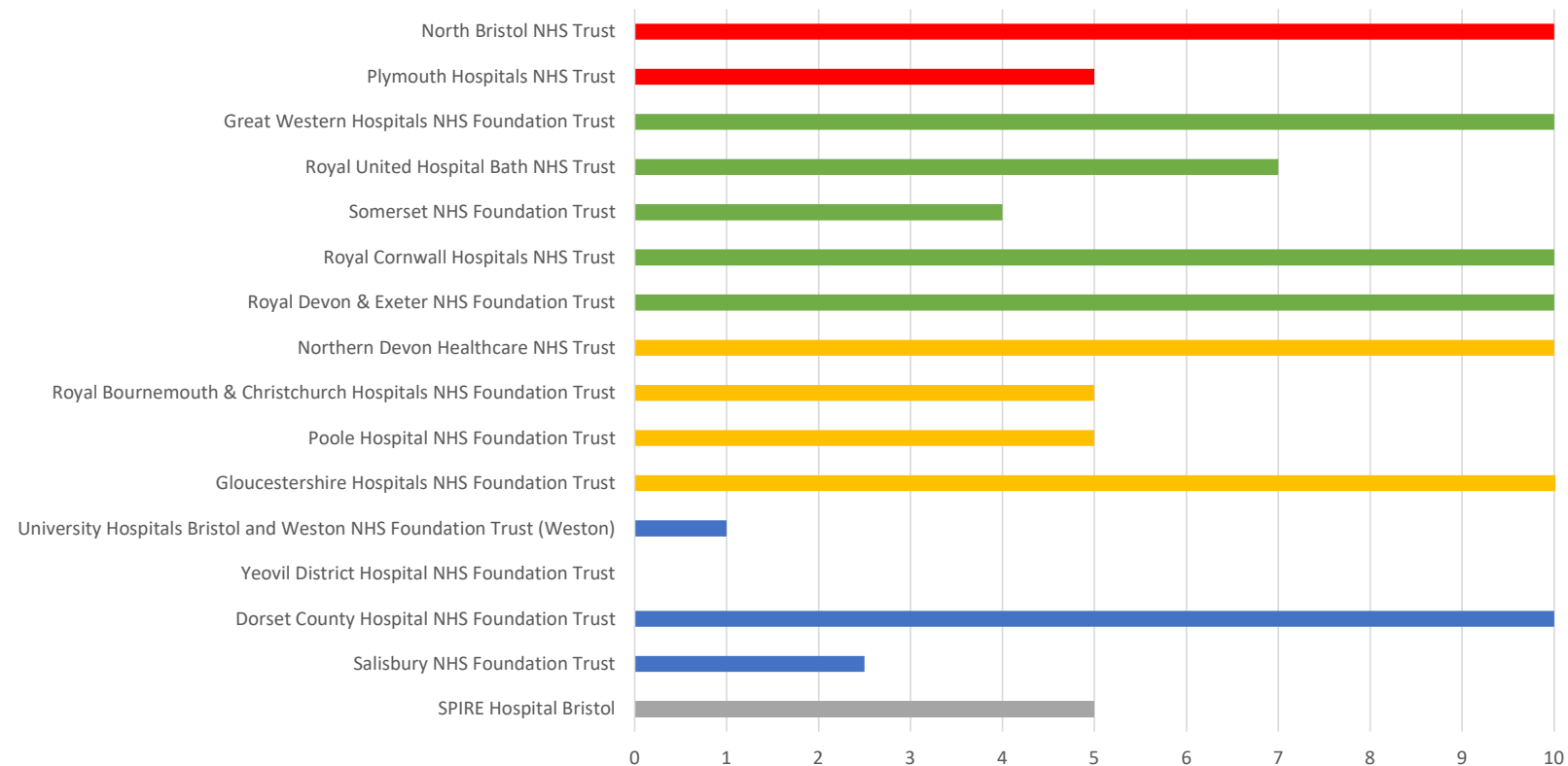
Clinician sessions dedicate to transfusion

Combined Chair/CH sessions in transfusion (session = 1/2 day)



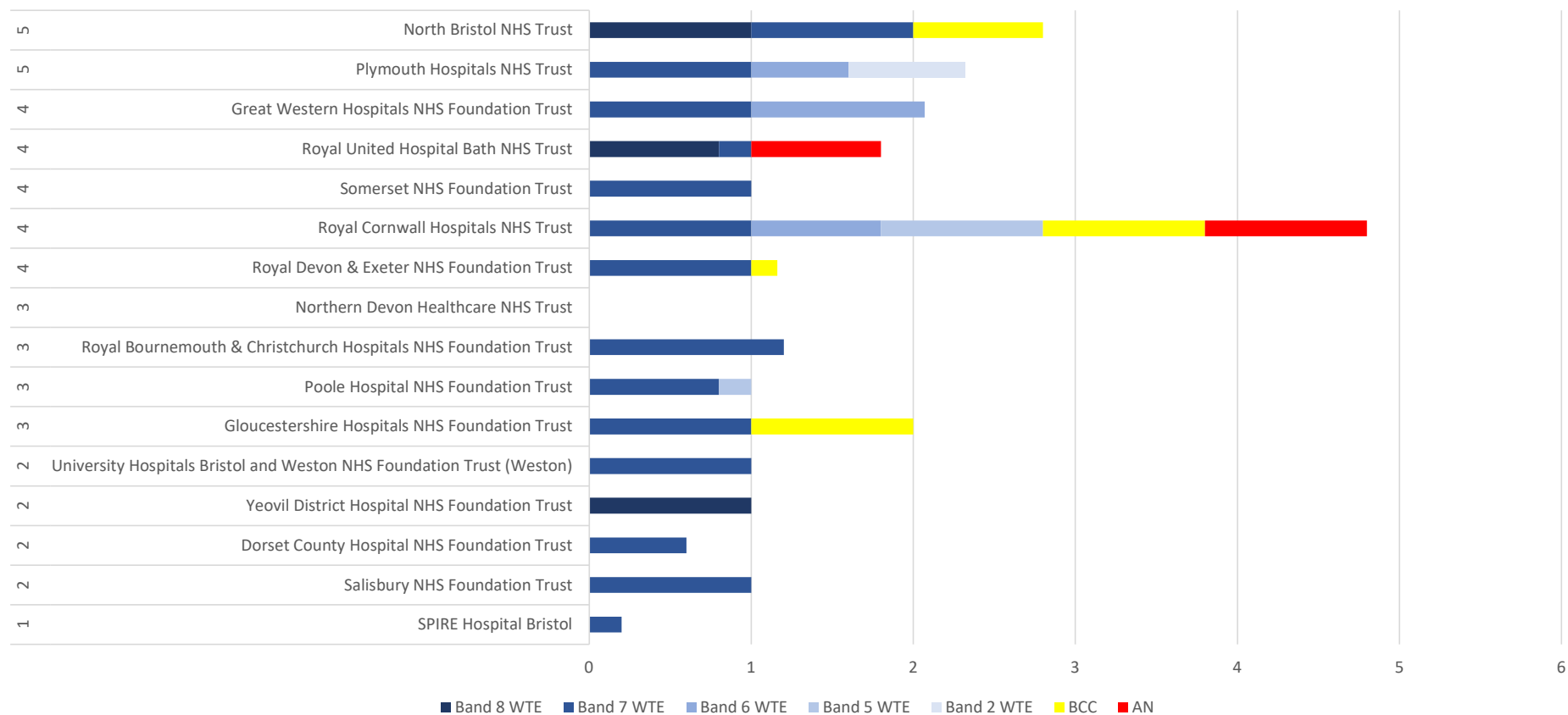
TLM transfusion sessions

TLM no. of transfusion sessions per week (1 session = 1/2 day)

