



**South East Regional Transfusion Committee**  
Presents:

# Shared Learning from the Amber Alert

held on  
Wednesday 3 May 2023

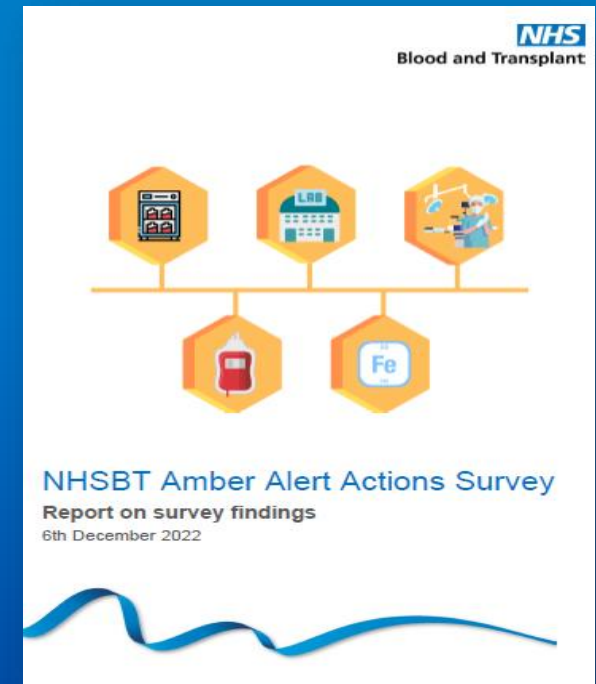
Sophie Staples, Lead Specialist,  
Blood Stocks Management Scheme, NHSBT

# NHSBT **Amber Alert** Hospital Actions Survey - Overview

Sophie Staples

Lead Specialist Blood Stocks Management Scheme


**South-East RTC Education Event 2023**



**Caring Expert Quality**


# Overview

- Summary of results from the Amber Alerts Action survey conducted November 2022.
- Key recommendations and progress update

  
Blood and Transplant

**Blood stocks are low!**

**Now at AMBER status**  
The Emergency Blood Management Group has been activated and laboratory stockholding will be reduced.

Full details can be found in the **NBTC red cell and platelet shortage plans** here: 

**Key actions:**

- Prioritise urgent blood transfusions
- Minimise blood reservation periods and number of units reserved for patients.
- Escalate any avoidable component wastage to your trust management

**Consider:**

- cancellation of elective surgery as set out in the blood shortage strategy
- transfusion triggers and use cell salvage if available
- the availability of stock in management of major haemorrhage

