



Blood and Transplant

PBM Update

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PBM Practitioner

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South West RTC Meeting
14th November 2018

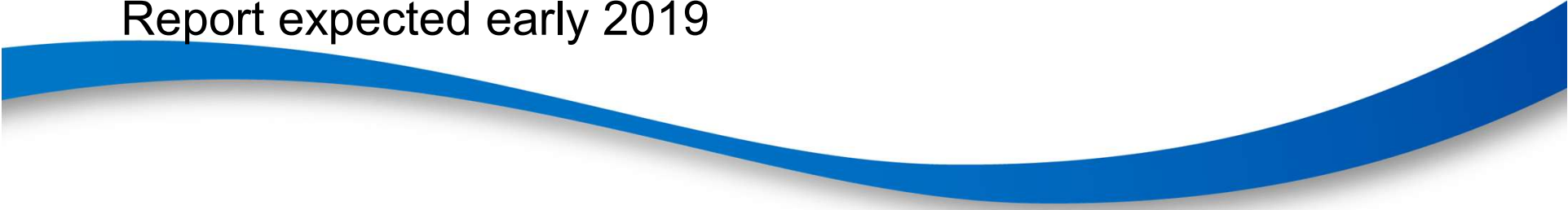
Introduction

- NCA Audits
- QS 138 Audit Tool
- On call provision of HLA matched platelets
- Patient Information Leaflets



National Comparative Audit

Blood and Transplant

- **O negative audit** This audit/survey is now closed. We have fated 5300/6288, 85% of units plus received 137 organisational questionnaires. Analysis in progress. Report expected Dec 2018
 - **Massive Haemorrhage.** Started on 1st October to run for 4 weeks. Around 145 hospitals have agreed to participate in the audit. Sites being asked to audit 10 cases. Data collection until end of November.
 - **Use of FFP & Cryo in neonates** data collection completed. Only 400 cases but reported to be all cases in audit period. Report expected early 2019
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National Comparative Audit



Blood and Transplant

- **2018 Audit of the management of maternal anaemia**
- Project Group has developed the audit protocol & finalised the audit method and data collection tools.
- Sites are being made aware of the audit and are being asked to recruit trainee doctors to collect the data, and a similar approach is being made to the midwives.
- Transfusion Practitioners should be aware of the audit, but should not collect and contribute data. The target is 10 live births in September, auditing to see how well maternal anaemia was investigated and managed.
- Tentative start date of mid-November, dependent on progress made with recruiting obstetricians to the audit

Future audits



Blood and Transplant

NCA audits that the region would like to see re-audited

- **2007 Audit of overnight transfusion**
- 3 trusts in favour and one suggested exploring if overnight transfusions were delayed in severely anaemic or bleeding patients due to inflexible rules
- **2011 audit of the use of blood in adult medical patients**
- 3 trusts in favour and one commented “This would be a great help to hospitals trying to introduce an IV iron/ anaemia service for IDA”.



Future audits



Blood and Transplant

- **2014 Audit of patient information and consent**
3 Trusts in favour (would like to see repeated in 2019)
- **2015 & 2016 Patient Blood Management in patients undergoing surgery**
 - 3 Trusts in favour – as long as it is redesigned as suggested.
- **2017 Audit of the management of patients who might be at risk of Transfusion Associated Circulatory Overload**
 - 2 Trusts in favour
- **2016 Audit of red cell transfusion in hospices**
 - One Trust in favour

New topics suggested

Audit of Special Requirements

Audit of Compliance with NICE Guidelines for Transfusion

Future audits 2019 TBC Project meeting in November

Other surveys



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- **Audit of blood sampling and labelling, collection of blood from blood bank and administration to the patient (known as the Vein to Vein (V2V) audit** Suite of audit tools to cover the 9 domains. Expected to be available mid 2019. Not NCA audit but hospitals can use the audit should they wish.
- **PBM Survey 2018** Third PBM Survey (2013,2015) Was launched October 29th open for 6 weeks with report expected early 2019