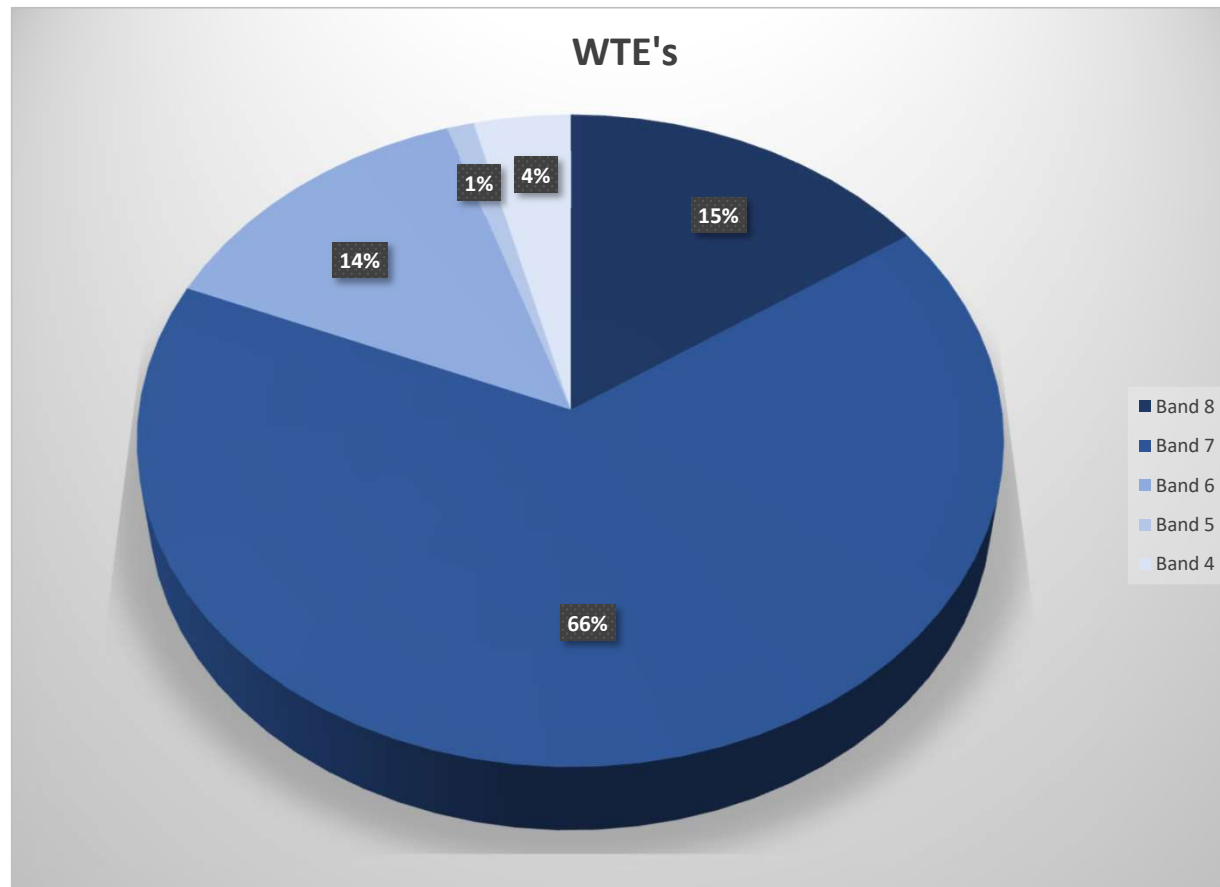


TP, CS, and Anaemia staff provision

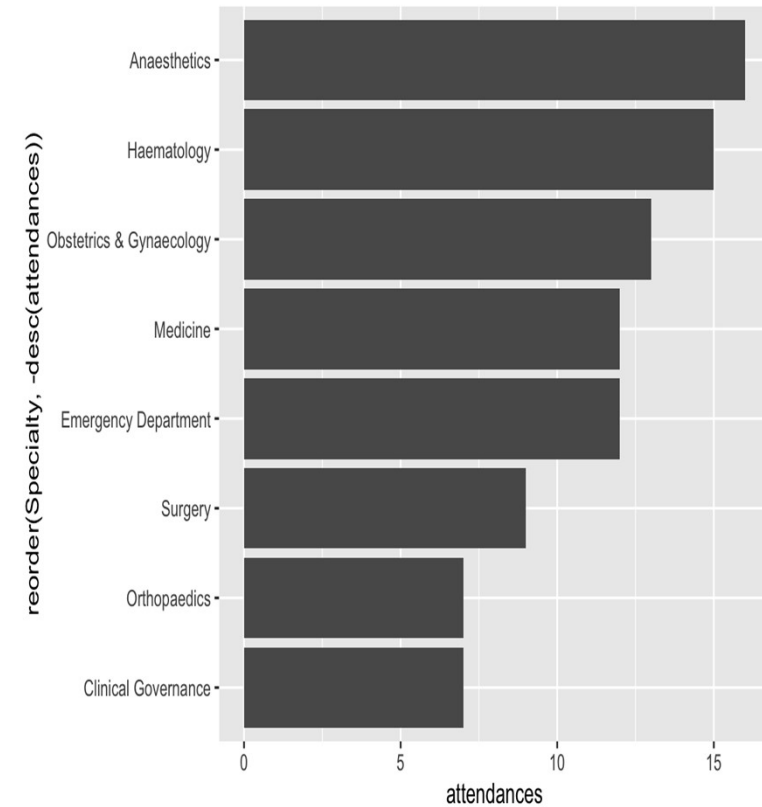
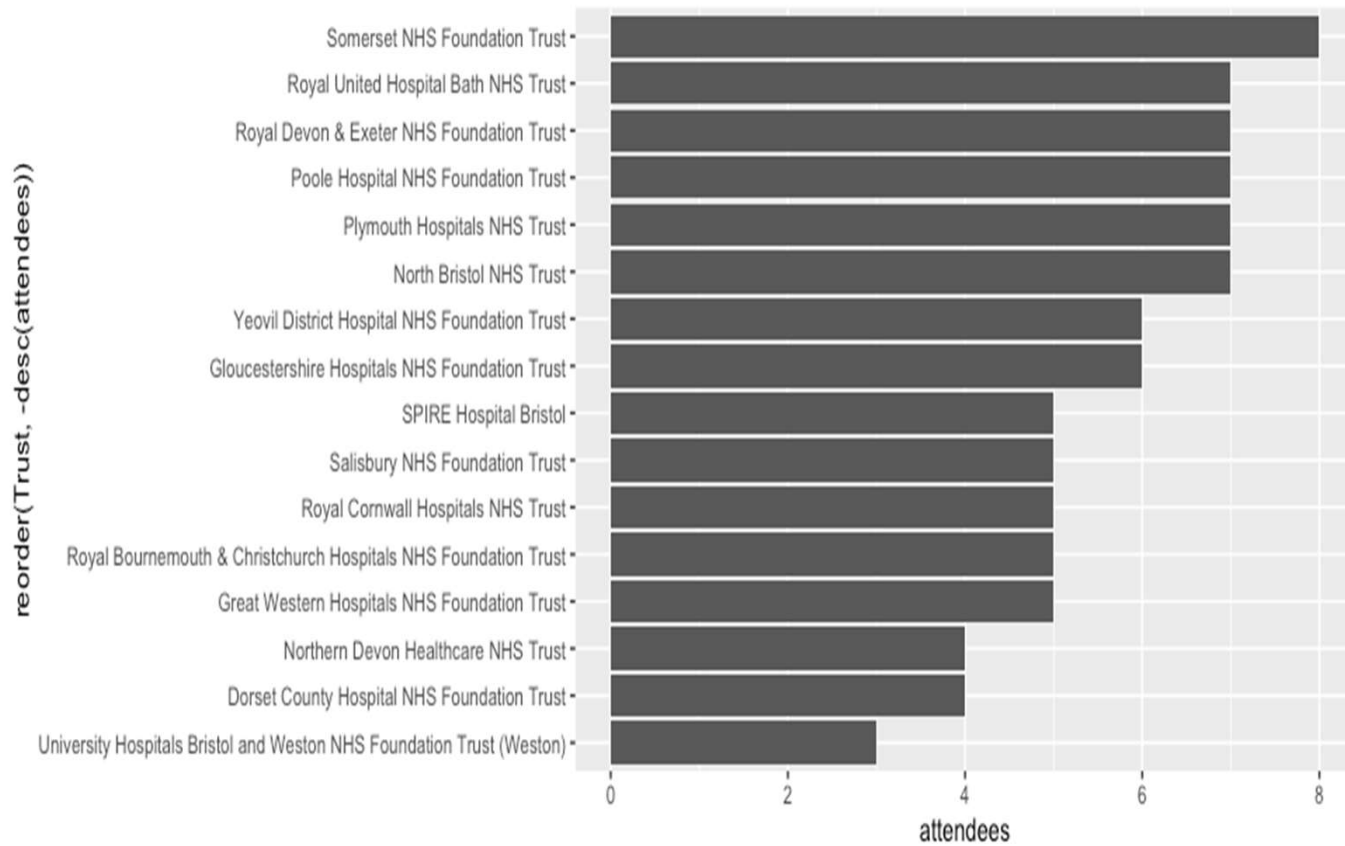
TP WTE by banding