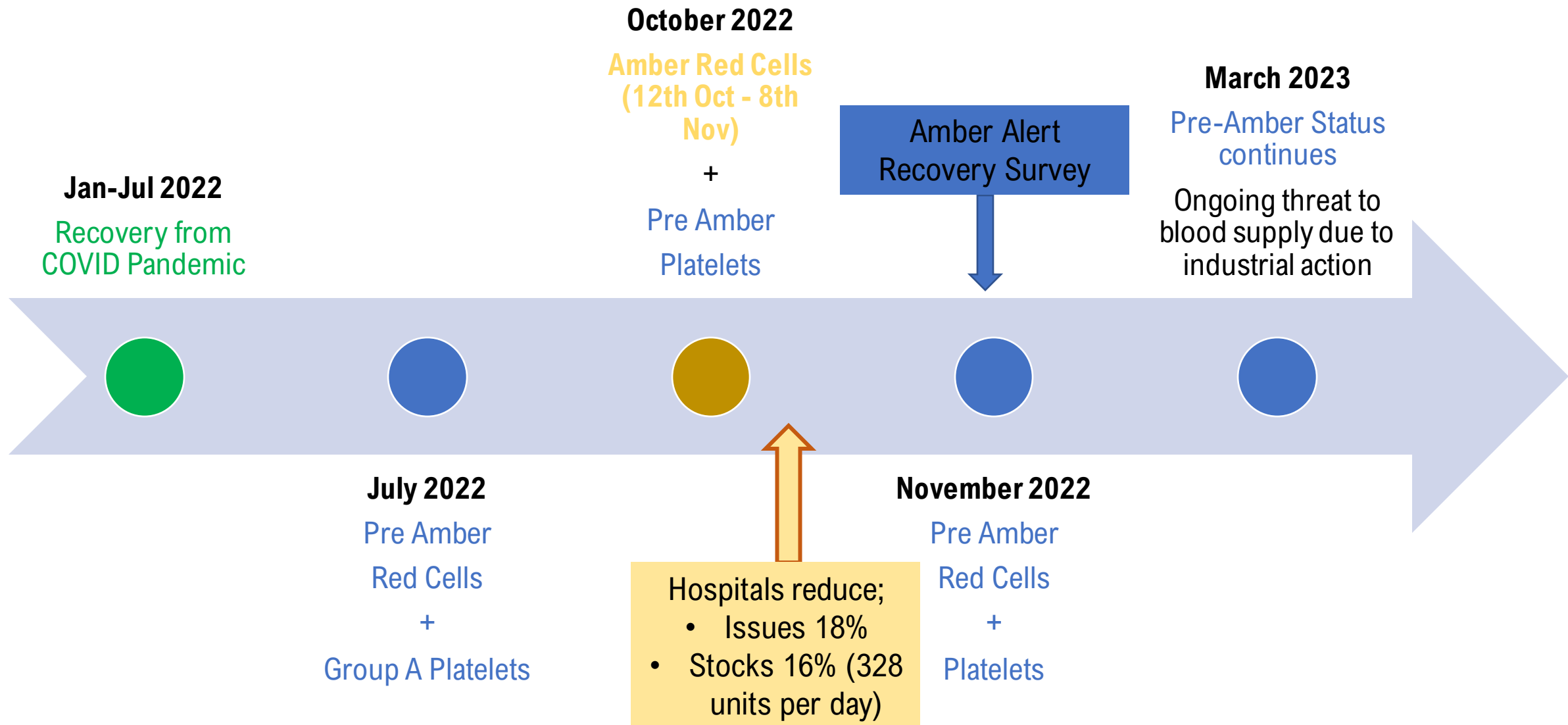
  


**Blood stocks are critically low**

Visit [blood.co.uk](https://blood.co.uk) to find out how you can help



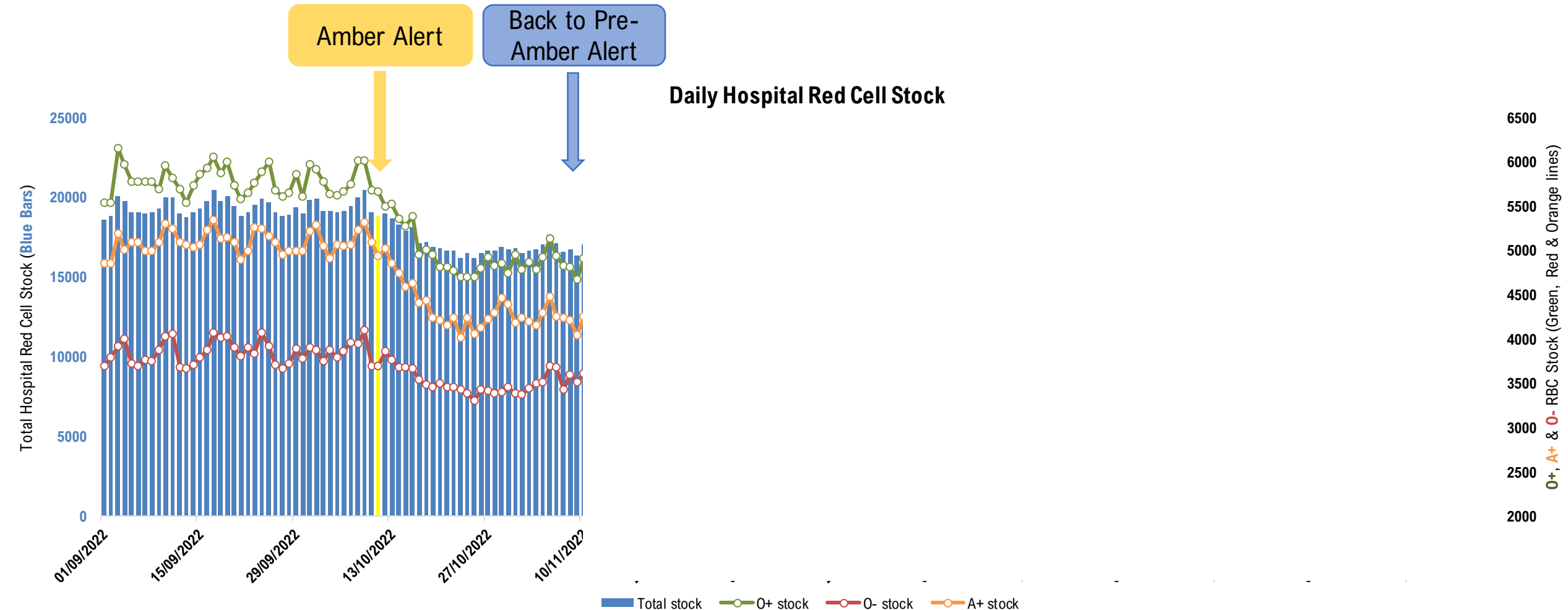
# Stock shortage + Amber alert



# Hospital Red Cell Stock levels – Monitored Daily



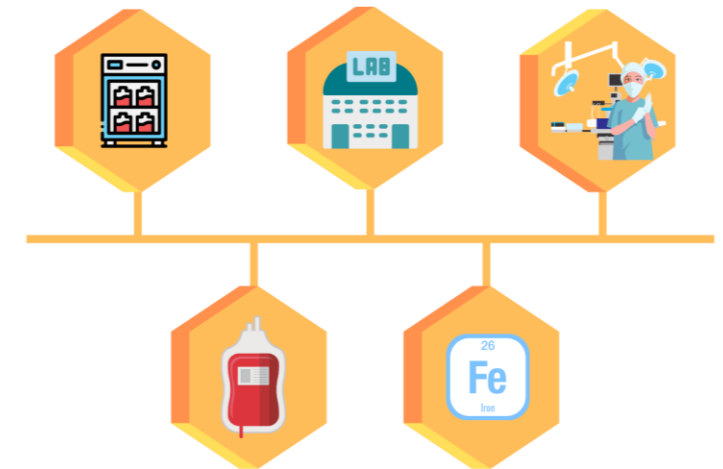
**Current Hospital Red Cell stock** holding (represents **daily** average stock data per user group submitted)



# Background to survey



- NHSBT unsure what stock reduction measures hospitals had used and were most effective to achieve the lower levels of issues + wastage during the 4 weeks.
- Concern that hospitals would immediately return to pre-shortage levels of stock and NHSBT would struggle to keep up with supply.
- Decision made to ask hospitals about their experience and their opinion on whether the reductions were sustainable.
- Given the proximity in time to the end of the Amber Alert, the survey needed to be composed quickly and quick to complete for hospital staff.
