



South West Regional Transfusion Committee

RTC DATABASE

April 2017 – March 2018

Dedicated Tx Sessions

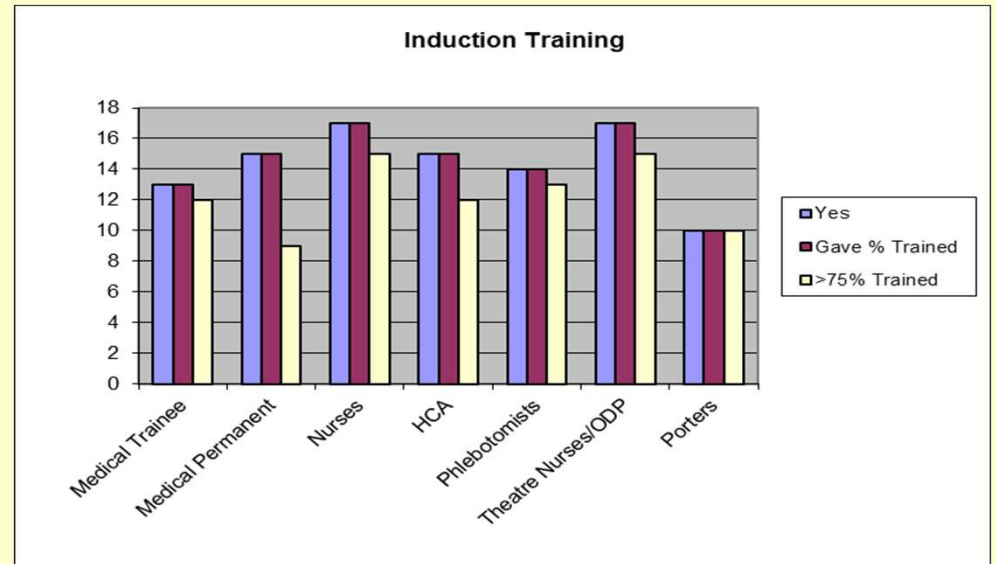
- HTC Chair
 - 4 shared sessions with the role of CH for Tx
- CH for Tx – 11 with sessions
 - 6 CH for Tx with no sessions
- TLM – range between 0-10
- TP – range between 0-20

HTC Attendance By Specialty

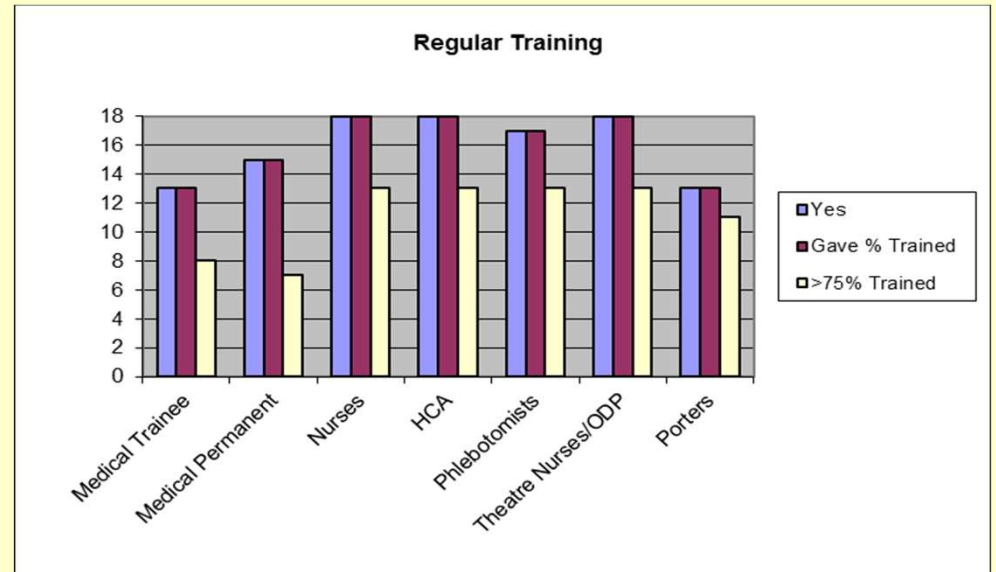
	Always	Frequently	Sometimes	Never	NA
Medicine (excl. Haematology)	2	3	8	5	0
Haematology	14	3	1	0	0
Anaesthetics	13	2	2	1	0
Obs & Gynae	0	7	7	4	0
Surgery	2	1	10	5	0
Orthopaedics	1	1	6	10	0
Emergency Department	0	6	6	6	0
Clinical Governance	2	3	7	6	0

