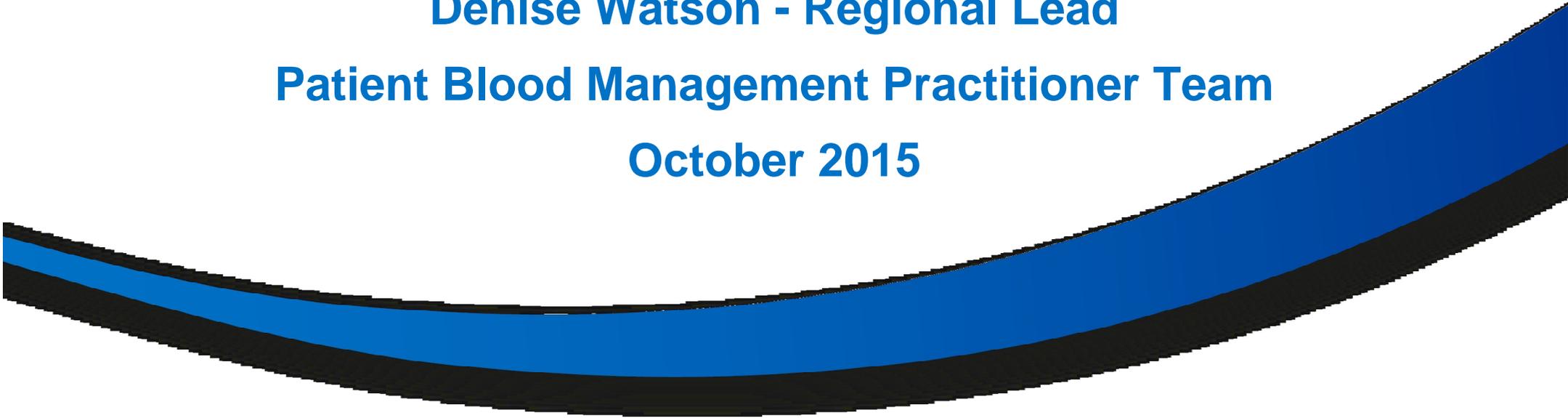


Patient Blood Management An Overview

Denise Watson - Regional Lead

Patient Blood Management Practitioner Team

October 2015



What is PBM?

- An evidence-based, multidisciplinary team approach to optimising the care of patients who might need transfusion
- Focuses on measures for blood avoidance as well as correct use of blood components when they are needed
- Improves patient care – optimises use of donor blood and reduces transfusion-associated risk
- A joint initiative between NHSBT, NBTC and DH

The 'Patient' in PBM *Blood and Transplant*

PBM firmly places the patient at the centre of the decision making process - vital to inform and involve patients in their care –
'Informed Consent'

UK Patient Awareness Campaign 'Do you know who I am?' –
recommendation in SHOT 2009 report

Denise Watson

Regional Lead: PBMP Team

PBM in England

- BBT initiatives since 1998 raising concerns around:
 - Patient safety
 - Increase in demand for blood components
 - Resource issues across the NHS
- Blood transfusion not high on the agenda for the majority of hospitals

Health Service Circular
 Series number: HSC 1998/224
 Issue date: 11 December 1998

Health Service Circular
 Series Number: HSC 2002/009
 Issue Date: 04 July 2002
 Review Date: 04 July 2002
 Category: Public Health
 Status: Action