- The survey was launched the day after the Amber Alert for red cell shortages was stood down (9<sup>th</sup> November) and was sent to all our direct customers - n=251 hospitals. It was open for two weeks.



# Our approach

- Key areas identified to gain feedback;

Laboratory stock  
management

Clinical practice

NHSBT  
resources and  
communications

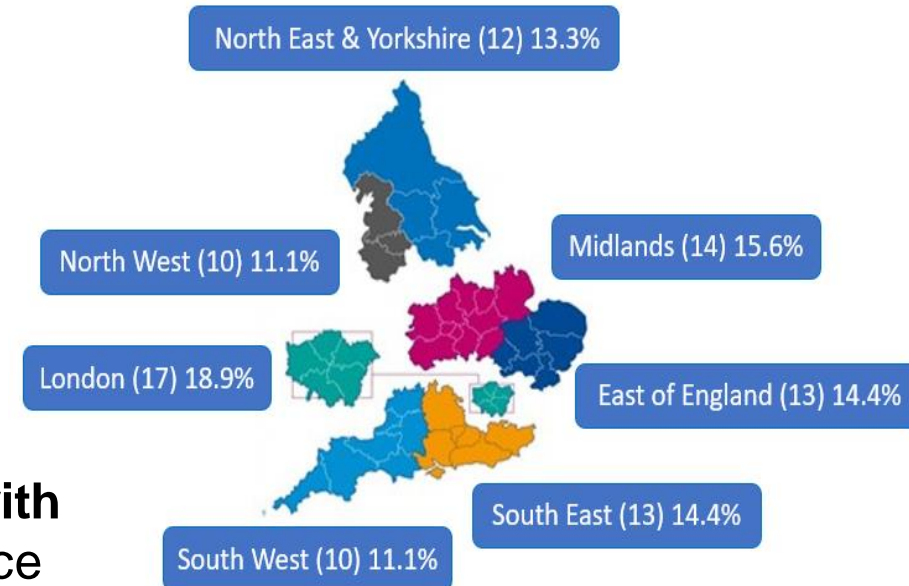
- Quantitative analysis of subjective answers – Likert scale
- Hospital laboratory staff involved in the design to ensure usability and length was appropriate



# Response Rate



- Overall, **90 individual sites responded**, representing a response rate of **35.9% (90/251)**.
- The response was much higher from very high (54.3%) and high (48.1%) user hospitals. Overall the respondent cohort account for approx. **45% of total red cell issues**.
- There were insufficient responses to draw many firm conclusions from this survey, but the **responses received were consistent with many of the stock reduction assumptions** & informal intelligence NHSBT had received.
- It is possible hospitals that had been less proactive in their response to the alert may have been less likely to complete.





