

# A Collaborative Approach to Stock Platelet Holding.

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## **Background – Early 2018**

- No Platelets stocked on site
- > Ordered as required and collected ad-hoc / via blue light.
- All activations of MHP/MOH ordered 2 x group specific platelets via blue light.
- > Expanding Haematology service due to NGS Macmillan unit.
- $\succ$  Multiple afternoon orders for Haem in-patients.
- NHSBT introduction of £11 ad-hoc order charge, pressure to reduce cost.

## **Initial discussions /actions**

>NHSBT representation at HTC offered assistance.

>Recognised improvements possible.

>NHSBT assisted with data collection.

Laboratory review and data collection

 $\succ$ Presented at next months HTC.

## Initial findings

#### **Collection Charge**

Each collection costs CRH £11 plus taxi cost of £24. 2017-18 cost to the trust was around £24k.



#### **Type of Patient**

89% of platelet transfusions in2017 were for Haem inpatients,9% Haem day case

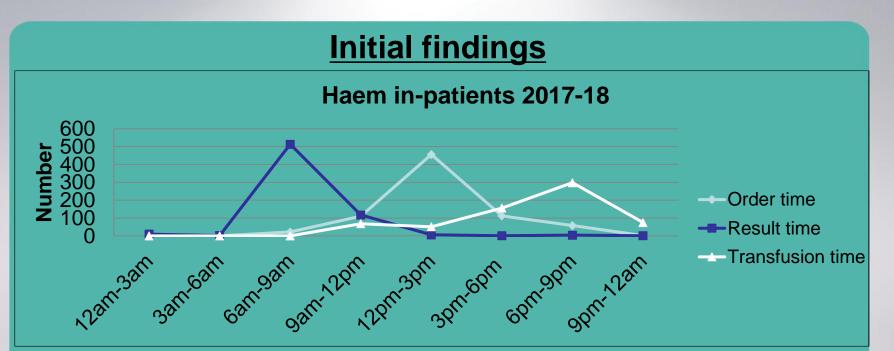
#### Issue / Waste data

728 platelets ordered in 2017-18.

27 were wasted, most ordered for MHP/MOH.

#### Order times

Most orders received by the lab in the afternoon. Frequent multiple orders in one day, each ad-hoc order £11.



- Trust Listening in Action (LIA) project with lead from Haem Cons and ward Matron.
- Identified issue with accessing provisional results on the ward.
- Majority of Tx occurring after 19:30, pressure on evening shift.

# Continuing discussions

Action	
Use 'draft' order in OBOS	Collate the platelet orders and use the draft funciton in OBOS to capture all requests.
Delivery Time	Current Bank arrives 09:45, cannot anticpate Plt orders for the day. NHBST agreeed to take the proposal for consideration.
Increase stock holding	Proposed we increase red cell stock holding, particully over the weekend in order to avoid ad-hoc orders when minimal staff are in the lab. This could potentally increase red cell wastage.
NHSBT PM delivery	Data demonstrated the lab would benefit from a 2 <sup>nd</sup> delivery, however the optimal cut off /delivery time couldn't be determined. NHSBT agreed to take the proposal for consideration.
Hold stock Platelet	Hold an A D Pos HT- unit on site M-F Reduction in ad-hoc deliveries and reduce the number of transfusions after 7pm. The could potentally increase platelet wastage.
Reduce MHP requiment	Reduction in order from two to one plt units as a standard. Current protocol 4:4:1 and very few platelets transfused as part of MHP/MOH.



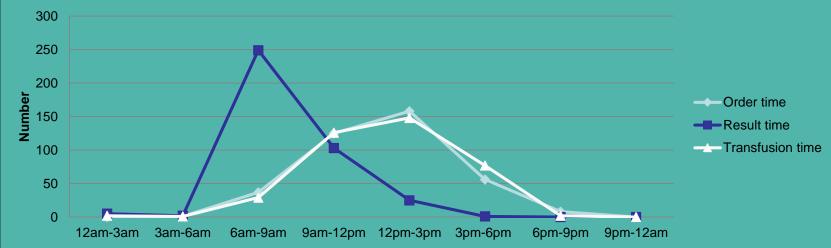
# Stock Platelet

- ✓ A D Positive HT-
- ✓ Worked with staff to only order this group as stock
- ✓ Only ordered to be on site M-F
- Only replaced by bank delivery or if ordering other components.
- ✓ Reduced time from order to transfusion.