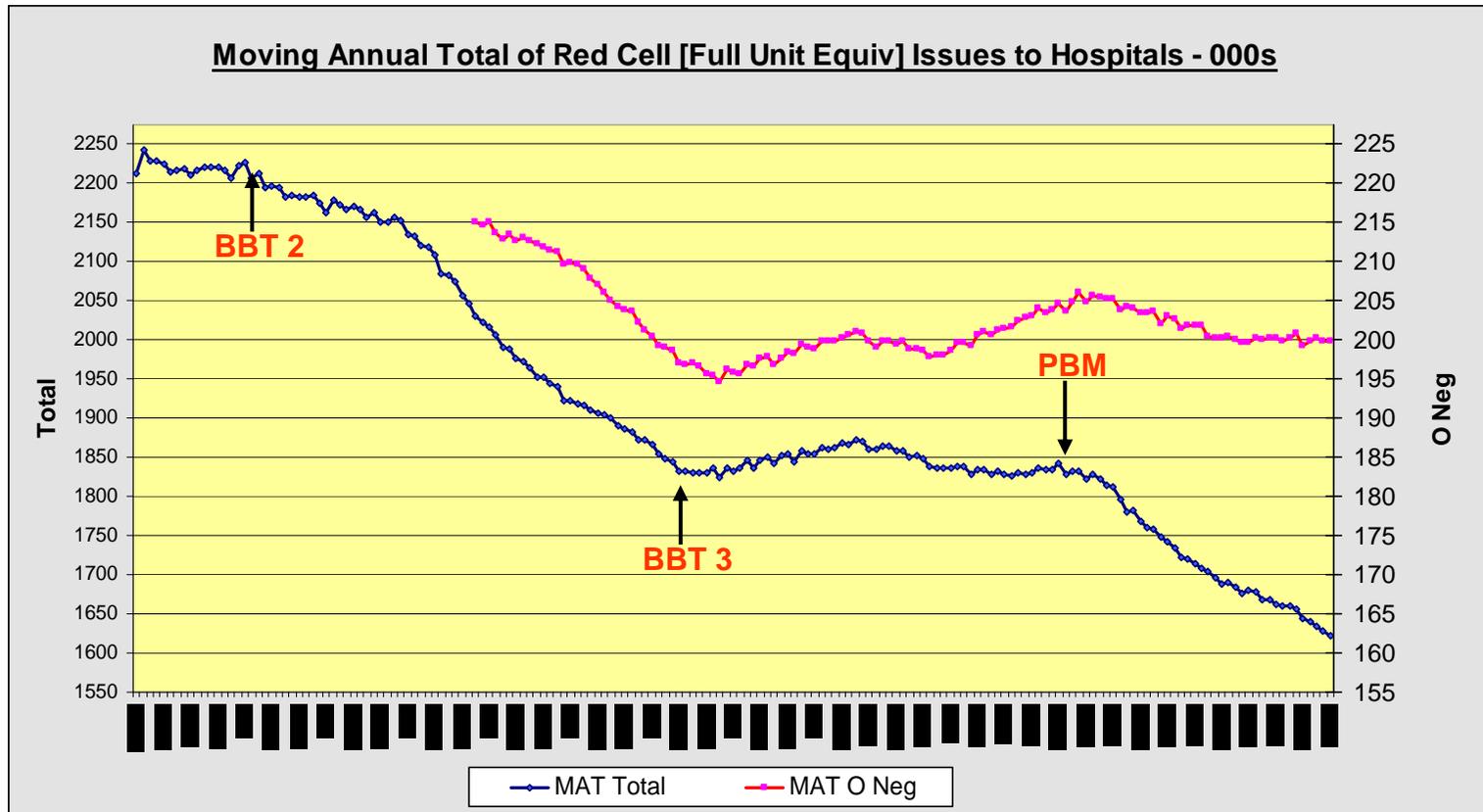
Health Service Circular
 Series Number: HSC 2007/001
 Gateway Reference: 9058
 Issue Date: November 2007

Better Blood Transfusion: Safe and Appropriate Use of Blood

For action by:
 Strategic Health Authorities (England) – Chief Executive
 Strategic Health Authorities (England) – Directors of Public Health
 NHS Trusts – Chief Executives
 Primary Care Trusts – Chief Executives and Main Contacts
 NHS Blood & Transplant – Chief Executive

For information to:
 Chief Medical Officers Wales/Scotland/Northern Ireland
 Nursing Statutory Bodies – Chief Executives
 Professional Associations and Royal Colleges
 Strategic Health Authority Directors of Public Health
 Strategic Health Authority Directors of Performance Management
 Strategic Health Authority Nurse Directors
 Postgraduate Medical Deans
 Monitor
 Foundation Trusts