# Key Findings

Monitoring, reviewing and  
challenging RBC requests,

**78%**

Agree this had a positive  
impact



Sustaining changes made to  
red cell stock levels in  
laboratories,

**73%**

had positive responses



Stricter adherence to RBC  
triggers + increased single  
unit transfusion,

**79%**

Agree this had a positive  
impact



Delaying or rescheduling  
surgery

**44%**

Neutral/Not Done

**16%**

Disagreed that this had an  
effect



# Key Findings

**Sustainability of gains made  
across PBM measures**

**85%**

Agree gains are sustainable



**NBTC Emergency Planning  
Guidance and Resources,**

**90.3%**

had positive responses to  
resources available



**NHSBT Communications**

**93%**

Agree NHSBT helped to  
support them implement their  
Amber Alert actions



**Increased use of TXA or Cell  
Salvage**

**45% + 40%**

Not known

**31% + 23%**

TXA + Cell Salvage increased



# Engagement with senior management

‘During the Amber Alert, support and engagement from hospital senior management and senior clinicians [E.g., Medical Directors, Head of Nursing, Departmental Clinical Leads/ Consultants, Directors of Operations] has had a positive impact on reducing red cell requests/ demand within our hospital’



**Input of senior management  
/ clinicians on reducing red  
cell demand**

**89%**

Agree this had a positive  
impact

**3%**

Disagreed that this had a  
positive impact

- 🔴 Review of HTC membership, in consultation with hospital senior management / clinicians may help hospitals to maintain the momentum of positive change that has arisen during the Amber Alert.

# Transfusion Staff Empowerment

During the Amber Alert, monitoring, and review of requests by Biomedical Scientist (BMS) staff and/or clinical members of the Transfusion Team, and challenging where appropriate, had a positive impact on reducing red cell requests/ demand within our hospital

**BMS staff reviewing and  
challenging RBC requests**

**78%**

Agree this had a positive  
impact

**2%**

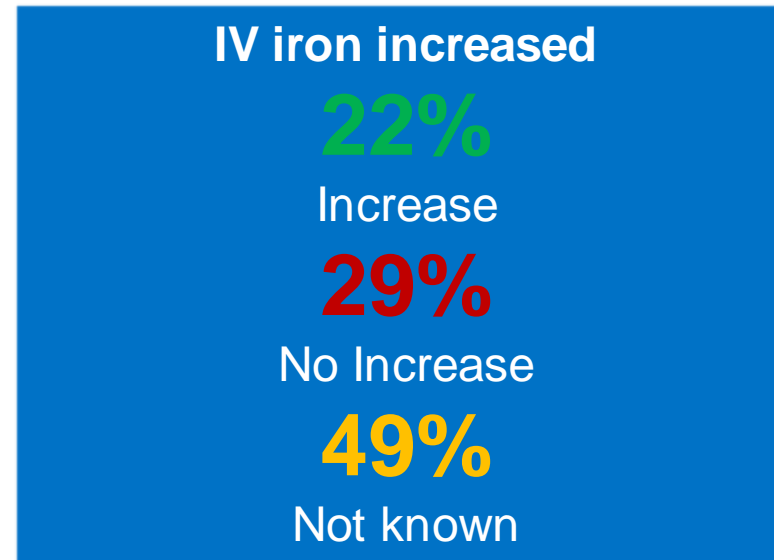
Disagreed that this had a  
positive impact



- 🔴 Work has continued to support new and developing BMS staff to review and challenge requests
- 🔴 Support from senior transfusion staff has helped.

# IV Iron

Has the use of intravenous iron increased at your hospital during the amber alert?



## Key points on IV Iron usage during the Amber Alert

- Given the time frames needed for haemoglobin to increase following IV Iron infusion, it is likely that the impact of IV Iron usage on red cell demand was not significant during the Amber Alert but may have helped with uptake longer term.
- Anecdotal reports during the Amber Alert suggested that ordering of IV iron from suppliers went up noticeably.**

# Comments

- Overall, the survey results were very positive in terms of the feelings about sustainability of positive change, the resources made available to teams and communications.
- All the feedback comments were themed and this section of the report provides useful additional information & in some cases a more nuanced perspective on some of scored results.

