

Patient Blood Management Working Group of the National Blood Transfusion Committee

Terms of Reference

1.0 Background

Blood transfusion in the UK is safer now than it has ever been but like all health interventions, transfusion is not risk-free. National and regional audits show that transfusion practice is variable and that inappropriate use of all blood components is 20% or higher. There are also many potential drivers for increased blood use including the ageing population and new therapies in cancer, transplantation and many other fields of medicine.

'*Patient Blood Management*' is an evidence-based, multidisciplinary approach to optimising the care of patients who might need transfusion. By promoting strategies for blood avoidance and measures to reduce the inappropriate use of red cells, platelets and fresh frozen plasma, and increasing the use of alternatives to transfusion and, this work aims to improve patient care and reduce costs to trusts. It firmly places the patient at the centre of a decision making process that only considers transfusion when there is clear evidence that it is the best therapeutic treatment available and all other options have either been used or systematically considered and excluded.

A Patient Blood Management Seminar was held at the Royal College of Pathologists on 18th June 2012. The event was intended to build on the work of successive *Better Blood Transfusion* initiatives over the last 15 years, showcase examples of practical and successful initiatives which can be replicated, and provide opportunities in workshops for the development of ideas for the implementation of Patient Blood Management measures.

2.0 Remit

- 2.1 To provide recommendations to the NHS for the implementation of Patient Blood Management from the presentations and workshops at the Seminar and publications on this subject.
- 2.2 To oversee audits of the use of Patient Blood Management, both current practice and follow-up audits to assess the response to recommendations to increase Patient Blood Management activities.
- 2.3 To develop national benchmarking programmes for blood utilisation and other aspects of Patient Blood Management.
- 2.4 To monitor progress in the implementation of Patient Blood Management.
- 2.5 To support the work of other groups for the development of guidelines relating to Patient Blood Management.

3.0 Expected Output

- 3.1 To develop initial recommendations to the NHS for the implementation of Patient Blood Management by the end of December 2012.
- 3.2 To conduct an initial audit of Patient Blood Management measures by October 2013.

- 3.3 To develop national benchmarking programmes for blood utilisation and other aspects of Patient Blood Management by December 2013.
- 3.4 To develop detailed recommendations for the implementation of Patient Blood Management and for performance measures to monitor progress by the end of December 2013.
- 3.5 To support NICE in its development of guidelines and quality standards.

4.0 Initial Membership

Professor Adrian Newland, Chair NBTC and Consultant Haematologist, Barts Health NHS Trust

Mr Graham Donald, Patient Representative

Dr Alwyn Kotze, Consultant Anaesthetist, Leeds

Mr Toby Richards, Consultant Vascular Surgeon and Senior Clinical Lecturer, UCL

Dr James East, Consultant Gastroenterologist, Oxford University Hospitals

Renal physician (TBA)

Dr Megan Rowley, Consultant Haematologist, NHSBT and St.Mary's, London

Dr Kate Pendry, Consultant Haematologist, NHSBT and Manchester Royal Infirmary

Dr Shubha Allard, Consultant Haematologist, NHSBT and Barts Health NHS Trust

Professor Mike Murphy, NHSBT and Oxford University Hospitals

Lynne Mannion, Transfusion Practitioner

Stephen Basseby, Blood Transfusion Laboratory Manager

Rebecca Gerrard, NHSBT Head of Better Blood Transfusion

Teresa Allen, NHSBT Assistant Director Customer Service

Kenneth Halligan, Patient Representative

Victoria Griffin, NHSBT Communications.

12 November 2012