Red cell use



RBC YTD figures show a reduction of 4.4% at end Sept 2015

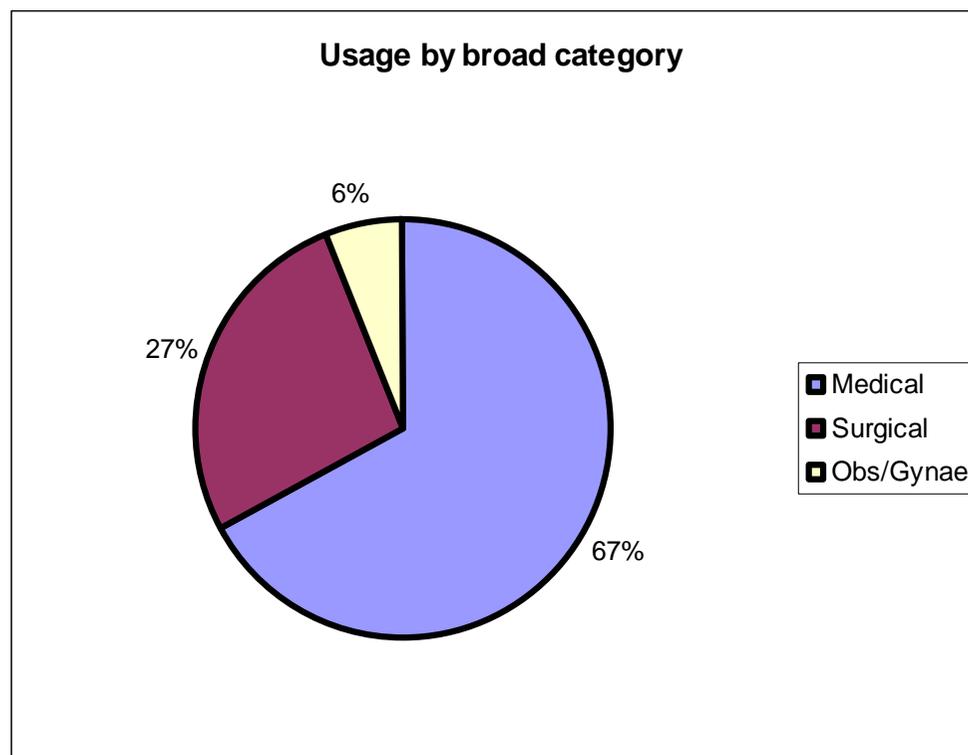
Denise Watson

Regional Lead: PBMP Team

Why the reduction?