“Reconsider the elective op cancellation wording  
- concentrate instead on pre-operative  
optimisation i.e., elective surgery with a risk of  
bleeding should not go ahead if Hb is <130 until  
it has been investigated and pre-optimisation  
attempted”

“There seemed to be a focus on planned  
revisions and other surgeries that are not  
generally high blood users and less on  
changes to the way medical patients  
requiring transfusion are managed.”



# Feedback



“Every hospital wanted to know what the other hospitals were doing therefore regional Teams/Zoom meetings should be set up, organised by the RTC Administrator and chaired by the regional NHSBT Patient Consultant. The regional meetings could then feed into a national meeting, with nominated representatives & regional NHSBT Patient Consultant so a national picture was known by all. Feedback from ICU is there is a national approach to bed management, and this should be possible for blood transfusion”

“When the pre-amber alert was declared in July it felt like there wasn’t a plan from NHSBT. It would’ve been better if it had been stated that the situation would be reviewed (every 4 weeks for example) and then update with what NHSBT have been doing to manage the situation”

“Communication did not occur on a frequent enough basis - we were having daily meetings but not receiving any guidance from NHSBT”

Recommendation	Progress April 2023
<ul style="list-style-type: none"> <li>A planned stakeholder event with both internal and external participants</li> </ul>	<p>Collaboration with internal and external stakeholder has continued post amber alert and fed into the reviews and recommendations made in the National Blood shortage plans. It has been agreed that lessons learnt from PBM Amber Alert Survey to be fed back to other stakeholders within NHSBT.</p>
<ul style="list-style-type: none"> <li>BSMS support document for inventory management during a shortage to cover all components</li> </ul>	<p>Comprehensive stock management guide for shortages available on BSMS website</p>
<ul style="list-style-type: none"> <li>The National Red Cell Shortage Plan should be reviewed and updated to include additional guidance</li> </ul>	<p>The NBTC National Red Cells Shortage plan has been reviewed and updated with input from key stakeholders. An update to the National Platelet shortage plan has also been drafted and sent to NBTC for approval.</p>
<ul style="list-style-type: none"> <li>Survey results and feedback should be reviewed so that ongoing actions to maintain PBM benefits can be prioritised</li> </ul>	<p>PBM to include this in coming workplan 23/24</p>
<ul style="list-style-type: none"> <li>Communication pathways for key communications to hospitals should be reviewed and documented</li> </ul>	<p>NHSBT Communications Protocol has been updated including defining the communication pathways. Business continuity plan for all teams within the directorate that contribute to NHSBT blood shortage responses.</p>
<ul style="list-style-type: none"> <li>Target any key areas where additional information gathering/national audit activity should be focused</li> </ul>	<p>Further discussion at Senior Team Meeting scheduled.</p>
<ul style="list-style-type: none"> <li>The process for Ad-Hoc delivery charges should be reviewed to evaluate if there are any measures that can be taken to financially incentivise hospitals to maintain the changes</li> </ul>	<p>This was escalated and the decision was that routine ad-hoc charges would not change however NHSBT would consider introducing temporary incentives if another blood alert was called. The actual incentive offered would be determined on a case by case basis depending on the severity of the incident.</p>



# Where are we now?



HOSPITALS AND SCIENCE

Home

Diagnostic services

Patient services

Components

Training

Clinical guidelines

Business continuity

Audits

Customer Service

13 April Blood supply update: continuing Pre-amber status for platelets and red cells

We need to remain in Pre-amber, please maintain actions for platelets and red cells in Pre-amber, and continue to implement Patient Blood Management recommendations

[Read our communication \(PDF 124KB\)](#)

Home / Business continuity / Blood stocks

Blood stocks

Stock status

Red cell status

Red cell status today is Pre-Amber

Platelet status

Platelet status today is Pre-Amber

NHSBT guidance

For hospital laboratories, all patients and those requiring a chronic transfusion programme.

Amber recommendations (PDF 345KB)

Pre-amber recommendations (PDF 345KB)

Questions and Answers

[Moving from amber to pre-amber \(PDF 104KB\)](#)

Guidance from other organisations

To: Chief Executive, Medical Director, Transfusion Laboratory Manager, Transfusion Practitioner, Chair of RTC, Chair of HTC, Consultant Haematologist with Responsibility for Blood Transfusion and England EPRR

29 March 2023

### Blood supply – Thank you for your support

Dear Colleagues,

We want to take this opportunity to thank you for all your support over the past six months in conserving blood components so we can make sure we have them available for the patients who need them most.