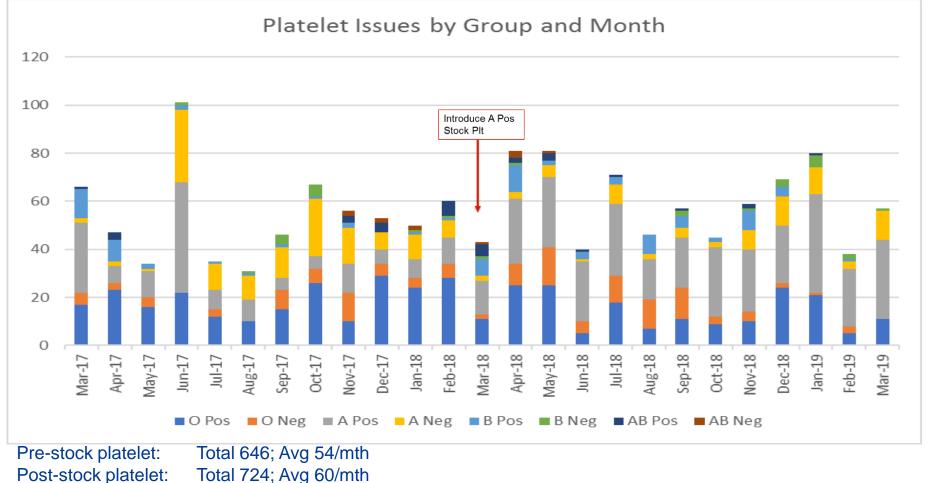
Good staff buy-in after training. Liked the reassurance particularly out of hours.

## Review October 2018

#### Haem in-patients April - Sept 18

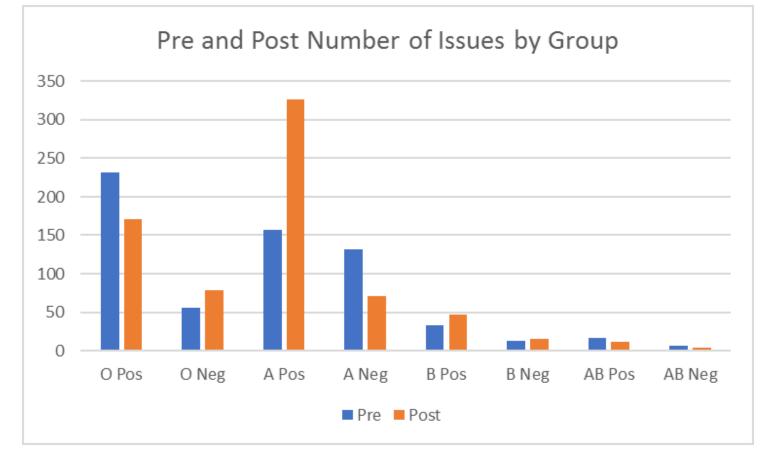


- LIA project successful.
- Orders all sent to the lab at the same time or notified if more to come.
- Reduced burden for evening shift staff

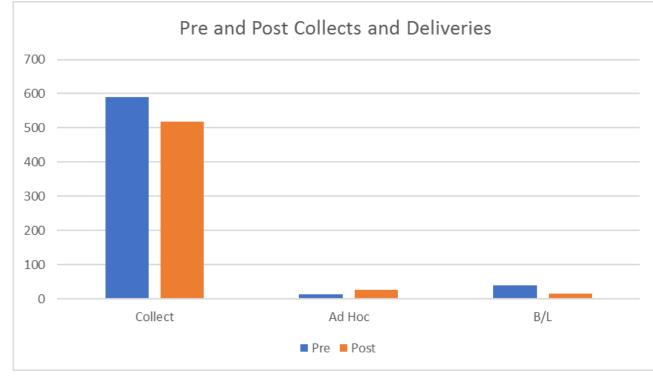


(Data excludes Mar 2018)

NB. Increase in issues mainly attributable to increased plt demand from haem/onc patients



A neg: Pre -132; post -71Benefits to NHSBT to help conserve the supply of this group.



