

Tips for good stock management post COVID-19

(1) Review your red cell stock levels regularly during times of fluctuating demand:

- Suggest review every 1-2 weeks to allow for delayed effect of stock reductions to manifest.
- Consider using Issuable stock index (ISI) as a guide to indicate if stockholding is rising (specifically for A, B & O red cells) which is available using Blood Stocks Management Scheme VANESA application *see appendix 1. Close monitoring of TIMEX wastage will also assist active stock management.
- Ensure communication of any changes is clear to all staff especially those working out of hours who may not routinely work within blood bank.
- (2) Consider the need to return to pre-COVID-19 stock levels or whether a reduced stock holding can be safely maintained. Assistance and guidance on suggested stock levels can be obtained from BSMS – please contact <u>BSMS@nhsbt.nhs.uk</u> if you would like support (please note some brief information will be requested to support data analysis and VANESA red cell stock and wastage data should be up to date)
- (3) Depending on distance from SHU, consider setting lower ideal stock levels the additional cost of transport is cheaper than discarding units.
- (4) Don't overstock for bank holidays and weekends usage is generally lower and encouraging staff working on a B/H to review and replenish as required during the morning saves holding unnecessary stock and prevents wastage.
- (5) With the exception of specialist children's and women's hospitals, all hospitals have patients who can receive K positive units. Requesting 100% of stock as K negative is not considered best practice and impacts on the blood supply for everyone.
- (6) Review emergency stock arrangements in remote fridges it may not be necessary to have emergency stock in all fridges.
- (7) Review your reservation period. Is it possible to return unrequired units more quickly to the laboratory?
- (8) Avoid requests for fresh blood unless there is a defined clinical requirement.
- (9) Keep close contact with external hospitals supplied by your trust and review their requirements in line with your own.
- (10) Where possible, be involved with your Trusts recovery plans and attempt to keep informed with services coming back online or increasing workloads.

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Appendix 1



Key:

Red line indicates selected hospital ISI from Sept 2019 to Aug 2020 Blue line indicates cluster (i.e. BSMS user category) average ISI from Sept 2019 to Aug 2020

Additional information

- Narrow cluster group by using minimum of BSMS RBC user category; additional clinical service filters can be added if applicable
- The selected hospital red line should ideally be below or close to the blue cluster line
- The impact of changes may take time to manifest so allow enough time for review if inventory levels are changed