TP WTE's be banding for region



HTC Attendance



Transfusion training - Induction

Trust	Consultant /SAS	RN	HCA	Phlebotomy	TN/ODP	Porter	Trainee
North Bristol	>75%	>75%	Not done	Not done	>75%	Not done	>75%
UHP	50-75%	>75%	>75%	>75%	>75%	>75%	50-75%
Great Western	<50%	>75%	>75%	>75%	>75%	Not done	>75%
Bath	>75%	>75%	>75%	>75%	>75%	>75%	>75%
RD+E	>75%	Not done	Not done	Not done	Not done	Not done	>75%
RCHT	>75%	>75%	>75%	>75%	>75%	>75%	>75%
Somerset	Not done	<50%	<50%	<50%	<50%	>75%	>75%
Gloucester	>75%	>75%	>75%	>75%	>75%	>75%	>75%
North Devon	Not done	>75%	>75%	Not done	>75%	<50%	>75%
Poole	>75%	>75%	>75%	>75%	>75%	Not done	>75%
Bournemouth	>75%	>75%	>75%	>75%	>75%	>75%	>75%
Dorset	Not done	Not done	Not done	Not done	Not done	Not done	Not done
Salisbury	<50%	50-75%	>75%	>75%	<50%	>75%	>75%
UHB	>75%	>75%	>75%	>75%	>75%	Not done	>75%
Yeovil	>75%	>75%	>75%	>75%	>75%	>75%	>75%
SPIRE - Bristol	>75%	>75%	>75%	>75%	>75%	Not done	Not done

Key

>75%	>75%
50-75%	50-75%
<50%	<50%
Not done	Not done

Transfusion training - ongoing

Trust	Consultant /SAS	RN	HCA	Phlebotomy	TN/ODP	Porter	Trainee
North Bristol	>75%	>75%	>75%	>75%	>75%	>75%	>75%
UHP	<50%	>75%	>75%	>75%	>75%	>75%	<50%
Great Western	<50%	>75%	<50%	50-75%	>75%	>75%	<50%
Bath	>75%	>75%	>75%	>75%	>75%	>75%	>75%
RD+E	>75%	>75%	>75%	>75%	>75%	>75%	>75%
RCHT	>75%	>75%	>75%	Not done	>75%	Not done	>75%
Somerset	Not done	<50%	Not done	Not done	Not done	Not done	>75%
Gloucester	>75%	>75%	>75%	>75%	>75%	>75%	>75%
North Devon	Not done	50-75%	50-75%	Not done	50-75%	<50%	Not done
Poole	<50%	>75%	>75%	>75%	>75%	>75%	50-75%
Bournemouth	>75%	>75%	>75%	>75%	>75%	>75%	>75%
Dorset	<50%	<50%	<50%	<50%	<50%	Not done	Not done
Salisbury	<50%	50-75%	50-75%	>75%	50-75%	>75%	50-75%
UHB	50-75%	>75%	>75%	>75%	>75%	Not done	50-75%
Yeovil	<50%	>75%	>75%	>75%	>75%	>75%	<50%
SPIRE - Bristol	>75%	>75%	>75%	>75%	>75%	Not done	Not done

Key



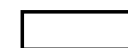
>75%



50-75%

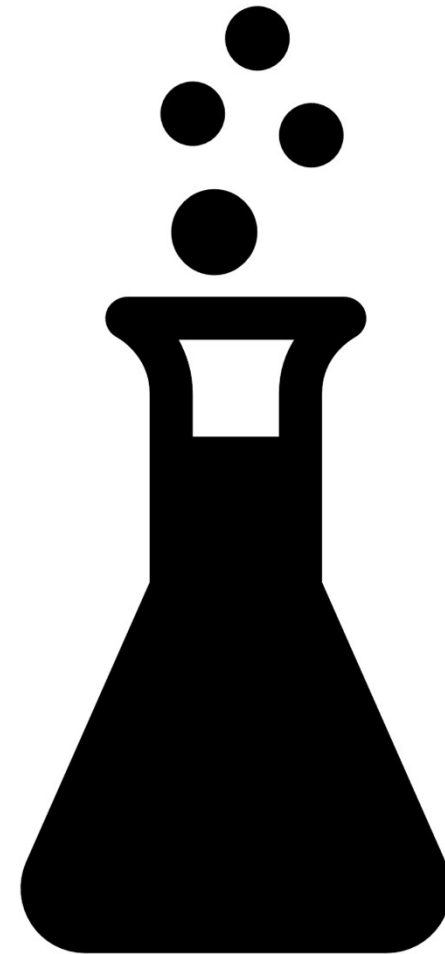


<50%



Not done

Lab Information



Electronic tracking

	Lab	Collection	Tracking	Administration
NBT			√	
Derriford	√	√	√	
GWH	√	√	√	√
RCHT	√	√	√	
RD&E		√	√	√
RUH	√	√	√	√
Somerset	√			
GHNHSFT	√	√	√	
NDDH		√		
Poole	√	√		
Royal B'mouth	√	√	√	√
Dorset	√	√	√	
Salisbury		√	√	
Spire Bristol				
Weston		√	√	
Yeovil				