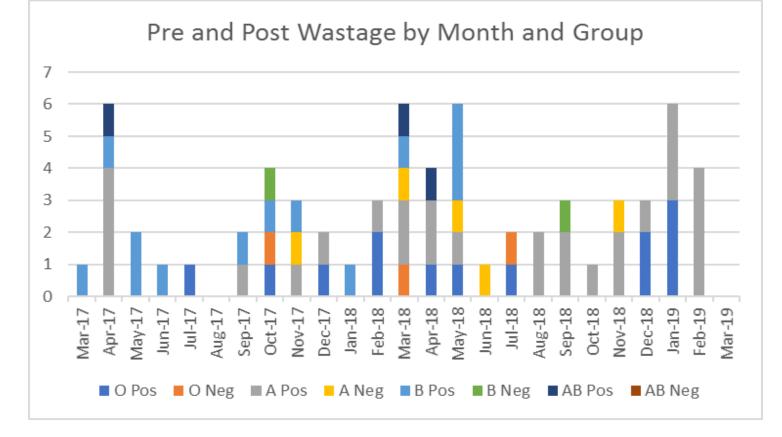
	Collect	Ad Hoc	B/L
Pre	590	14	40
Post	518	26	15

Wastage	Number	Cost
Pre	26	£ 4,632.92
Post	35	£ 6,505.10
Diff	9	-£ 1,872.18

Prices based on Pooled Plts

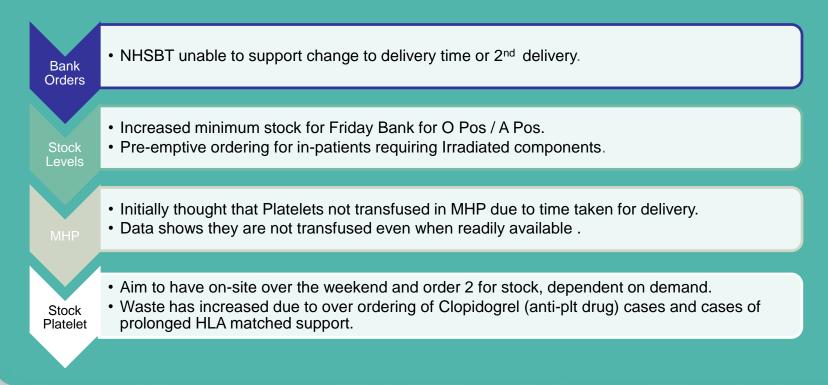
	Collect	Ad Hoc	B/L	Total Cost
Pre	£20,650.00	£ 730.10	£ 2,036.00	£ 23,416.10
Post	£18,130.00	£1,355.90	£ 782.25	£ 20,268.15
Diff	£ 2,520.00	-£ 625.80	£ 1,253.75	£ 3,147.95

Overall Cost Saving	
£1,275.77	



Pre stock platelet wastage: Post stock platelet wastage: (Data excludes Mar 2018) 26 units wasted over 12 months; Avg 2.2/mth 35 units wasted over 12 months; Avg 2.9/mth

## **Current Situation**



## **Future Developments**

#### Movement of short dated stock

 CRH part of Derbyshire Pathology, validation work planned with Derbyshire Blood Bikes

#### Pre thawed FFP

- Currently trailing 5 day storage.
- Reviewing MHP/MOH protocols



#### Review of ad-hoc orders

Profile what
components, day of
the week, and times of
orders

#### Increased use of <u>Vanessa</u>

 Monthly BSMS audit added to schedule. Looking at issued, wasted and transfused levels.

### **Acknowledgements**

- Delia Smith NHSBT
- CRH Blood Bank staff many hours of data collection.