Make Transfusion Safer

Induction Training
(18 hospitals provided data)



Regular Training
(18 hospitals provided data)



Laboratory Information

17/18 CPA/UKAS compliant

17/18 NEQAS compliant

LIMS System Supports Electronic Dispatch Note

	<300	300-800	>800
Yes	4	7	2
No	1	2	2

If Yes, do you use EDN

Yes	3	5	2
No	1	2	0

Electronic / Radiofrequency technology throughout tx process

	<300	300-800	>800
Yes	2	4	1
No	3	5	3

Electronic Issue

2011	81% (17 out of 21)
2012	79% (15 out of 19)
2013	79% (15 out of 19)
2014	84% (16 out of 19)
2015	89% (16 out of 18)
2016	90% (18 out of 20)
2017	90% (18 out of 20)
2018	89% (16 out of 18)

Electronic Pathology Requesting

Group & Save

2016 25% (5 out of 20)

2017 35% (7 out of 20)

2018 22% (4 out of 18)

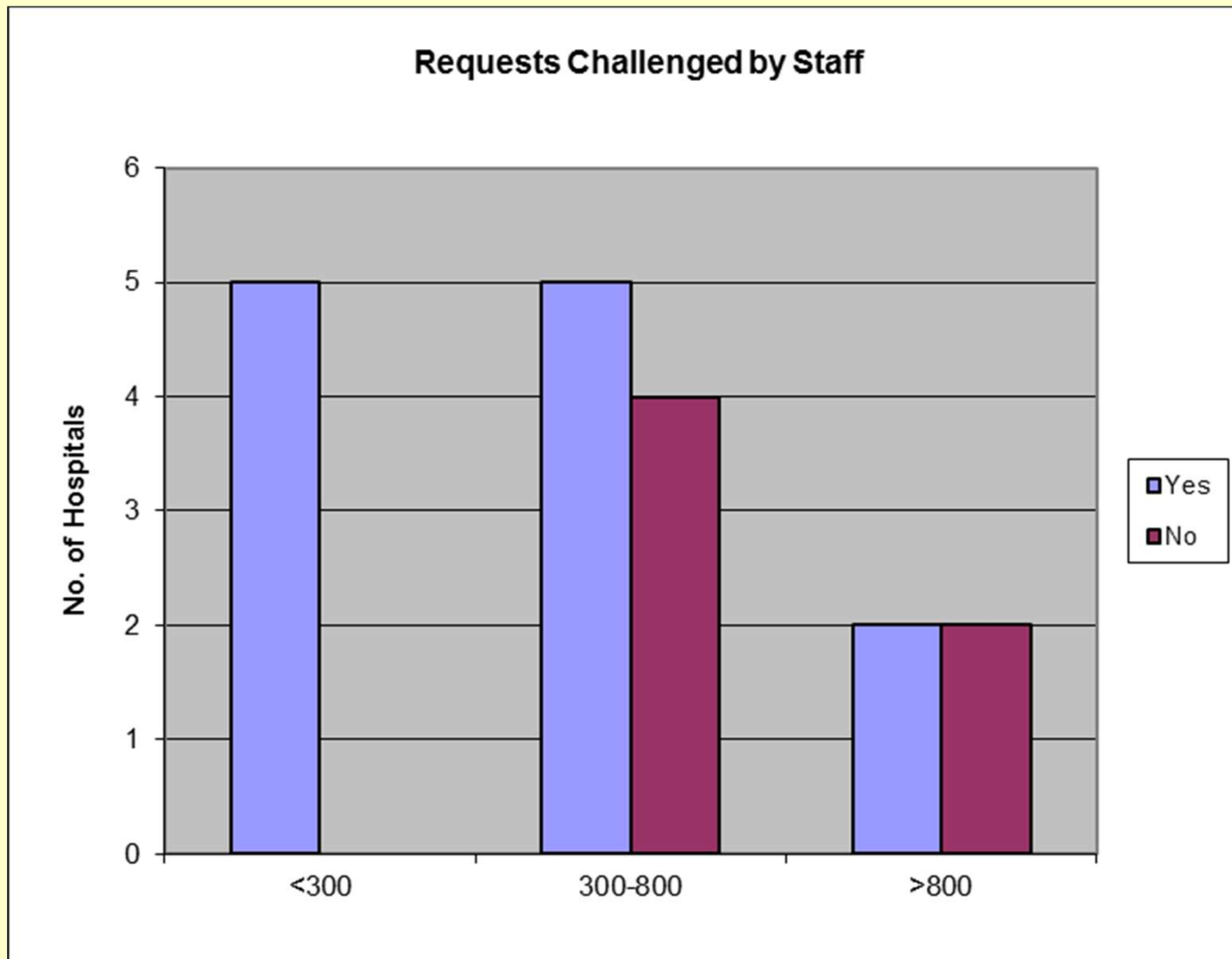
Crossmatch

2016 10% (2 out of 20)

2017 25% (5 out of 20)

2018 11% (2 out of 18)

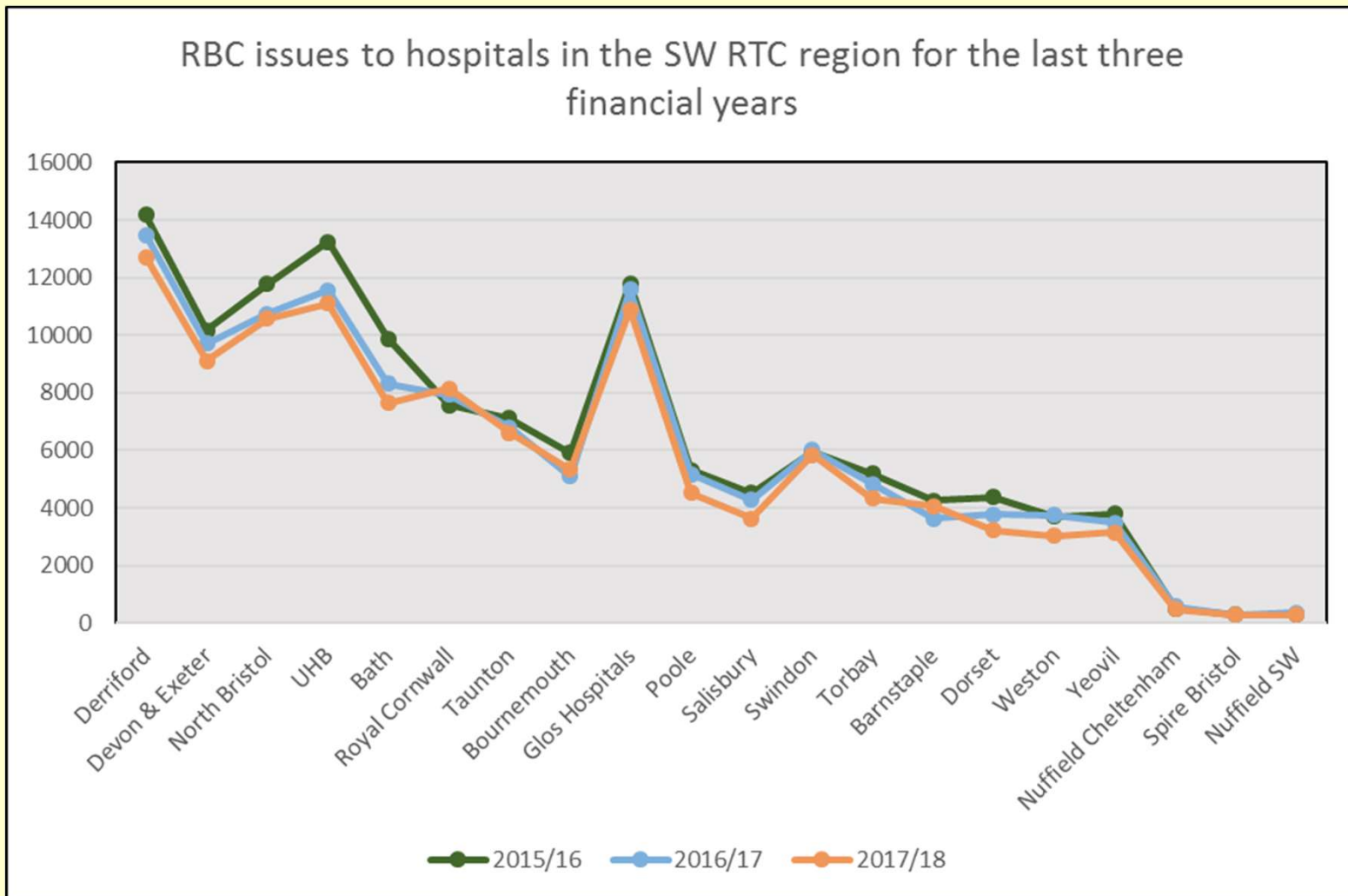
Request for Transfusion where indication unclear usually challenged