9

12

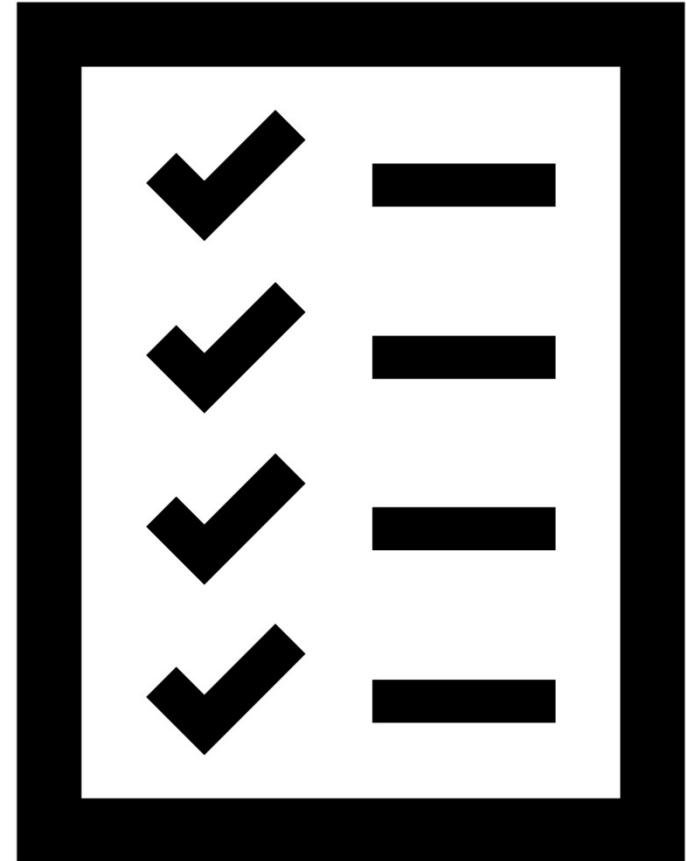
11

4

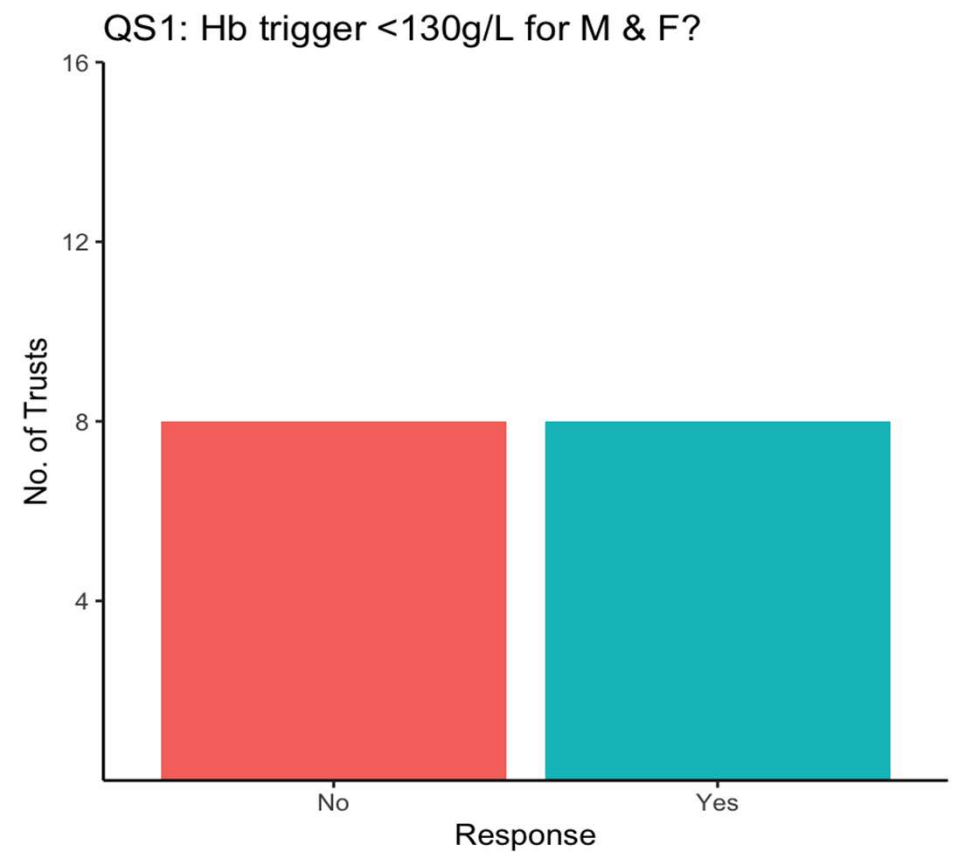
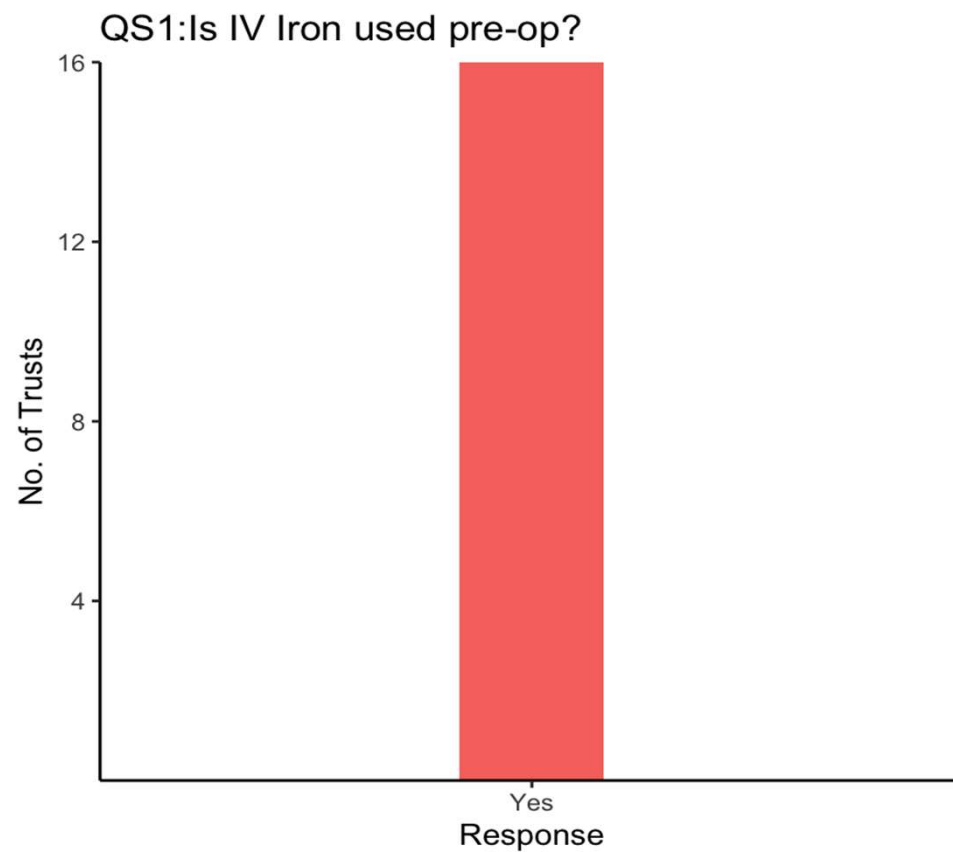
Challenging requests

	2020		2019		2018		2017		2016		2015	
BSMS Group	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Very High	2		1	2	1	2	2	1	1	2		3
High	5		5		3	1	5		5		4	1
Moderate	4		4		4		5		3		4	1
Very Low/Low	3	2	4	1	4	3	6	1	5	1	4	1

