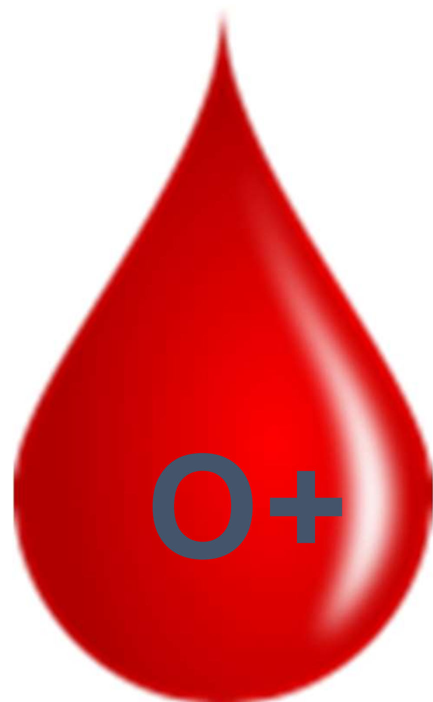
NHS

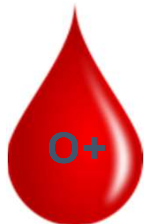
National Blood Transfusion Committee

# O Pos to Bleeding Men*

## National benchmarking survey results

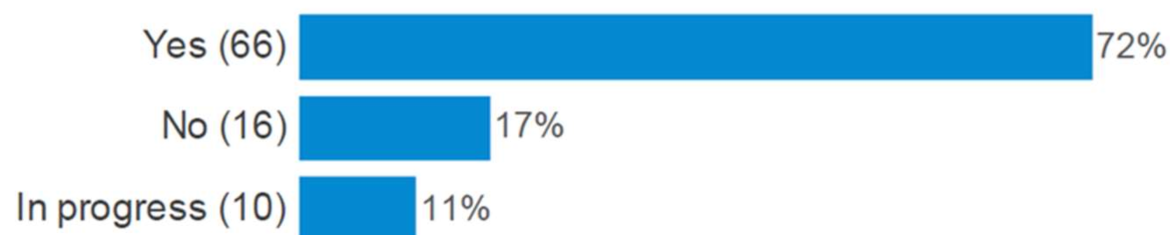



*Adult patients assigned as male at birth

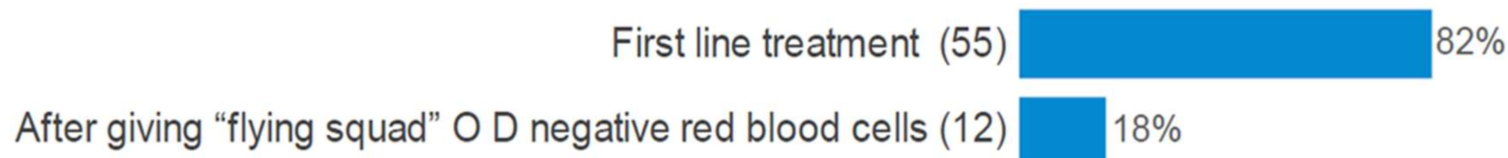





***Q1. Does your hospital have a policy in place to give emergency O D positive RBC to unknown adult males in trauma/MH?***




***Q2. If yes, when does your policy say to give emergency O D positive RBC to unknown males in trauma/MH?***



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# Results by RTC Region

Percentage with a Policy in Place by RTC

100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%

North West
London
Yorkshire & Humber
South East Coast
West Midlands
South Central
East of England
East Midlands
South West
North East

Please select your RTC

Yes
No
In progress

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## *Q3. If no, what are the challenges/barriers to implementing this initiative?*

- Some **less experienced staff** are nervous about doing this especially out of hours with no immediate backup from more senior staff
- **Experience level of current group of staff**, Education of users
- Concern about the risk of introducing a new option as one satellite fridge services ITU, A&E, theatres and the main part of the hospital so a **mix of staffing** levels will access the blood
- Still working a **multi-disciplinary on-call team** to cover out of hours. In recent years education of this team has greatly increased, therefore able to begin write policy
- Discussed at HTC - **staffing and porter collection is a hurdle**
- We have a policy for O+ blood in pre-hospital transfusion, but not yet within our hospital. Main barrier around **training/communication in ED with blood collectors** knowing who their patient is, and whether to collect O neg or O Pos
- Reluctance in A&E to store O Neg & O Pos and concerns over **confusion in stressful situations**
- Situation occurs very rarely. Risk of causing **confusion** among ward staff. Current policy is to give uncrossmatched O D Pos to known males if time allows