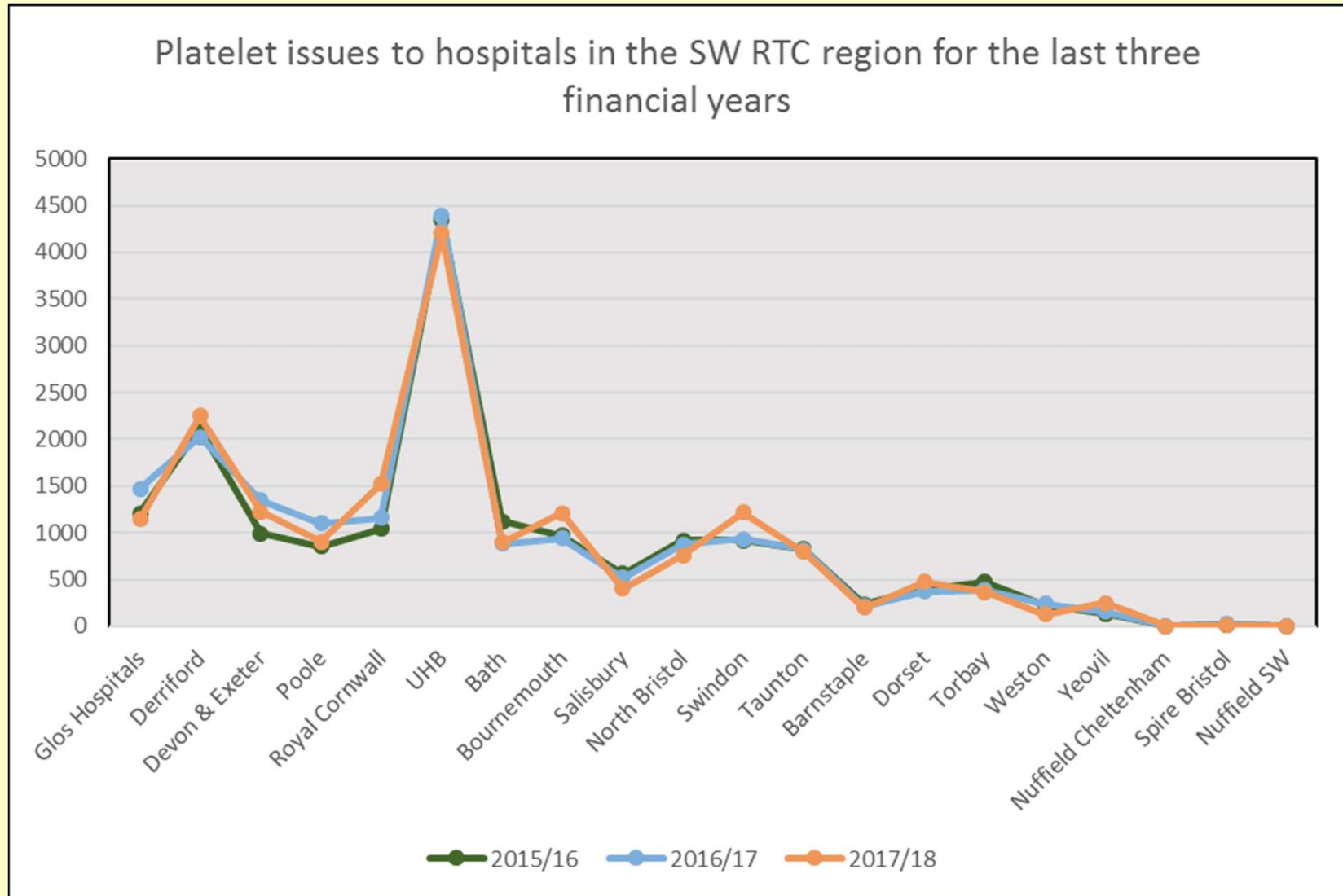
Single unit red cell transfusions as a percentage of all red cell transfusion episodes:

