

Setting up Blood Provision for Nightingale Hospital Bristol



Bristol Nightingale

- Request for transfusion lab to provide blood
- Dedicated ventilator facility for critically ill COVID-19 patients.
- Emergency RBC provision essential
- 2 weeks to set up service
- No further details provided

Bristol Nightingale

- It was not initially known which Bristol hospital would provide pathology ?NBT ?UHB
- No contact person to liaise with
- Informed onsite training would not be possible
- Decision on use of blood fridge or blood boxes – decided to use both (O RBC only in fridge)
- No TLM and seconded QM

Process Map

- **TP and Transfusion senior process mapped emergency and named patient blood provision**
- **Identified potential risks in process**
- **Developed ‘self-directed’ documentation:**
 - **Quick reference guides**
 - **Instructions and forms**
 - **SOPs for lab and Nightingale**
 - **Training presentation – YouTube Video**

Emergency Stock Transfusion		
Process	Audit Comments	
Highlight staff complete section 4 of Blood Transfusion Chart in transfusion arrival line.		
Delivered blood units placed in fridge based upon one specific colour coded labelling (blue for O positive and pink for O negative)		
Use emergency stock released to transfusion (or empty blood box when units used)		
WAIT UNTIL EMERGENCY BLOOD IS REQUIRED		
Cellular transfusion released unit of emergency blood from the blood fridge (based upon one of patient) using fridge code 1234 in open fridge		
Cellular transfusion unit skin documentation as per one of compatibility label		
Cellular takes the blood unit to the patient bedside		
Transfusion checks blood group compatibility based upon one of patient. Post transfusion checks completed using checklist as per one of Blood Transfusion Record		
Transfusion begins infusion and documents start of transfusion as per one of compatibility label		
Transfusion removes the blue sticker from the compatibility label, affixes it to the Blood Transfusion Record and completes documentation for patient notes		
Transfusion removes the yellow compatibility label from blood bag, adds a patient demographic label and places it in the compatibility pack on blood fridge		
Transfusion removes blood to use and places it in the compatibility pack on the blood fridge. Blood will be disposed of into clinical waste.		
Transfusion notifies lab staff that unit has been transfused and arrange replacement. Lab tel: 0117 914 8358		
IF UNIT COLLECTED BUT NOT TRANSFUSED		
Cellular notifies lab staff that unit has been collected but not used		
Cellular informed to document unit skin as per one of compatibility label		
Cellular to put unit in quarantine pack (from quarantine shelf in fridge) and place on quarantine shelf in fridge		
Lab staff prepare and send replacement unit to highlight		
Highlight staff complete section 4 of Blood Transfusion Chart in transfusion arrival line		
Replacement blood unit placed in fridge based upon colour coding for one		
Cellular to take quarantine unit out of fridge, place in blood box and send it. Cellular completes section 5 of Blood Transfusion Chart		
Clinical completes section 6 of Blood Transfusion Chart and returns blood box to transfusion lab		
END OF PROCESS		

Procedural Test Run

- AP's to run through the process using documentation and no additional guidance
- 2x AP - 2x BMS - 2x nurses
- Adjustments made after each test run

KM1

Slide 5

KM1

not sure what this means?

Karen Mead, 13/11/2020

Page 1) Quick Reference for Blood Administration - Documentation in Patient Notes

Blood Transfusion Record for patient notes
(stored in Blood Fridge folder)
- Checklist in section 5 must be completed for
EVERY blood unit transfused (DoH requirement)

Remove blue sticker from bottom of blood unit
compatibility label, affix to section 6 of Blood
Transfusion Record and complete all details in table.

File Blood Transfusion Record in patient notes

Compatibility Label
(attached to blood unit)

Please turn over

Page 2) Quick Reference for Blood Traceability (This is a Legal Requirement)

This label **MUST BE** detached from blood
bag and **FULLY COMPLETED** as follows:

Emergency stock only:

To be dated, timed and signed when
collecting component from remote blood fridge

Named patient blood only:

To be dated, timed and signed when taking
blood unit out of blood box at patient bedside

For all units transfused:

To be dated, timed and signed when
administering the blood component

Emergency stock only:

Affix patient demographic sticker here

Place label in traceability pouch on top of the
remote blood fridge, along with the tracer
Phone the lab if emergency stock transfused



Reverse of Compatibility Label
attached to blood unit

Dispose of empty blood bag into clinical waste

Please turn over

We Have Contact!

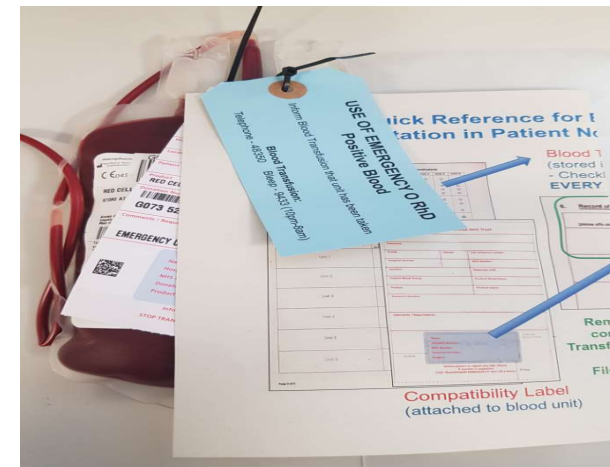
- **Contact received from Nightingale**
- **We present our YouTube training video**
- **Informed no paperwork at bedside**
- **No NBT MRN number on wristband**
- **Non-NBT staff would be working there**
- **Site visit arranged for TP and TLM**

Re-design

- **After visit to Nightingale minor changes made**
- **Understood the lay out and location of fridge**
- **Additional infection control considerations**
- **UHB ITU electronic patient system in use**

Re-design negotiations

- Insisted on the use of paper work
- Agreement that the training video would be available for staff
- Suggested relocation of blood fridge to clean area



Blood Fridge

- Needed to be transported and put in place
- Maintenance and calibration
- Temperature mapping
- Temperature monitoring and cold chain
- Alarms
- Emergency stock locations
- Quarantine area



Main Issues

- All Nightingale hospitals serving different purposes – no national model
- Infection control lead on site did not engage at all
- Lack of information and contact person at the start so lab had to use educated judgment calls
- BloodTrack system used at NBT not feasible
- TLM missing in action
 - Change control from home while recovering in hindsight

What Helped

- **COVID-19 budget**
 - **New blood boxes**
 - **New blood unit temperature trackers**
 - **New fridge**
- **Army efficiency**
 - **Collecting blood fridge**

Lessons learnt

- **Good communication essential**
- **Named person to liaise with**
- **Engagement from infection control**
- **Change control process is a must**
- **Process mapping invaluable**
- **Getting different staff to follow written process without training**
- **NBT Transfusion Team are awesome (but I already knew that)**

If you have recovered from Covid please consider donating plasma



Questions?