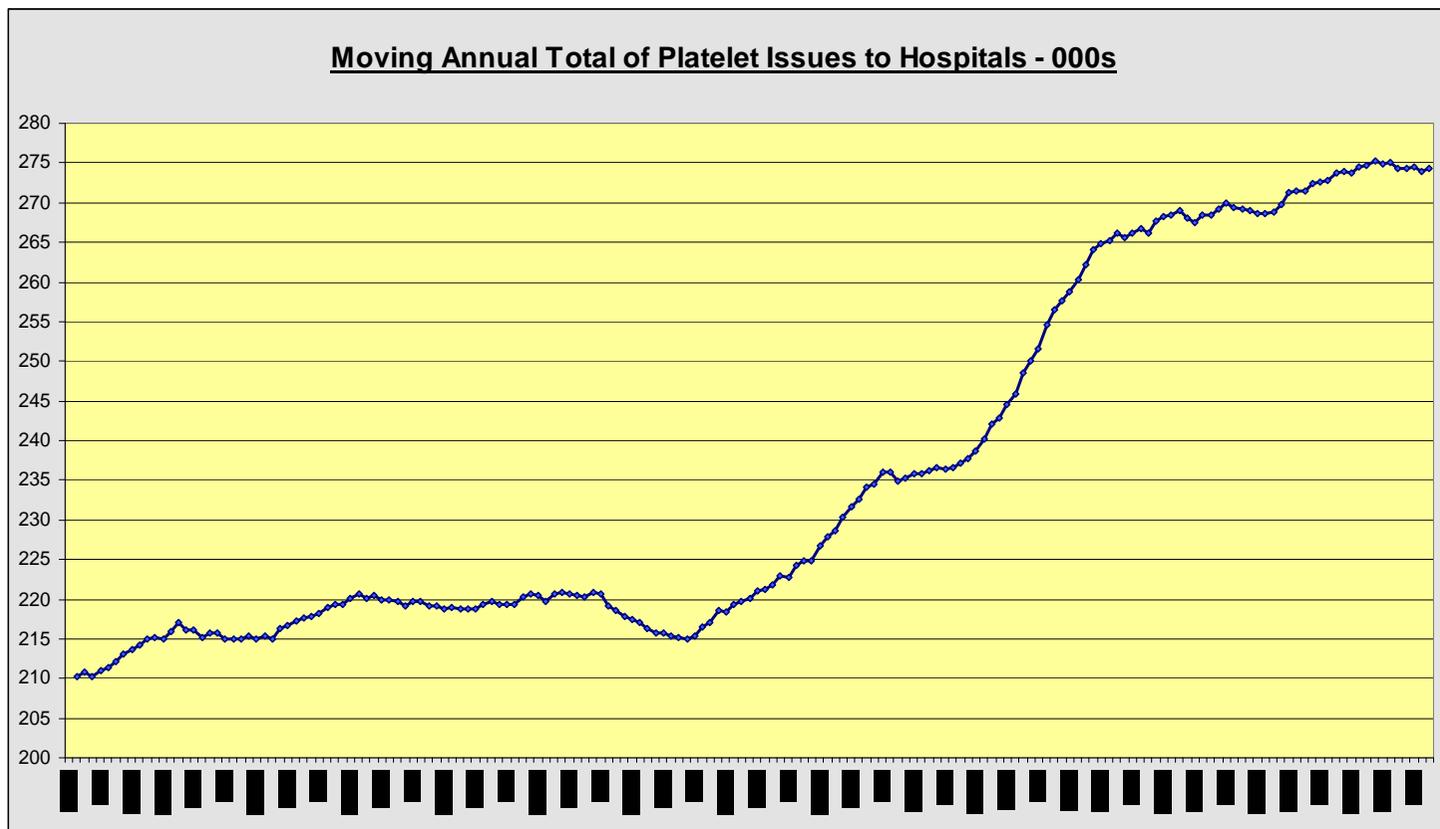
- Audit recommendations implemented?
 - NCA Medical Use of Blood, reported in 2013, showed inappropriate use in 13% of the transfused patients
 - 5% of patients with reversible anaemia
 - 8% of patients transfused above Hb threshold
- BBT / PBM initiatives?
 - Single unit policies?
 - Increase in use of cell salvage?
- Trauma centres?

National Red Cell Survey 2014



Full report at: <http://hospital.blood.co.uk/audits/national-comparative-audit/national-comparative-audit-reports/>