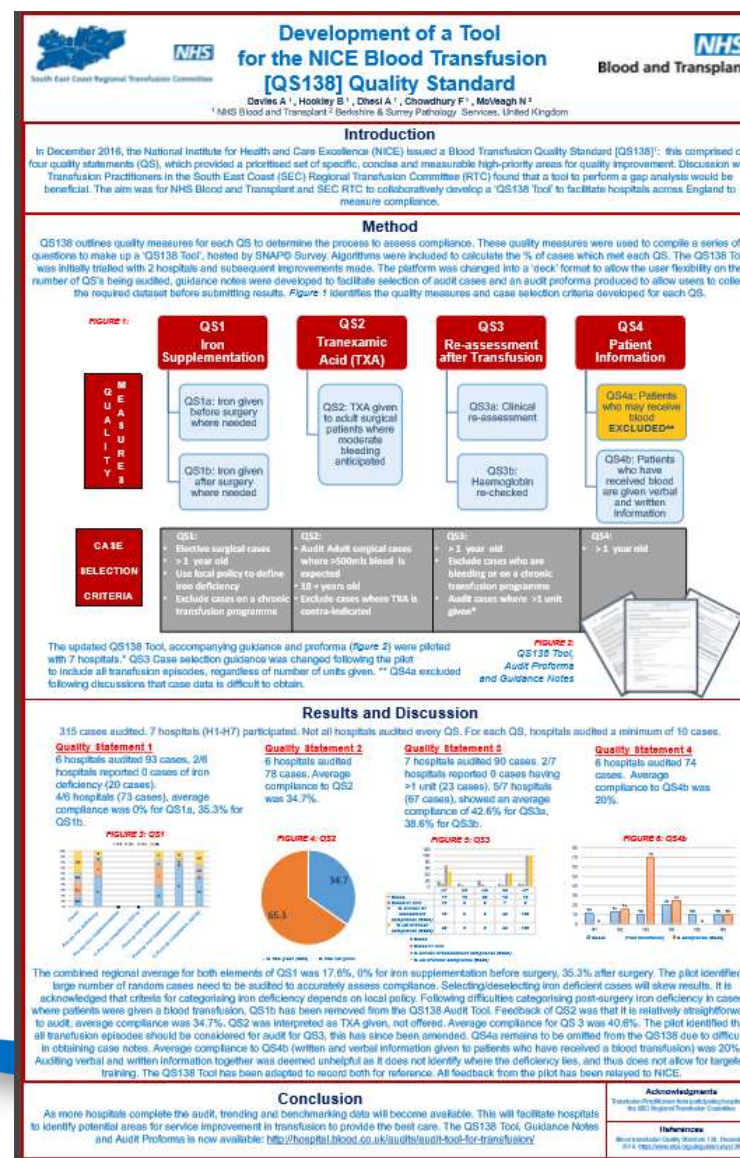


Compliance with QS138



Blood and Transplant

- NHSBT & SEC RTC developed QS138 Audit Tool
- Trialled at 2 hospitals and tweaked
- Updated tool piloted at 7 hospitals. Not all hospitals audited every QS
- Tool, guidance and proforma on Hospitals & Science website
- Endorsed by NICE



Compliance with QS138



Blood and Transplant

Hospitals and Science



You are here: [Home](#) > [Audits](#) > Audit tool for Transfusion



Audit tool for Transfusion

Clinical Audit



National Comparative Audit



Regional Transfusion Committee Audit

Check your compliance with NICE Quality Standard [QS138]

Hospitals and Trusts are required to audit practice against each quality statement in order to demonstrate compliance.

Use our gap analysis tool to check your compliance

Please use our gap analysis tool to assess how you comply with the National Institute for Health and Care Excellence (NICE)'s [Quality Standard \[QS138\]](#) which has four priority areas for Blood Transfusion quality improvement. On completion of the analysis you will receive a summary of your results.

If you wish to receive an anonymised report which is benchmarked against other hospitals, please contact your RTC Administrator.

Before performing the gap analysis please read the [proforma](#) (PDF) and [guidance](#) (PDF).

- [Perform your gap analysis](#)

This tool along with the proforma and guidance was developed by NHSBT in conjunction with the South East Coast Regional Transfusion Committee.

Iron in your diet



Blood and Transplant

- Available from 1 October 2018 to order at <https://hospital.nhsbtleaflets.co.uk/> or download from <http://hospital.blood.co.uk>
- It has been reviewed in line with the NHS Information Standard (IS) process and displays the IS logo
- The standard ensures clear, accurate, evidence-based, up-to-date, and easy-to-use information.

