

South West Regional Transfusion Committee

Survey of transfusion education in Primary Care Trusts in the South West region.

Background

The South West Regional Transfusion Committee (SWRTC) are required to oversee blood transfusion practice in the region. This survey was to identify how Primary Care Trusts (PCTs) in the south west region are ensuring compliance with HSC 2002 / 009 'Better Blood Transfusion' and NPSA Safer Practice Notice No. 14 'Right patient, right blood'.

Aim

To assess training in blood transfusion practice.
To enable feed back to the National Blood Transfusion Committee (NBTC).

Method

A short, simple questionnaire was distributed electronically to the Clinical Governance Leads of the 13 PCTs in the south west region. This process started in August 2007, but initial response was poor so the distribution was repeated after 6 weeks with a closing date of mid-November 2007. By this date, 9 / 13 PCTs had responded.

One completed questionnaire was found to be corrupted upon receipt, and despite requests for re-submission, this has not been forthcoming. Thus the final response was 8 / 13 PCTs.

The responding PCTs have been given letter codes to preserve anonymity.

Results

The results follow.

Key to abbreviations:

PCT – Primary Care Trust
TP – Transfusion Practitioner
DGH – District General Hospital
N/A – Not applicable

	Q1. How does your Primary Care Trust ensure that General Practitioners and other community staff receive regular updating in transfusion practice?			
PCT	GP / Medics.	Nursing staff	Phlebotomists	Other
A	No training given	By TP from local DGH	Not stated	Porters and drivers
B	Initial submission of data was corrupted and unreadable. Despite requests, this has not been re-submitted.			
C*	Community staff update (phlebotomy only)	Community staff update (phlebotomy only)	Community staff update (phlebotomy only)	Not applicable
D	Not stated	Via SLA with local DGH	Not stated	Not stated
E	No training given	By TP from local DGH	Not stated	Not stated
F	None at present, but being planned	By PCT Training & Development department and also 'Learnbloodtransfusion' e-learning programme. GP training being arranged by TPs from local DGHs.	Not stated	Not stated
G	GPs have access to an online workbook	By TP from local DGH	Not stated	Not stated
H	This PCT states that no blood transfusions are given in either it's in-patient facility or in primary care; and no blood samples for pre-transfusion testing are ever taken in those locations.			
I	None at present	Shared between PCT Training and Development Unit, and two TPs from neighbouring DGHs.	Not stated	Not stated

*No blood transfusions are given in this PCT, but pre-transfusion blood samples are taken.

	Q2. Please indicate which topics are covered by this training				
PCT	Pre-op optimisation of Hb (GPs & Medics. Only)	Pre-transfusion sample taking and labelling	Appropriate prescription and use of blood (GPs & Medics only)	Administration of blood (primarily Registered Nurses)	Monitoring the transfused patient
A	No	Yes (for directly employed staff)	No	Yes (for directly employed staff)	Yes (for directly employed staff)
B	Initial submission of data was corrupted and unreadable. Despite requests, this has not been re-submitted.				
C*	N/A	Yes	N/A	N/A	N/A
D	Not stated	Yes	Not stated	Yes	Yes
E	No, but being planned	Yes	No, but being planned	Yes	Yes
F	Not stated	Yes	Not stated	Yes	Yes
G	No	Yes	Yes	Yes	Yes
H	This PCT states that no blood transfusions are given in either it's in-patient facility or in primary care; and no blood samples for pre-transfusion testing are ever taken in those locations.				
I	No	Yes	No	Yes	Yes

* No blood transfusions are given in this PCT, but pre-transfusion blood samples are taken.

PCT	Q3. How often is this training given?	Q4. Do you have competency assessment in place for pre-transfusion sample taking and labelling?
A	Annually	No – but being developed by DGH TP
B	Initial submission of data was corrupted and unreadable. Despite requests, this has not been re-submitted.	
C*	Not stated	Not stated
D	Annually	No
E	Annually	Yes
F	Annually	Yes
G	Annually	No
H	This PCT states that no blood transfusions are given in either it's in-patient facility or in primary care; and no blood samples for pre-transfusion testing are ever taken in those locations.	
I	'Regularly'	No

* No blood transfusions are given in this PCT, but pre-transfusion blood samples are taken

Conclusion

Transfusion training and education throughout the PCTS in the south west region appears fragmented and unco-ordinated, with a very few notable exceptions. However, this study had severe limitations (see below) as no data was forthcoming from five out of the thirteen PCTs approached.

Points to note

Some PCTS have input from more than one Transfusion Practitioner with regard to transfusion education, as their boundaries encompass two or more major hospitals (often in different counties).

Getting much of this information was a difficult and laborious job – possibly due to the fact that some of the PCTs are still defining their structures following the reorganisation in late 2006.

Lack of response to many of the questions in the survey limits its usefulness.

Despite repeated requests, four PCTs chose not to communicate or respond at all.

Recommendations

- Via Strategic Health Authority channels, relevant GP educational events and initiatives need to be identified with a view to transfusion input.
- In association with the above, the profile of blood transfusion (and related staff education / training requirements) needs to be raised across the PCTs within the South West Strategic Health Authority / South West Regional Transfusion Committee boundaries.
- Greater awareness of the availability of transfusion e-learning packages needs to be promoted amongst the PCTs. This includes both the 'Learnbloodtransfusion / ORAS' package www.learnbloodtransfusion.org.uk and, particularly suitable for GPs, the package available on www.doctors.net.uk
- Consideration should be given with regard to organising further regional transfusion education events aimed at relevant community staff, other than GPs and medical staff.