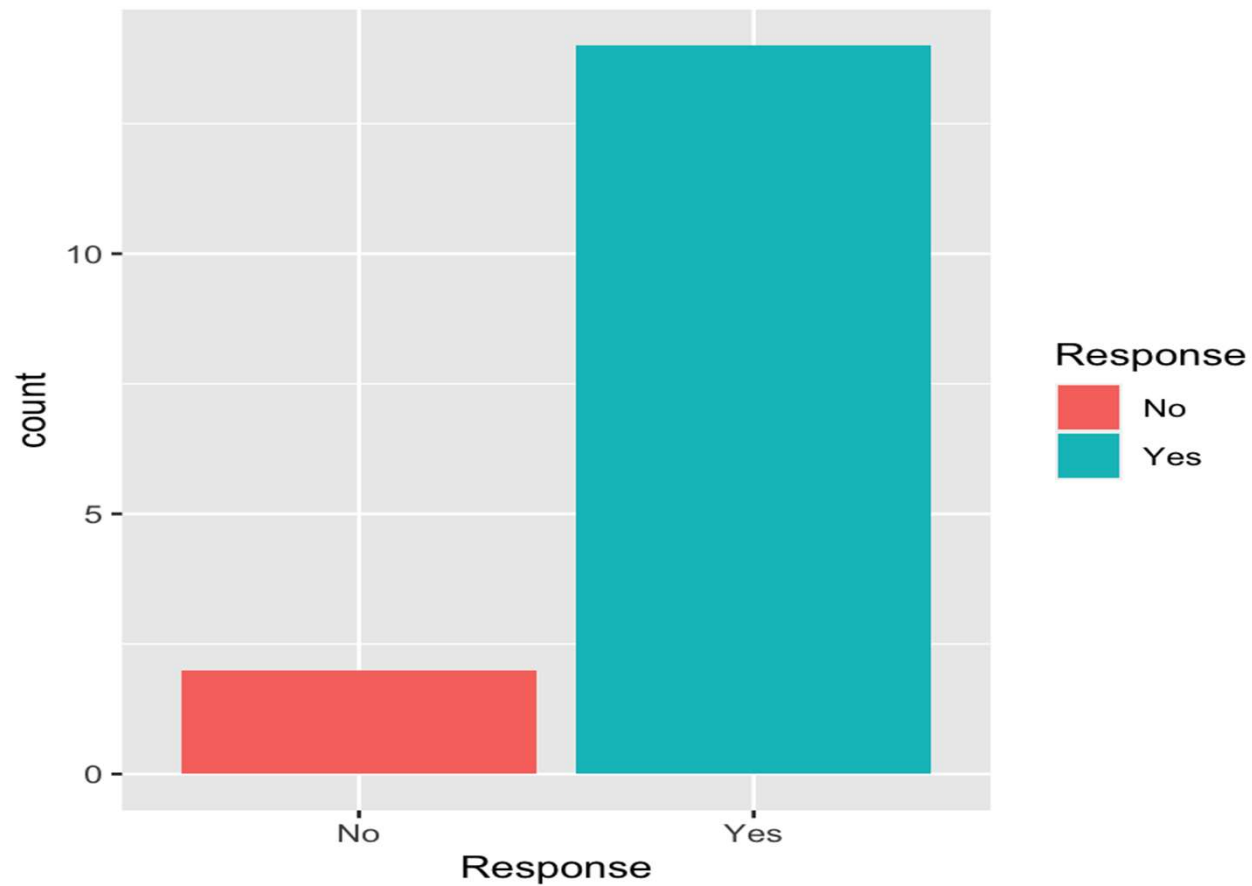
Quality Standards



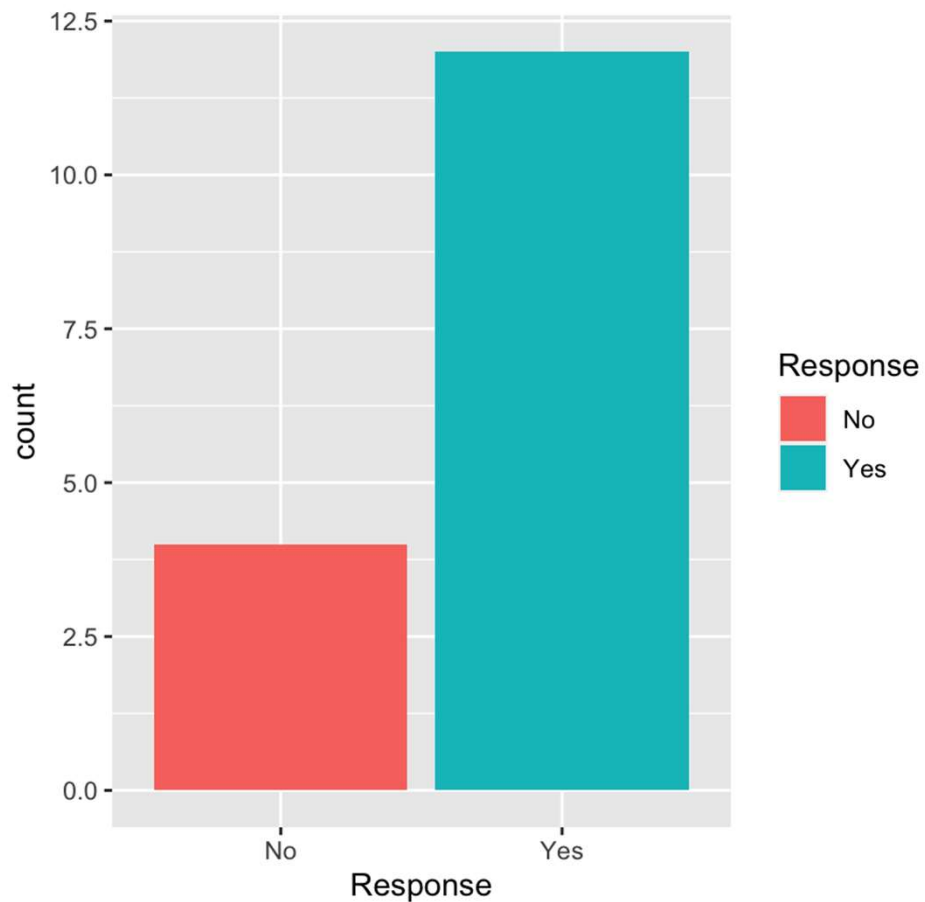
QS 1 Pre-operative Iron supplementation



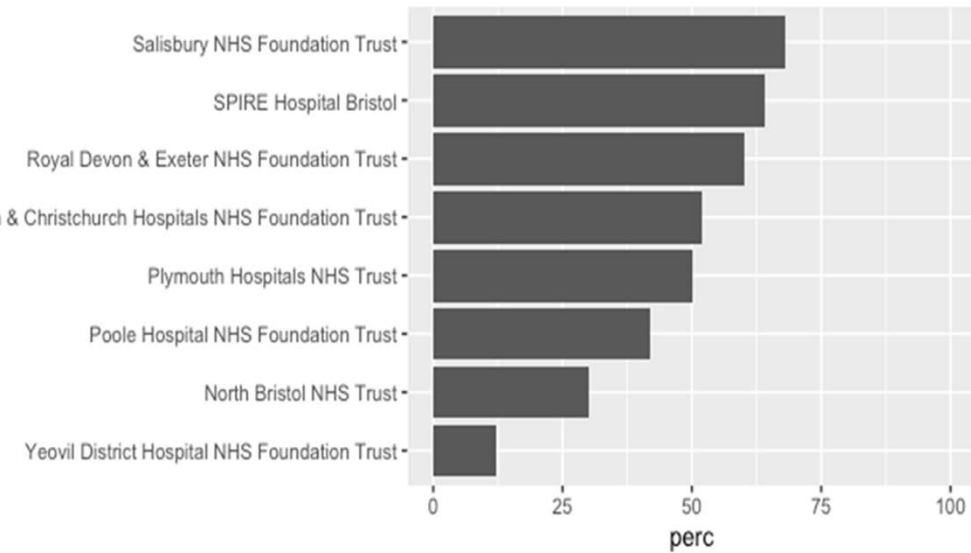
QS -2 Use of TXA where moderate blood loss expected



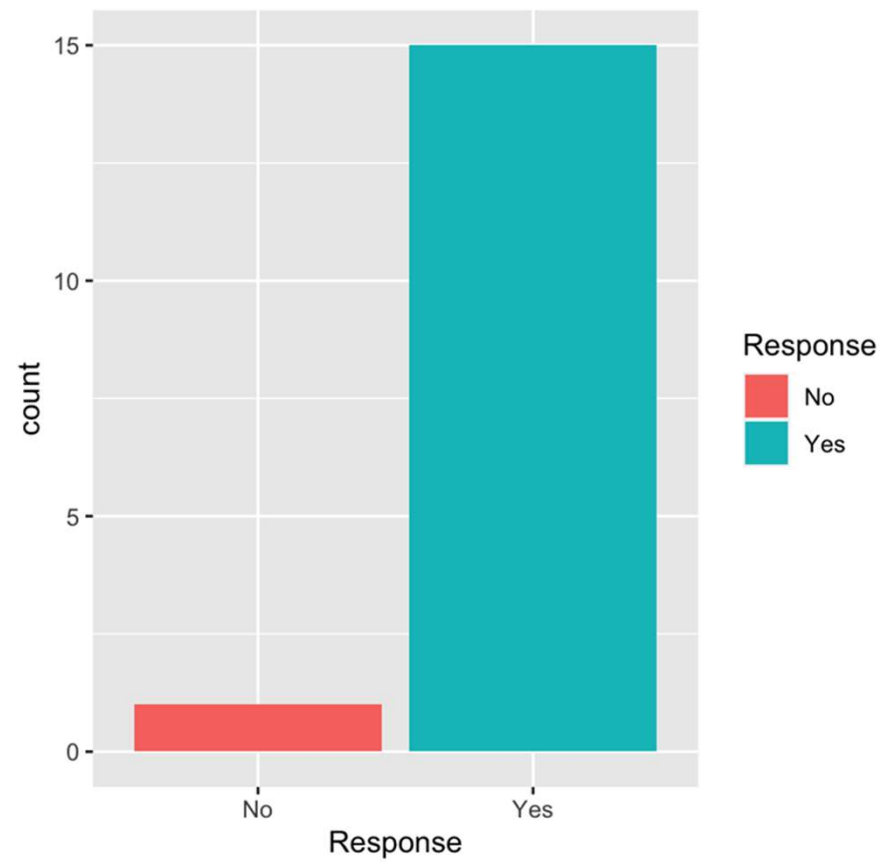
QS 3- Reassessment between transfusions



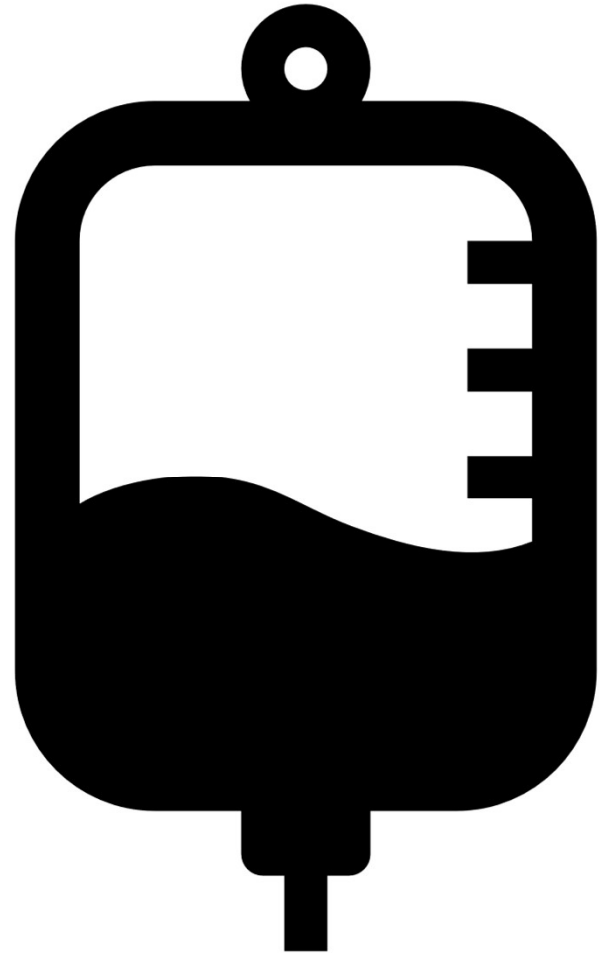
reorder(Trust, -desc(perc))



