

The Update for August 2023

## Our new and extended Virtual Blood Centre Tour is now available Watch the journey of donated blood components and products through NHSBT

You'll gain an understanding of the important work our manufacturing, quality monitoring, hospital services, and red cell reference departments (amongst others) carry out; work which contributes to saving and improving lives by ensuring the products are safe for being transfused.

The tour has been extended to include Red Cell Reference, Protein Development Production Unit and Molecular Diagnostics.

## Watch the video

Ruth Evans - Manager, Scientific and Clinical Training and Education

## Anti-HBc testing

Following on from the introduction of anti-HBc testing to detect Occult Hepatitis B and roll out of testing from May 2022, NHSBT have now distributed all stock from donors who had not received an anti-HBc test.

This means that from 9<sup>th</sup> August all components distributed by NHSBT will have been donated by a donor that has had a negative anti-HBc test at this, or a previous donation.

This is an additional safety measure that was introduced to maintain the safety of our components. We encourage hospitals to use up any frozen components issued prior to the introduction of anti-HBc testing.

Dr Su Brailsford - Consultant in Epidemiology and Health Protection, Interim Clinical Director Microbiology and Public Health

## Please complete our next customer satisfaction survey Take this opportunity to rate us on our blood supply, delivery and other services

We'll be sending our survey to Transfusion Laboratory Managers on 4 September.

The feedback is invaluable; it helps us to focus on developing our services, turning the insights we get into actions that improve our performance and your satisfaction

You can read the results from the <u>Spring survey</u> and the areas for improvement we'll be focusing on.

Chris Gallagher - National Customer Service Manager, Programmes and Projects

# Updated instructions for returning blood units with suspected bacterial contamination Do not use the Bacteriology Request Form (FRM1581)and destroy any blank copies of the form

Hospitals should return units with suspected bacterial contamination for further investigation by the Microbiology Services Laboratory – Bacteriology. The contamination may be because of observed visual abnormality before transfusion or because of a patient reaction that the NHSBT Patient Consultant agrees may be bacterial in origin.

The process for returning unit following a patient reaction has been amended. Hospitals no longer need to complete the Bacteriology Request Form (FRM1581): all information is now completed by the NHSBT Patient Consultant on their form, FRM4544, following your telephone call with them.

Please refer to the <u>Bacterial contamination</u> web page in the "Reporting adverse events" section for the updated process.

Jennifer Bearne - Principal Bacteriology Development Scientist, Microbiology Services Laboratory

The Update is produced by Hospital Customer Service on behalf of NHS Blood and Transplant NHSBT.customerservice@nhsbt.nhs.uk

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