NSQHS Blood Management Standard: NSW Resources and CEC Guidance

Action	Key tasks	NSW resources and CEC guidance
Clinical governance and quality improvement to support blood management		
Integrating clinical governance		
7.1 Clinicians use the safety and quality systems from the Clinical Governance Standard when: a. Implementing policies and procedures for blood management b. Managing risks associated with blood management c. Identifying training requirements for blood management	• Ensure that governance structures are in place for blood management • Develop and implement policies and procedures for blood management • Use organisation-wide risk management systems to identify, monitor, manage and review risks associated with blood management • Deliver or provide access to training on blood management based on the specific needs of the clinical workforce.	**PD2018_042 Blood management which mandates compliance with**: 1. The Australian New Zealand Society of Blood Transfusion (ANZSBT) Guidelines for Administration of Blood products. 2. The Patient Blood Management Guidelines Modules 1-6. Guidance for establishing a Blood Management Committee is outlined in the ANZSBT Guidelines for Administration of Blood products Section 9.1 NSWH Consent to Medical and Healthcare Treatment Manual 1. This mandates the use of the state based generic Consent to medical Treatment forms for consenting to transfusion. HETI Training Matrix outlines the Blood Safe eLearning training modules assigned to NSW Health employees. To be read in conjunction with The Blood Management PD. **Risk register:** Facility level - check that any risks associated with blood management are documented and reviewed regularly according to Risk Management - Enterprise-Wide Risk Management Policy and Framework – NSW Health

Action		Key tasks	NSW resources and CEC guidance
Applying quality improvement systems			
7.2	The health service organisation applies the quality improvement system from the Clinical Governance Standard when: a. Monitoring the performance of the blood management system b. Implementing strategies to improve blood management and associated processes c. Reporting on the outcomes of blood management	• Review, measure, and assess the effectiveness and performance of, organisational and clinical strategies for blood management • Implement quality improvement strategies for blood management based on the outcomes of monitoring activities • Provide information on the outcomes of quality improvement activities to the governing body, the workforce, consumers and other organisations.	QARS Transfusion documentation and PBM audit questions can be benchmarked across NSW NSW PBM QARS Audits: Module 2 – Perioperative Questionnaire ID 5666 Module 3 - Medical Questionnaire ID 5667 NSW Transfusion Documentation QARS Audit Questionnaire ID 5663

Action		Key tasks	NSW resources and CEC guidance
Partnering with consumers			
7.3	Clinicians use organisational processes from the Partnering with Consumers Standard when providing safe blood management to: a. Actively involve patients in their own care b. Meet the patient's information needs c. Share decision-making	• Review strategies in the Partnering with Consumers Standard to inform the implementation of actions in the Blood Management Standard • Provide information to patients about patient blood management principles, the risks and benefits of using blood and blood products, and all treatment options, that is tailored to their • Specific needs and level of health literacy.	CEC Patient information brochures: • Transfusion – translations available • Iron deficiency • These brochures underwent formal consumer consultation The consent process is governed by _Blood Management NSWPD2018_042_ and _NSWH Consent to Medical and Healthcare Treatment Manual_ There are specific requirements related to consenting to and declining blood and blood products that are beyond the scope of this document to outline. If advice beyond that of the facility Blood Management Committee is required, Blood Watch can provide assistance.

Action	Key tasks	NSW resources and CEC guidance
Prescribing and clinical use of blood and blood products		
Optimising and conserving patients' own blood		
7.4 Clinicians use the blood and blood products processes to manage the need for, and minimise the inappropriate use of, blood and blood products by: a. Optimising patients' own red cell mass, haemoglobin and iron stores b. Identifying and managing patients with, or at risk of, bleeding c. Determining the clinical need for blood and blood products, and related risks	• Develop effective PBM strategies • Identify, develop and implement policies, procedures and protocols for PBM to optimise and conserve the patient's own blood, and manage the need for blood and blood products • Develop and implement education activities for PBM to optimise and conserve the patient's own blood, and manage the need for blood and blood products • Establish perioperative standard practice for assessment and management of anaemia • Implement processes to communicate elective surgical time frames to patients' primary carers to enable effective anaemia management in the primary care sector, if possible.	**PD2018_042 Blood management** Results and reports from QARS PBM audits: (Perioperative ID 5666 and Medical ID 5667) Blood Safe eLearning: • PBM Course (Available but not mandated) • PBM videos **Australian Commission for Safety and Quality in Health Care PBM Collaborative** Multiple resources from participating sites Australia wide