QS 4 – Written Patient information



Surgical PBM

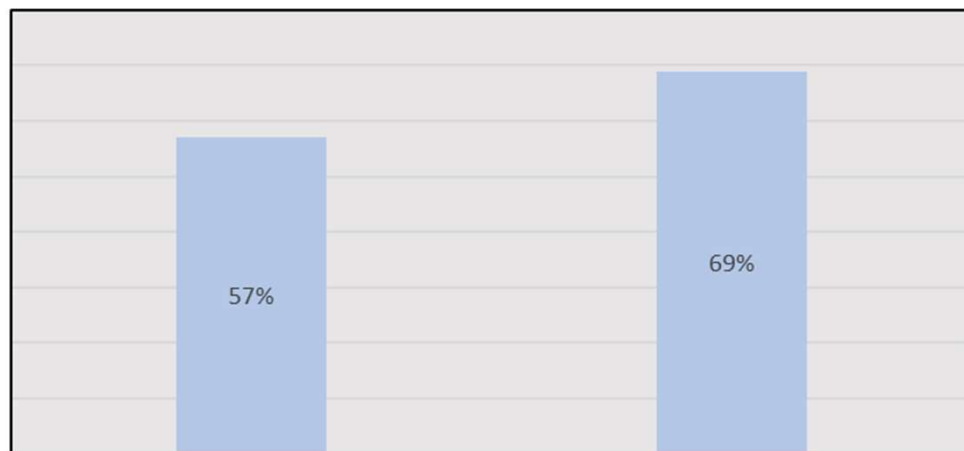


Cell Salvage provision and training



General summary

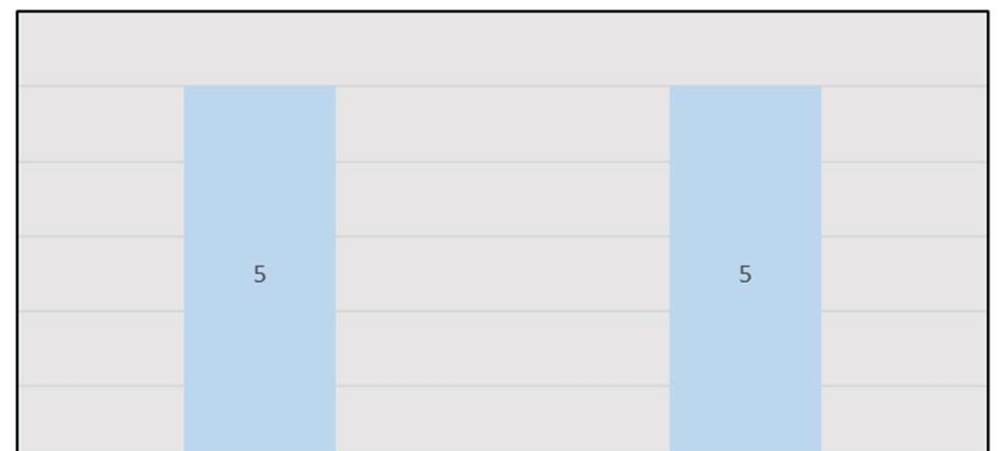
Use Fibrinogen Concentrate/Fibrin Glue



Fibrinogen Concentrate

Fibrin Glue

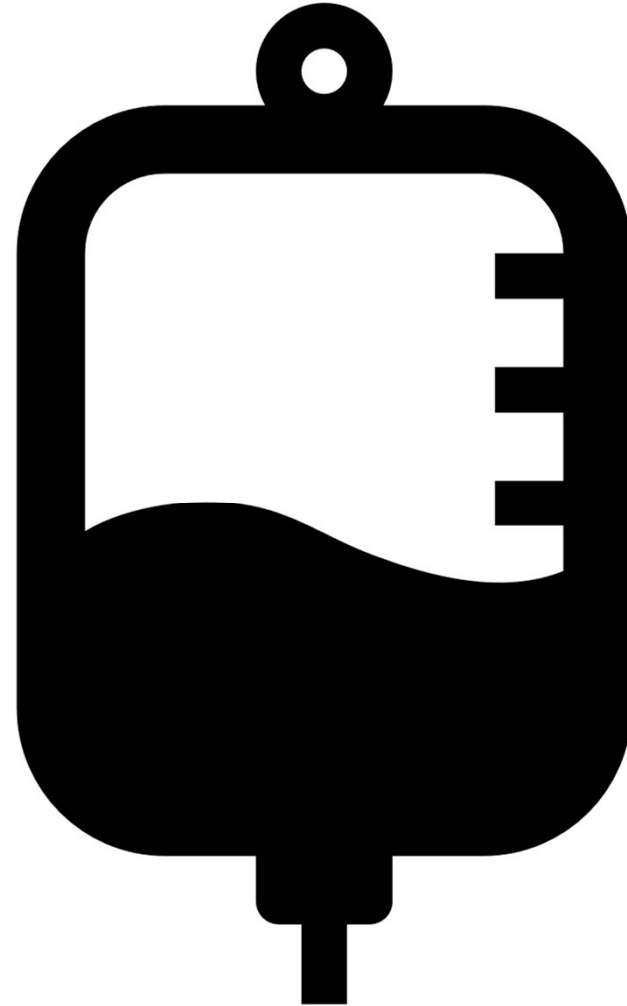
Point of Care Testing



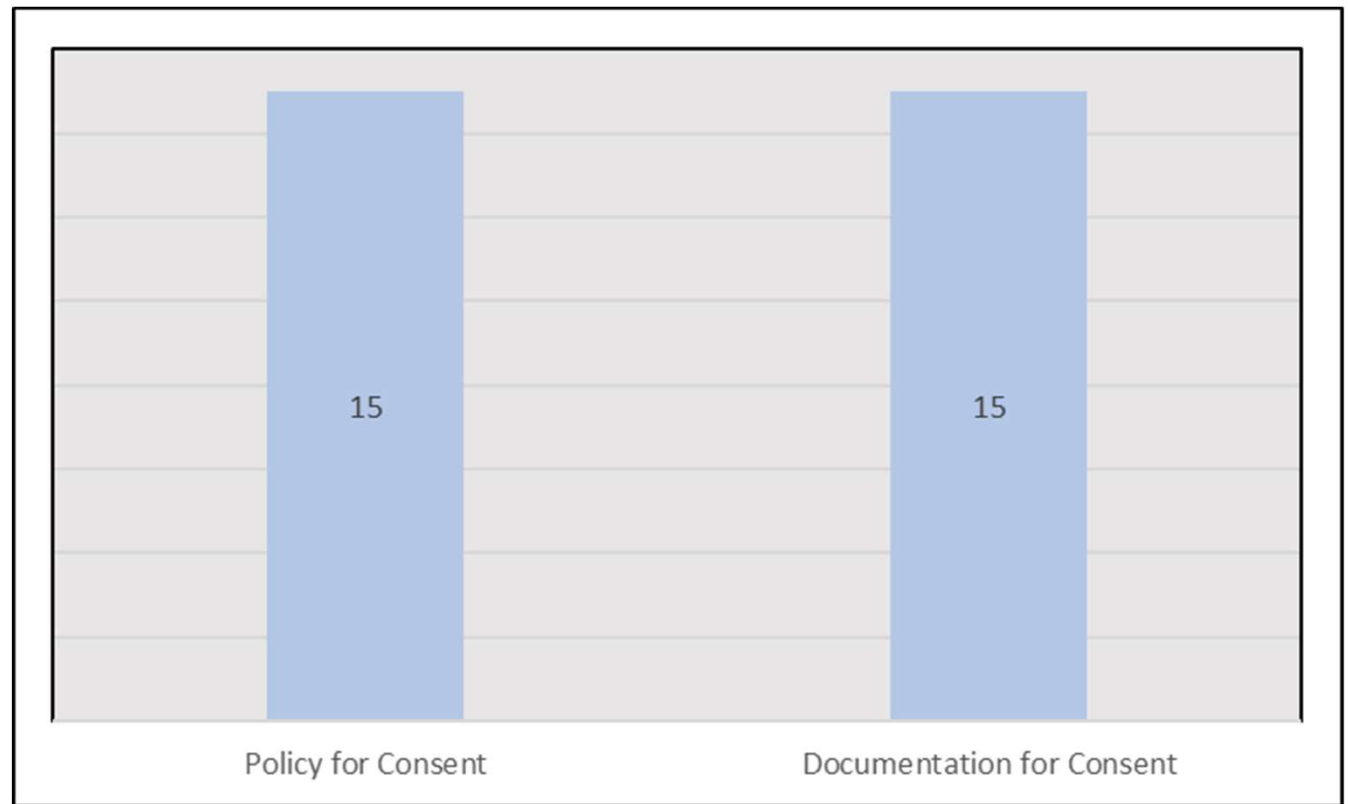
TEG

ROTEM

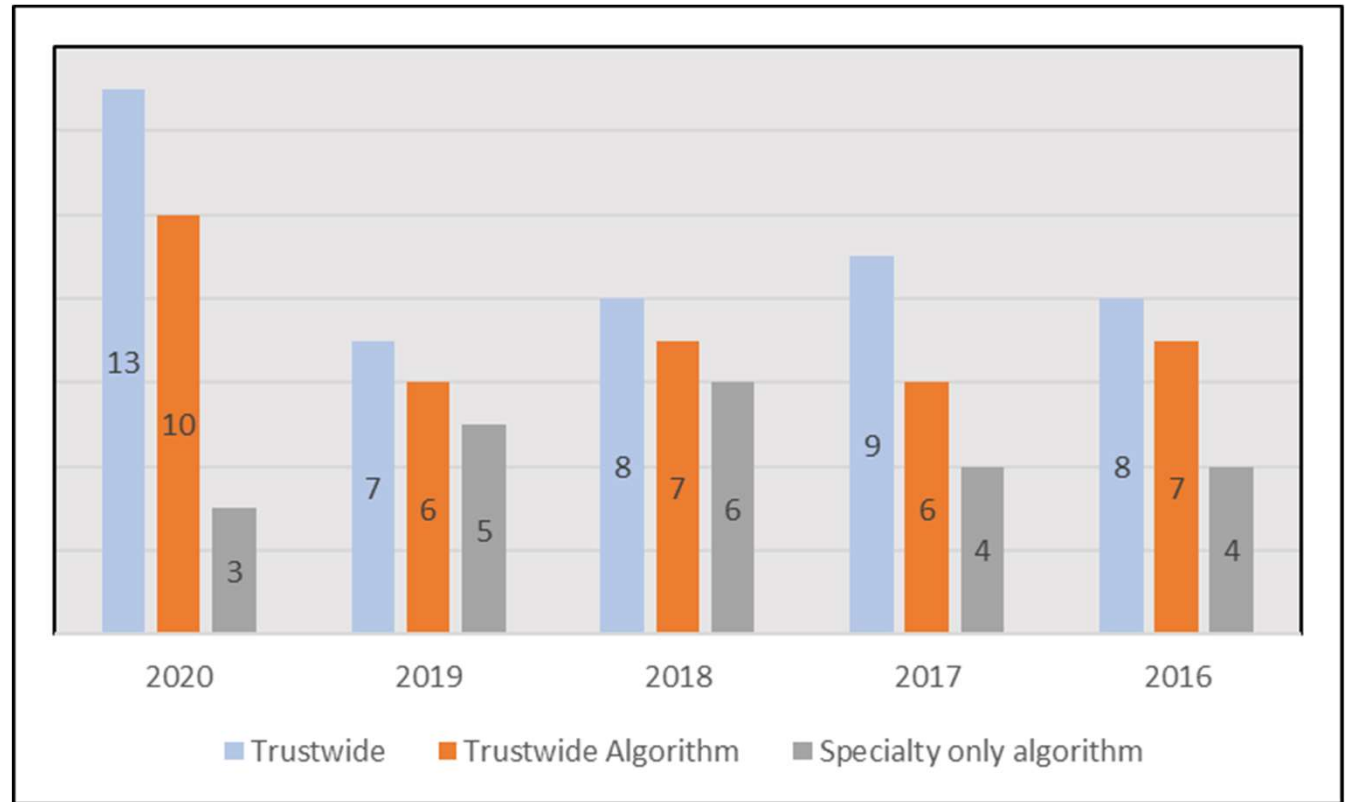
General PBM



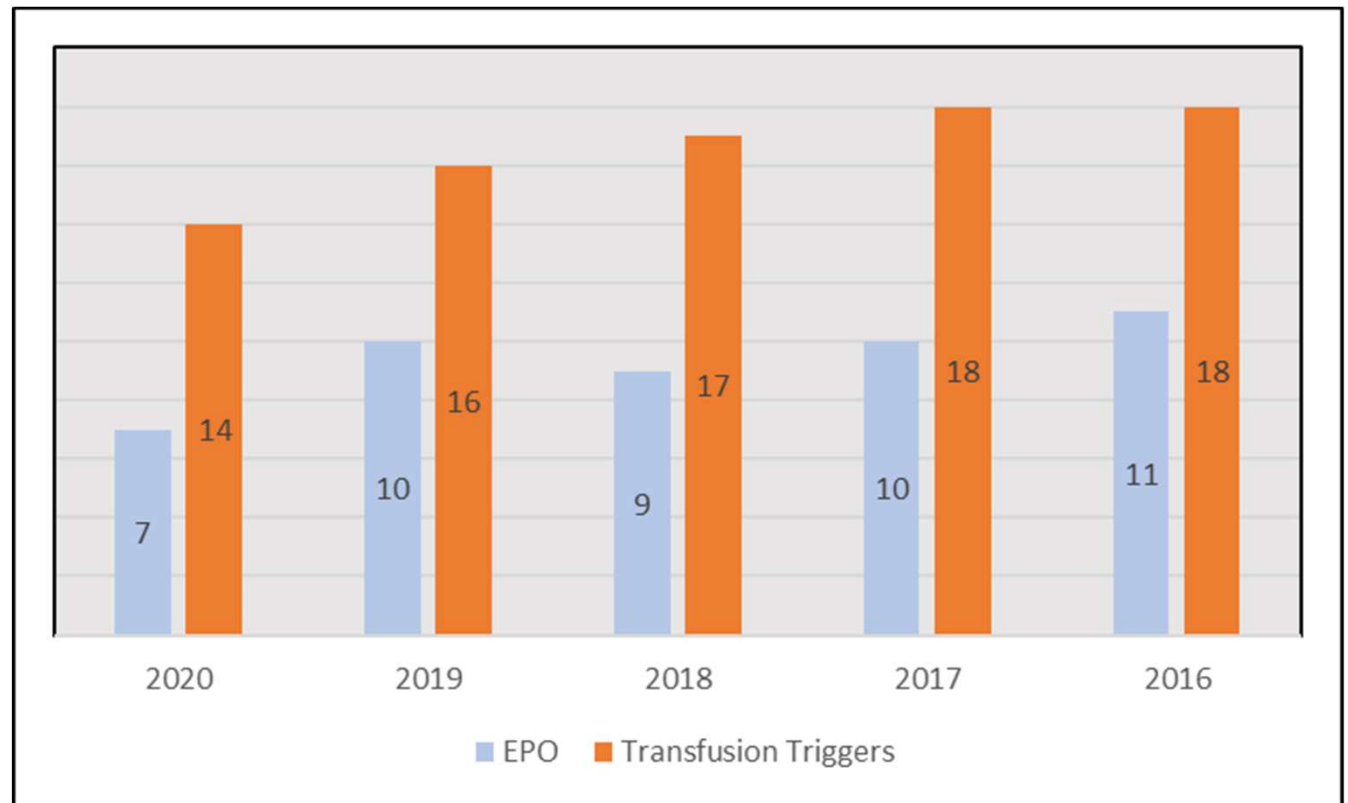
Consent