Platelet use



YTD figures show a decrease of 0.5% at end Sept 2015

Denise Watson

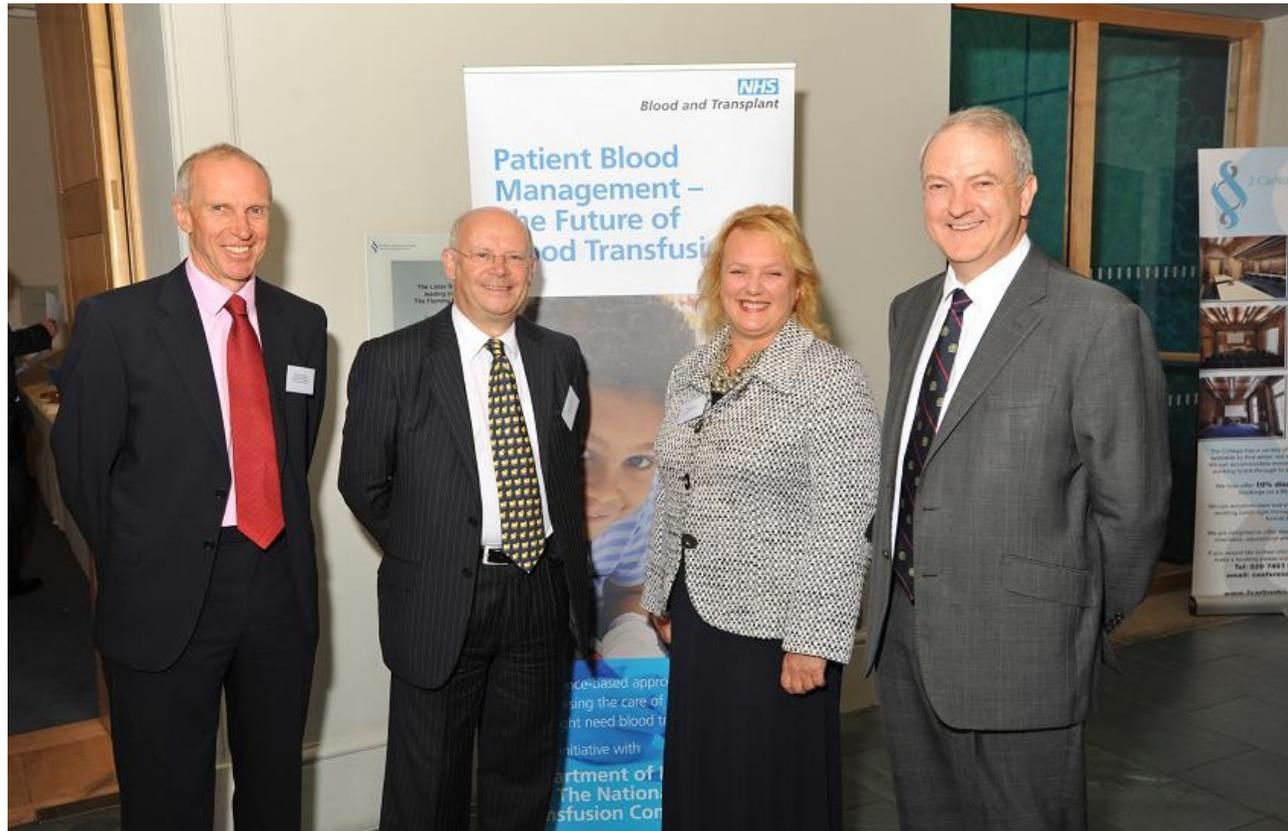
Regional Lead: PBMP Team

Why the change?

- NCA (2010) found 28% of transfusions fell outside national guidelines
- Ageing population?
- New approaches to medical care?
- Advances in treatments that result in patients with a low platelet count?
- Double dosing?

Patient Blood Management – The Future of Blood Transfusion

Royal College of Pathologists June 18th 2012

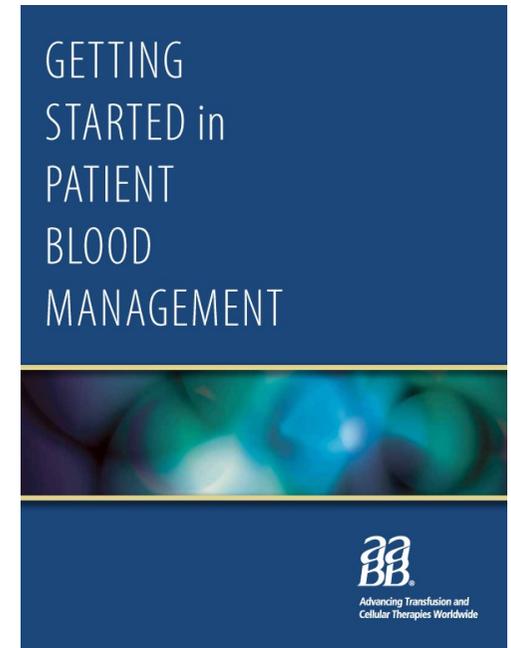
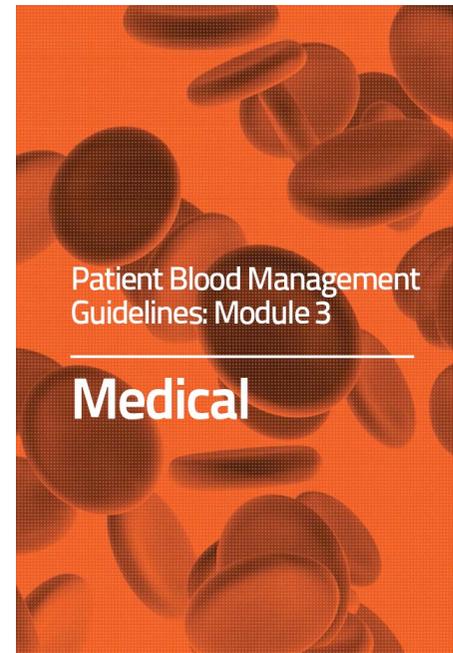