For us, this has been the most difficult period of the pandemic. We have faced staffing shortages, industrial action, severe weather, along with other winter pressures; all of which have meant we have found it difficult to collect as much blood as we need.

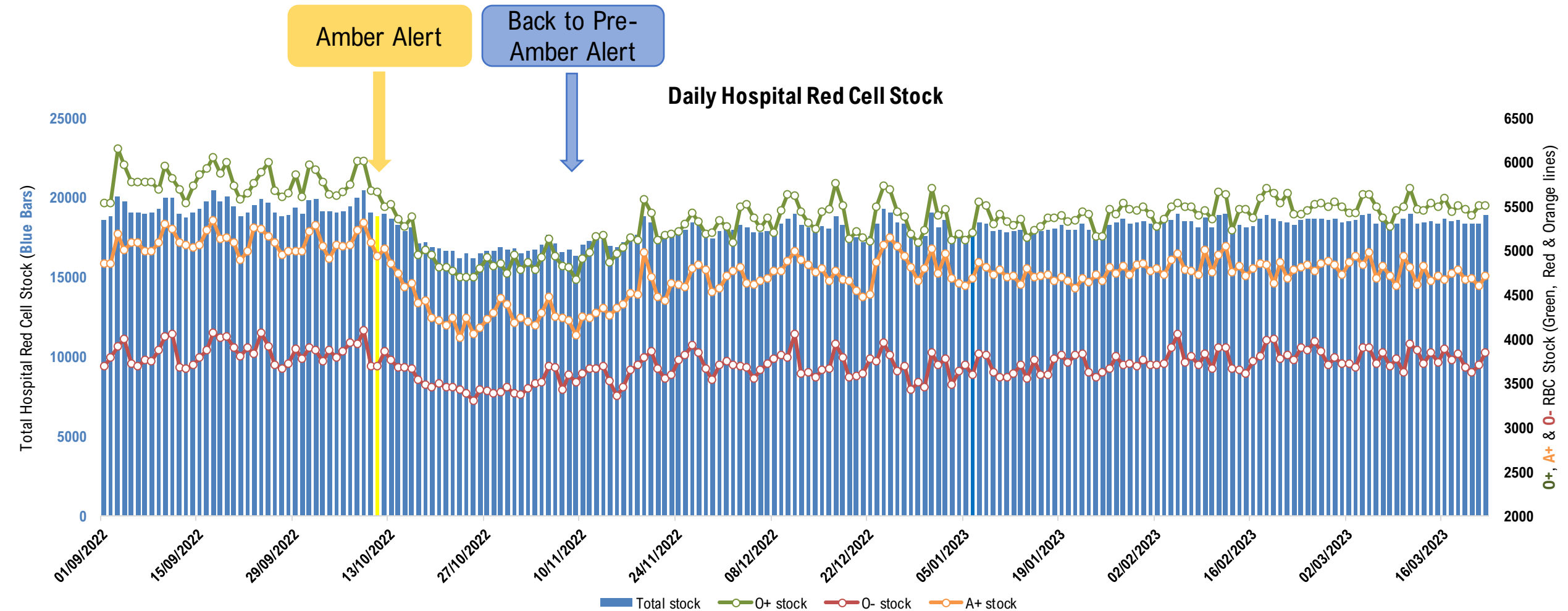
Your co-operation in reducing demand and managing your own stocks has helped enormously and undoubtedly stopped us needing to call further amber alerts on red cells and platelets.

For the time being we will remain in pre-amber and ask that you continue to conserve stocks in-line with our communication dated 16 March 2023.

We want to reassure you that we are also working incredibly hard every day to build up stocks. Measures we have taken (and continue to take) to increase stocks include:

- PR campaigns to encourage new donors to give blood – e.g., 250,000 people signed up to give blood last year but did not donate
- Working with the BBC to promote awareness by broadcasting live from our manufacturing site in Bristol and filming Naga Munchetti donating blood
- Marketing and social media campaigns to encourage new and existing donors to donate
- Direct marketing, email, phone calls and WhatsApp to specific blood groups when they are most in need
- Carefully managing appointment bookings so we are collecting the blood we need most

# Hospital Red Cell Stock levels – Where are we now?



**THANK YOU!**

*Any Questions?*