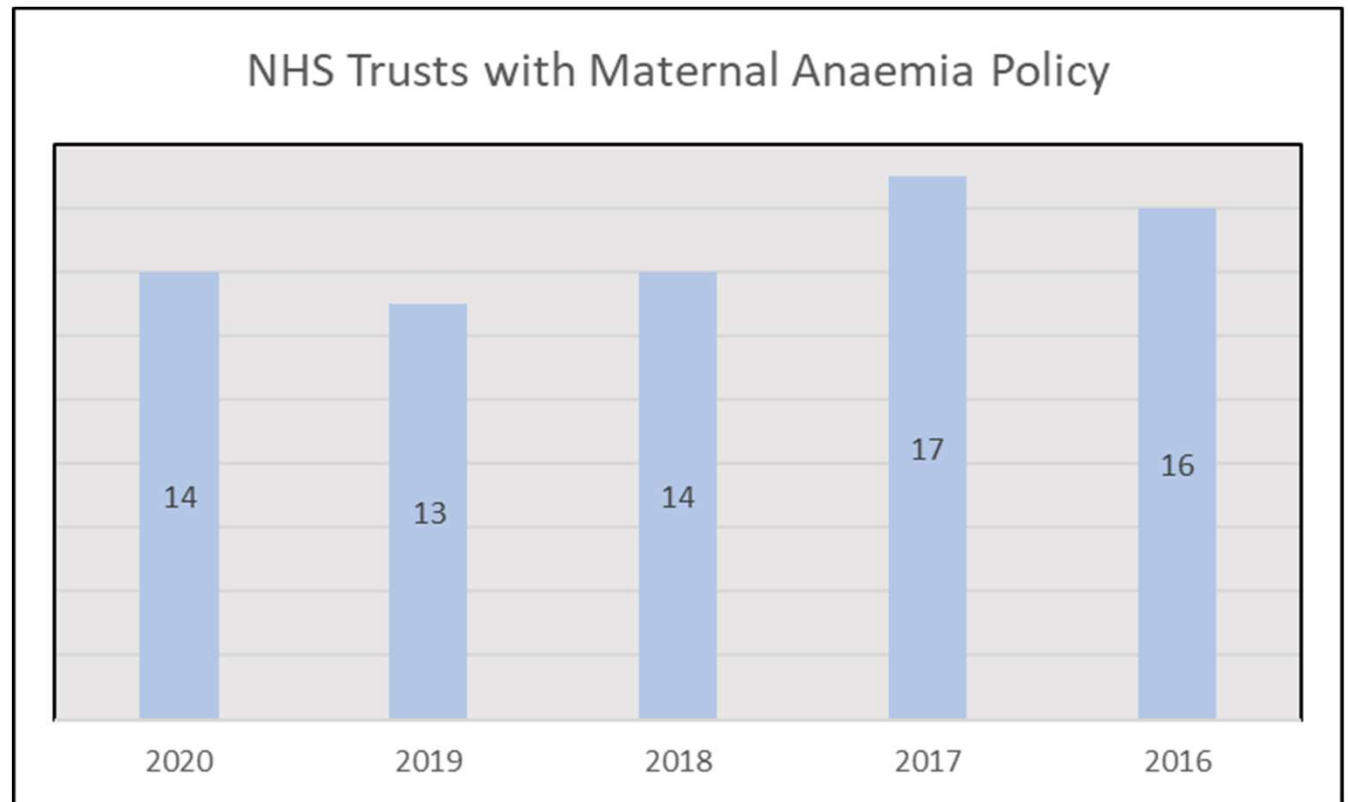
Medical Anaemia Management



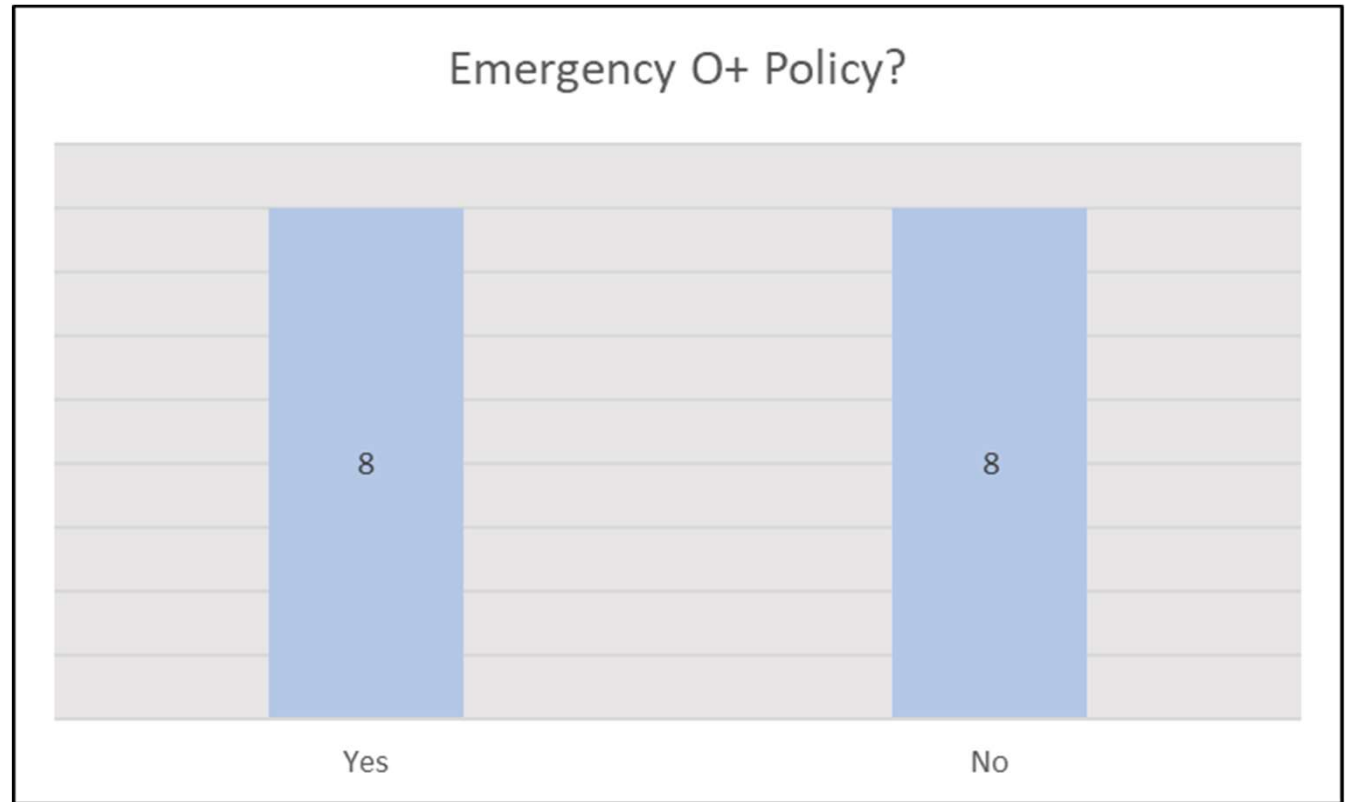
Anaemia Management



Maternal Anaemia



O+ Policy



Policies



Management of major haemorrhage:

all trusts 👍



Management of anti-coagulants pre-surgery:

all trusts 👍



Prescription and administration of anti-D:

all trusts 👍



Audit of major haemorrhage:
13/16 trusts

No audit RCH, DCH and Spire Bristol.



Management of bleeding patients on
DOACs: 14/16 trusts

No policy DCH, UHB



Reduced sample volume:
4/16 trusts

North Bristol, GWH, RD+E, Poole have policy

What next.....

- Yes/ No questions do not allow us to demonstrate progress or activity – so is this still useful to ask annually?
- What is practical/ manageable – rolling suite of audits (one each year, with some core information collated annually)
- How do we improve trust involvement to improve data accuracy?
- How do we improve engagement?
- What information do you want to see, is helpful in practice?