Denise Watson

Regional Lead: PBMP Team

Patient Blood Management

- An international initiative
- Minimising blood sample volume
- Appropriate transfusion triggers
- Managing pre-op anaemia
- Intra- and post-op management e.g.:
 - cell salvage
 - assessing and managing abnormal haemostasis



What has happened since July 2012?

- The NBTC established a PBM working group
- PBM Survey 2013
- Recommendations were published in 2014
 - General
 - Specific
 - Implementation

PBM Survey England 2013

146/149 (98%) of acute NHS hospitals responded:-

- 75% of TPs spend <30% time on PBM activities
- ~ 50% of haematologists responsible for transfusion have no allocated sessions for transfusion
- 43% report blood usage to clinical teams
- 53% conduct local audits of blood use
- Variable documentation of consent and use of patient information leaflets
- Variable use of cell salvage, near patient haemostasis testing, pre-op anaemia management
- 29% have a single unit policy

Difference between BBT and PBM?

BBT

- Build on success of previous BBT initiatives
- Safe transfusion
- Appropriate use
- Increase patient and public involvement
- Benchmarking
- Better clinical research

PBM

- Build on success of previous BBT initiatives
- Safe transfusion
- Appropriate use
- Increase patient and public involvement
- Benchmarking
- Better clinical research

Difference between BBT and PBM?

BBT - Actions for:

- NHS Trust CE
- NHSBT
- NBTC
- RTC
- HTC
- HTT

PBM - Actions for:

- Patient representatives
- Hospital Management
- Trust Board representative
- NHSBT
- NBTC
- RTC
- HTC
- TP, TLM, Cons Haematologist
- Surgery / Anaesthesia clinicians
- General Medical Physicians
- IT Specialists
- Clinical Governance

PBM recommendations: General

- Establish a PBM programme and raise awareness amongst clinicians and patients
- Issues around patient testing:
 - Volume and frequency of samples
 - Promotes the use of near patient testing
- Appropriate dose and thresholds for transfusion

PBM recommendations: Specific

Surgical

- Pre-operative management of anaemia and haemostasis
- Intra-operative
- Post-operative

Medical

- Management of abnormal haemostasis
- Management of anaemia

PBM recommendations: Implementation

- Establish a PBM committee (possibly within HTC)
- Determine main targets for PBM
- Identify PBM champions
- Obtain a mandate from hospital management
- Educate clinicians about PBM
- Monitor and benchmark practice

NHSBT support for PBM in hospitals

- Support for PBM in the NHSBT Blood 2020 Strategy
- PBM pilots in partnership with hospitals
- Consider supporting the development of the infrastructure for PBM in hospitals, for example:-
 - Modernising practices in transfusion laboratories and at the bedside
 - Collection of enhanced data on blood usage for demand planning and feedback to clinicians
 - Specific PBM practices e.g. intra-operative cell salvage
- Continue to support clinical research to identify optimal transfusion practice

What next?

- NHSBT developing a PBM strategy
- Review of NHSBT PBMP Team structure
- Repeat national PBM Survey in late October or early November

Summary

- PBM is an extension of BBT
- Centres around the patient
- International initiative
- Collection, analysis and feedback of data on blood usage to clinical teams is essential to drive PBM
- It provides the opportunity for blood services to further engage with hospitals

Thanks to:

- Professor Adrian Newland, Consultant Haematologist, Barts Health NHS Trust
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- North East Regional Transfusion Committee
- Ms Janice Robertson, RTC Administrator