Action		Key tasks	NSW resources and CEC guidance
Documenting			
7.5	Clinicians document decisions relating to blood management, transfusion history and transfusion details in the healthcare record	• Document comprehensive information, including blood use, transfusion history and transfusion details, before, during and after transfusions • Develop and implement education activities for the workforce responsible for PBM about documenting transfusion of blood or blood products in the patient's healthcare record, recognising and responding to adverse transfusion reactions, and documenting adverse reactions in the patient's healthcare record.	NSW Transfusion Documentation QARS Audit Questionnaire ID 5663 Blood Safe eLearning: • PBM Course (Available for use but not mandated) • PBM videos

Action		Key tasks	NSW resources and CEC guidance
Prescribing and administering blood and blood products			
7.6	The health service organisation supports clinicians to prescribe and administer blood and blood products appropriately, in accordance with national guidelines and national criteria	• Develop and implement policies, procedures and protocols that are evidence based, and in line with national guidelines and criteria for the prescription and administration of blood and blood products • Ensure that clinicians have the necessary skills to prescribe and administer blood and blood products • Develop and implement education activities for the prescription and administration of blood and blood products	**PD2018_042 Blood management** NSW PBM QARS Audits: Module 2 - Perioperative ID 5666 Module 3 - Medical ID 5667 Blood Safe eLearning courses and resources • PBM videos **HETI Training Matrix** for Clinical Transfusion Practice course om MHL Other local requirements vary

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Reporting adverse events			
7.7	The health service organisation uses processes for reporting transfusion related adverse events, in accordance with national guidelines and criteria	Capture blood-related incidents in incident management and investigation systems, and provide reports from these systems to the blood management governance group to inform activities in the blood management quality improvement system (see Action 7.2) • Provide a summary analysis of blood- and blood product–related incidents to the highest level of governance in the organisation for review and action • Report transfusion adverse events in accordance with regulator and supplier requirements, as well as local policies and procedures • Develop and implement education activities for reporting transfusion-related adverse events in accordance with national guidelines and criteria.	Information for Clinicians IIMs Haemovigilance templates • Provides detailed information about haemovigilance activities at the NSW level • Facility requirements • Tools to support. NSW Haemovigilance report 2005-2016

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7.8	The health service organisation participates in haemovigilance activities, in accordance with the national framework	Identify and implement processes to take part in haemovigilance programs for health service organisations, local health networks or private hospital groups, state or territory programs or national programs • Develop and implement education activities for haemovigilance programs.	All transfusion related incidents and near miss events should be notified through IIMs or ims+ for investigation, management and analysis at local facilities. See PD2018_042 Blood Management for detailed information. The NSW Clinical Excellence Commission, via the Blood Watch Program is responsible for: • Collating and reporting haemovigilance activities in NSW for the National Haemovigilance Program, as per the Australian haemovigilance minimum dataset. • Undertaking analysis of state-wide events

Action		Key tasks	NSW resources and CEC guidance
Managing the availability and safety of blood and blood products			
Storing, distributing and tracing blood and blood products			
7.9	The health service organisation has processes: a. That comply with manufacturers' directions, legislation, and relevant jurisdictional requirements to store, distribute and handle blood and blood products safely and securely b. To trace blood and blood products from entry into the organisation to transfusion, discard or transfer	Regularly review the risks associated with traceability, receipt, storage, collection and transport of blood and blood products • Provide training to the workforce on safe blood management • Review policies, procedures and protocols for addressing risks identified with receipt, collection, storage, handling and transport of blood and blood products, and review reports from inventory management and supply chain systems.	• PD2018_042 Blood Management

Action		Key tasks	NSW resources and CEC guidance
Availability of blood			
7.10	The health service organisation has processes to: a. Manage the availability of blood and blood products to meet clinical need b. Eliminate avoidable wastage c. Respond in times of shortage	Regularly review the risks associated with availability of blood and blood products, including minimising wastage and responding in times of shortage, and develop policies and processes to respond to these risks • Provide training to the workforce about ensuring blood availability • Record wastage in a system and monitor wastage reports • Regularly review inventory requirements, and manage blood and blood products to ensure availability • Identify, develop and implement contingency arrangements, including planning for times of supply shortage, considering state or territory and national arrangements.	• NSW Wastage data presented as an excel file forwarded to LHDs from the MoH on a monthly basis. • BloodNet Reports via the BloodPortal On demand reports Detailed wastage data presented in tables and graphs with peer, state and national benchmarks • **Non-metro facilities only** Recommendations from the NSW Rural and Remote Blood Inventory Working Group – Contact the CEC or OCHO for more information • Refer to pathology provider for each individual facility for contingency arrangements

More information

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