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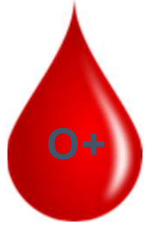
## *Q3. If no, what are the challenges/barriers to implementing this initiative?*

- Some of the challenges we can envision are individuals being scared to make a mistake and **select the wrong units**
- Having **two lots of red cells sat in the fridge** waiting to be used. Majority of emergency RC units go to birthing unit and therefore to females
- Too few trauma cases to have a two tier system.
- Concerns over the collection of blood products using the **Blood 360 tracking system** as this will not allow more than one type of emergency patient
- **Time** to implement, attendance and agreement with staff on our HTT, extra staff time to prepare these extra units with paperwork required every few weeks, different units so more training of both lab and collection teams
- **Time!**
- **Time** - The **pandemic** meant our TP team was asked to work in ITU. This has prevented go-live of this project.
- Waiting for national guidance

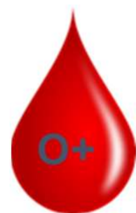





***Q4. Would support from the PBM Team help you to implement this initiative?***

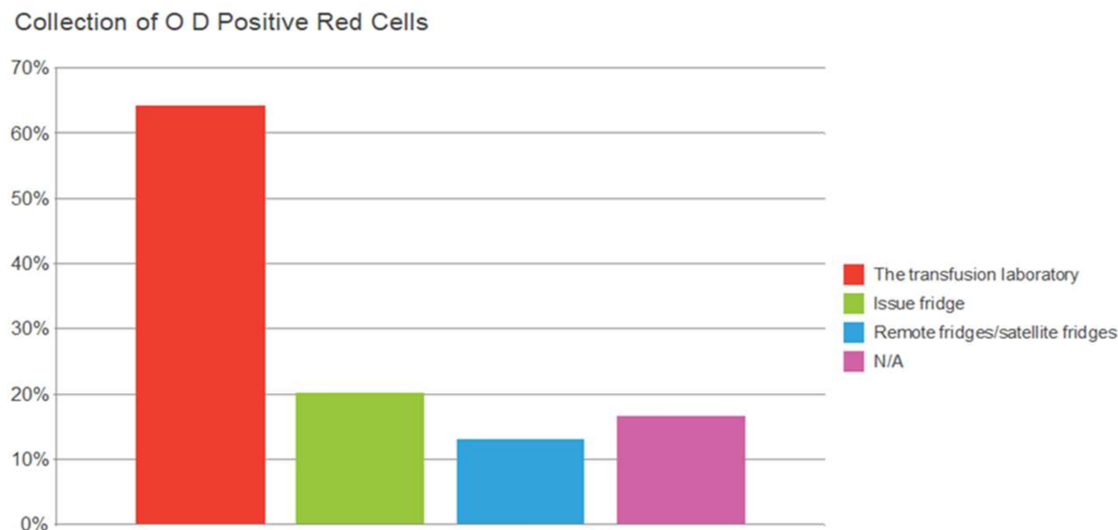
***Q5. If yes to Q4, what support would be useful?***

- 10 of these respondents suggested additional educational resources would be the best means of support
- 2 suggesting a meeting with the relevant PBM practitioner would be useful
- No respondents thought “buddying up” would be useful.






***Q6. If your hospital gives emergency O D positive to unknown adult males in trauma/MH, where are the RBCs issued/collected from?***




***Q7. If emergency O D positive RBC are issued/collected from remote fridges/satellite fridges, where are these fridges located?***

Most of these were in **theatre or emergency departments**. In other cases, fridges were in **adult intensive care units.** Interestingly, one respondent indicated they kept these fridges at a specific site based on patient demographics, Appendix 3.

***Q8. If emergency O D positive RBC are issued/collected from remote fridges/satellite fridges, how do you differentiate between the O D positive and O D negative emergency RBC to ensure correct D type is issued/collected?***

***Q9. Does your hospital have a policy in place to give emergency O D positive RBC to females of non-childbearing age?***