RD&E	60%
Derriford	60%
Poole	40%
Salisbury	37%
RBCH	34%
Nuffield SW	30%
Spire Bristol	30%
RUH	22%
Taunton	20%
Yeovil	12%
Dorset	5%

RBC Issues



Platelet Issues



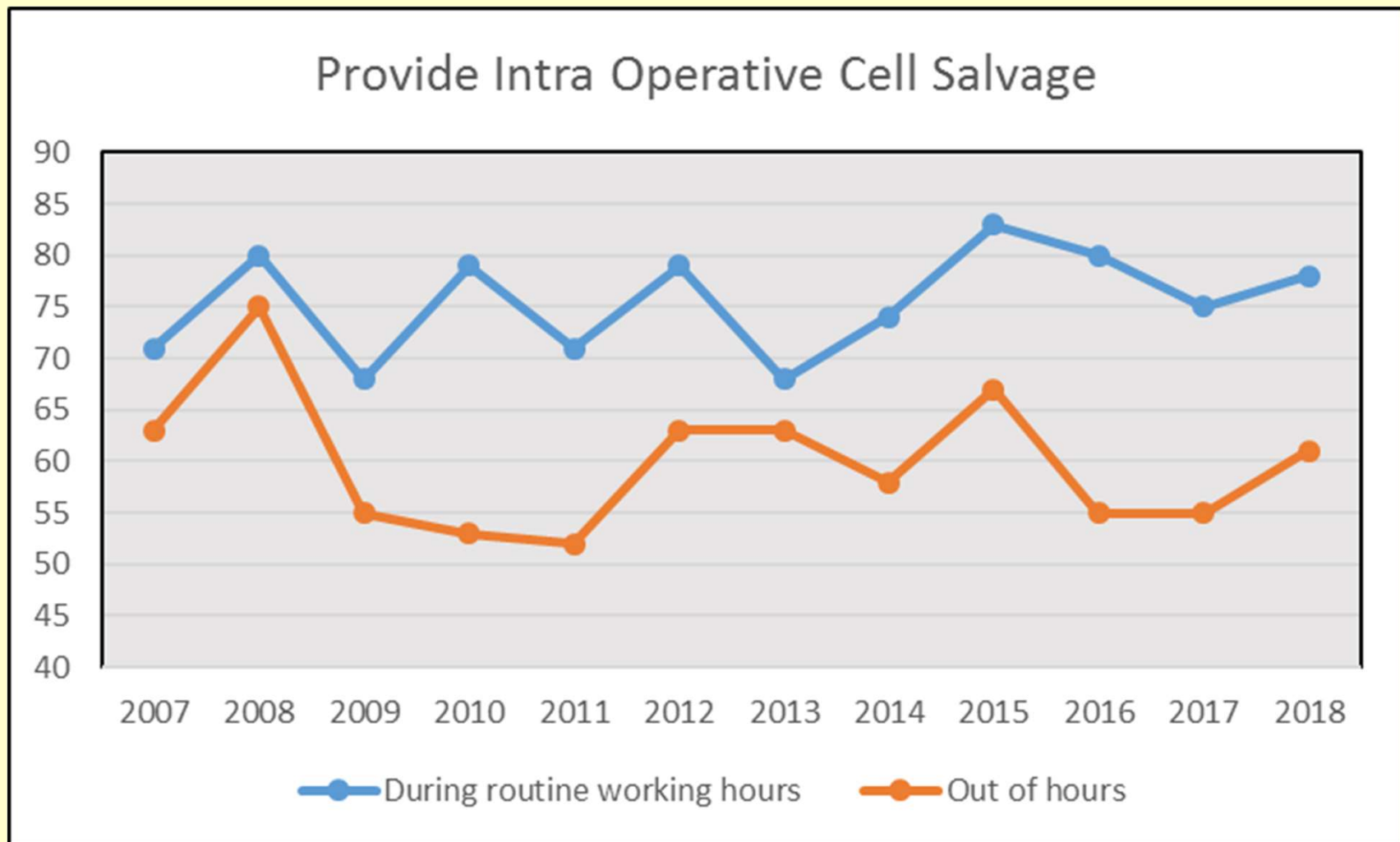
General Patient Blood Management

	Yes	No	NG
Depts use EPO as alternative to tx	9	9	
Trust has tx triggers	17	1	
Are these in line with NBTC codes	15	2	1
Guidelines incorporate single unit use	16	2	

Surgical Patient Blood Management

	Pre-Operative Assessment		Provide Point of Care Testing	
	Identify & Treat Anaemia	Provide Information Leaflets	Identification of Hb	Measurement of clotting parameters
Trustwide	15/18	18/18	7/18	5/18
Specific Departments	1/3	-	10/11	6/13

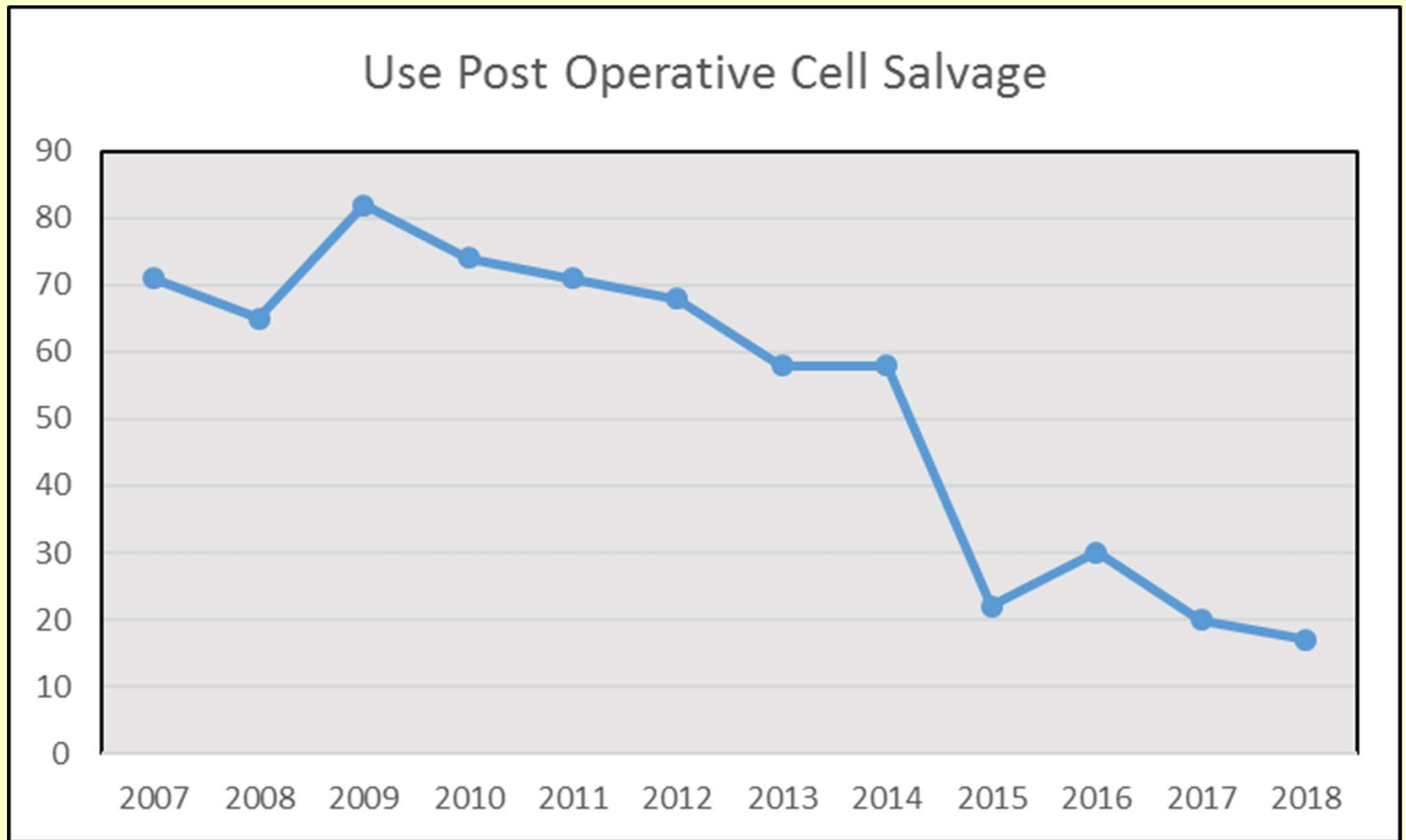
Intra-Operative Cell Salvage



Is Tranexamic Acid used:

YES: 18/18

Post Operative Cell Salvage



Medical Patient Blood Management

	Identify & Treat Anaemia	Provide Information Leaflets
Trustwide	8/18	15/18
Specific Department algorithm	6/10	3/3

Use of rFVIIa

Hospital Stocks		2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
		13	14	14	14	13	13	12	13	13	11	12	8
Haemophilia	1-5	10	9	11	7	6	6	7	10	9	4	5	3
	6-10	0	1	0	0	1	1	1	1	1	3	1	2
	>10	2	2	1	2	3	2	1	1	2	1	4	1
Non-Haemophilia	1-5	12	11	11	12	12	12	10	9	10	9	9	5
	6-10	2	3	2	1	0	0	0	0	0	3	1	0
	>10	1	1	2	0	0	1	1	1	1	0	0	0

PCC - all NHS hospitals and one private hospital stock and none said did not use

Obstetric Practice (NHS Hospitals Only)

All hospitals (15/15) gave a Single Dose 28 – 30 weeks

% Issued Traceable to Named Patient

- 10 -100%
- 5 - \geq 95%

14/15 hospitals had a Strategy/Policy to identify and treat maternal anaemia

Summary

- Participation 15/17 NHS & all private hospitals (18/20)
- Structure –
 - All hospitals have HTT
 - In 6 NHS hospitals CH has no dedicated sessions
 - HTC attendance – haematology & anaesthetics good, medicine, surgery & orthopaedics poor
- Regular training – only 7 achieved >75% for permanent medical staff
- Electronic-issue ~89%, requesting <25%, full/part blood tracking 80%, EDN 77%
- RBC annual issues ↓5.2% platelet issues ↑1.0%
- PBM – 2 no guideline to use single unit RBC's
- PBM surgical – 2 hospitals no pre-op anaemia management. IOCS static, post op CS ↓