

The well equipped lone worker – a TACTful UKTLC update



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Background – UK Transfusion Laboratory Collaborative

- UKTLC was established in 2006 in response to wrong blood events reported to SHOT
- UKTLC is an IBMS-led initiative involving all major transfusion organisations within the UK
- IBMS, BBTS, SHOT, UK NEQAS, CMO NTC, RCPATH
- Over 40 other stakeholders – all informed throughout process
- *Recommended minimum 'standards' for hospital transfusion laboratories*
 - Published in 2009 following two national surveys
 - Staffing, Technology & Knowledge and Skills
 - Aim to facilitate a drop in the number of errors originating in the laboratory that are reported to SHOT (by 50% by 2012)

What was the evidence in 2006 to support initial UK TLC recommendations?

- **STAFFING – 323 labs surveyed**
 - 53% set 'ideal' staffing levels **but**
 - 53% of these operate 'regularly' below ideal
 - 16% of these operate 'often' at 50% of ideal
- **QUALIFICATIONS – 1332 working**
 - 55% had no formal transfusion qualification
 - 6% (19 labs) nobody in with transfusion qualification
- **'BOSSSES'**
 - Only 39% working on the day had a transfusion qualification higher than an HNC

What was the evidence in 2006 to support initial UK TLC recommendations?

- **Automation**

77% of labs with 'walk away' automation only 87% used it 24/7 and even less (33%) were using EI

- **Training**

20% of staff working in transfusion had not been formally competency assessed in previous 12 months

UKTLC Key Recommendations 2009

- **Staffing**

- safe level and skill mix at ALL times
- reviewed annually
- agreed workload (inc quality activity)
- senior staff available in 'core hours'

- **Technology**

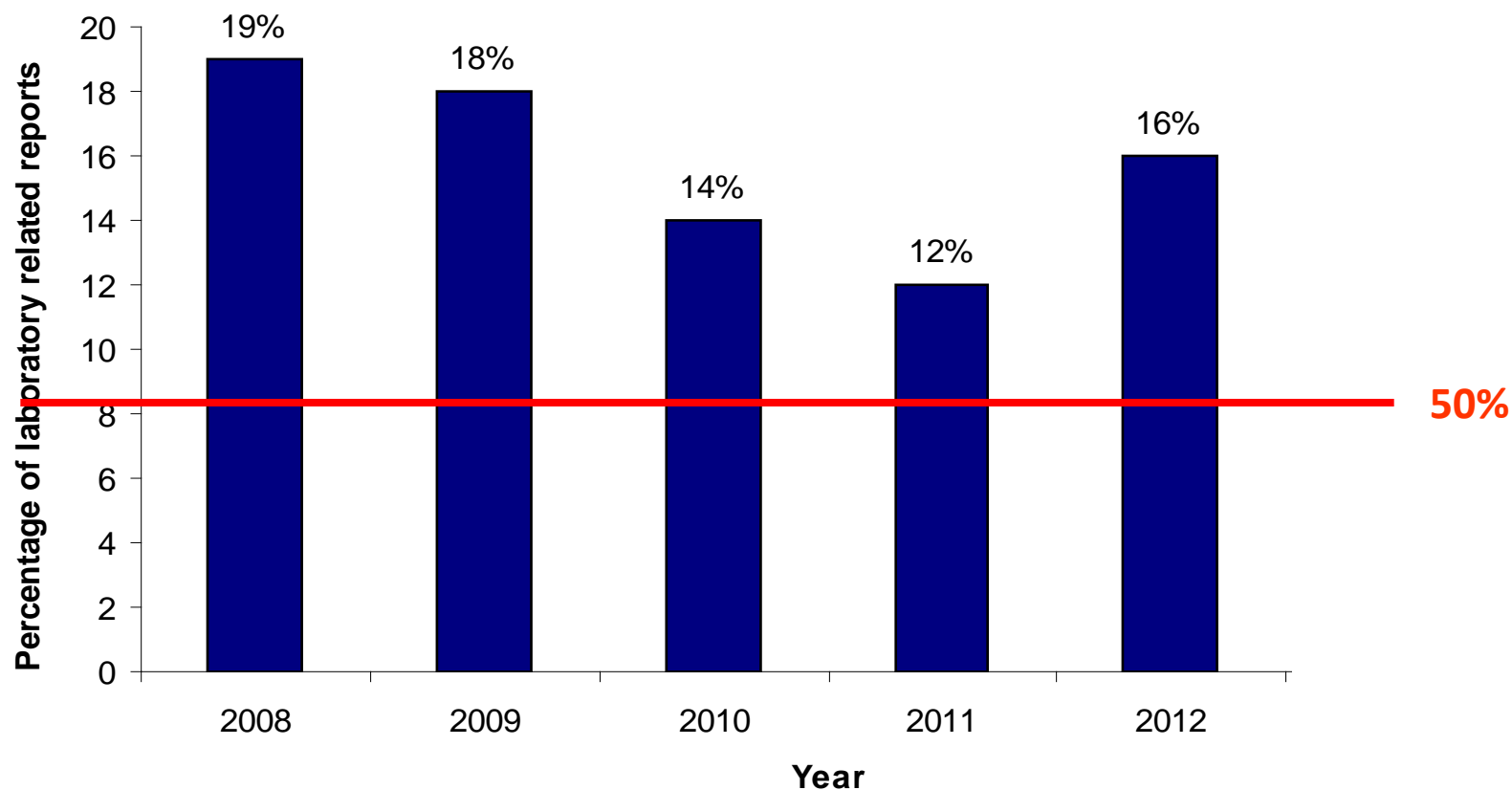
- 24/7/365 walkaway technology or documentation mitigation
- EI to be used where supported within guidelines
- 'remote' issue to be part of 'vein2vein' process incorporating EI

UKTLC Key Recommendations 2009

- **Training and Competence**

- expected qualifications for lab leads / managers or mapped learning outcomes
- minimum working to maintain competence
- minimum qualifications for lone workers or mapped learning outcomes
- active participation for all in competency assessments and training programmes
- 24/7/365 senior staff advice available
- Applicable to locum staff

Has 50% reduction in errors been achieved?



Year	2008	2009	2010	2011	2012
Total No Reports analysed	1040	1279	1464	1799	1516
No lab errors	200	230	205	217	247

Two further national surveys to assess recommendations

- Surveys were distributed to:
 - 322 laboratories in 2011
 - 304 laboratories in 2013
- The response rate for each survey was:
 - 162/322 (50%) in 2011
 - 188/304 (62%) in 2013
- Factors possibly impacting the responses on both surveys:
 - Staff being on holidays
 - Staff being on call
 - Other activities occurring within the Hospitals
i.e. mergers/partnerships

Staffing

	2011	2013
Lead Scientist completing survey	89% (144/162)	80% (151/188)
Not a lead scientist	10% (16/162)	16% (30/188)
Did not answer	1% (3/162)	4% (6/188)

Almost half of those completing the survey as lead scientists did NOT meet the level of qualifications recommended by the UKTLC

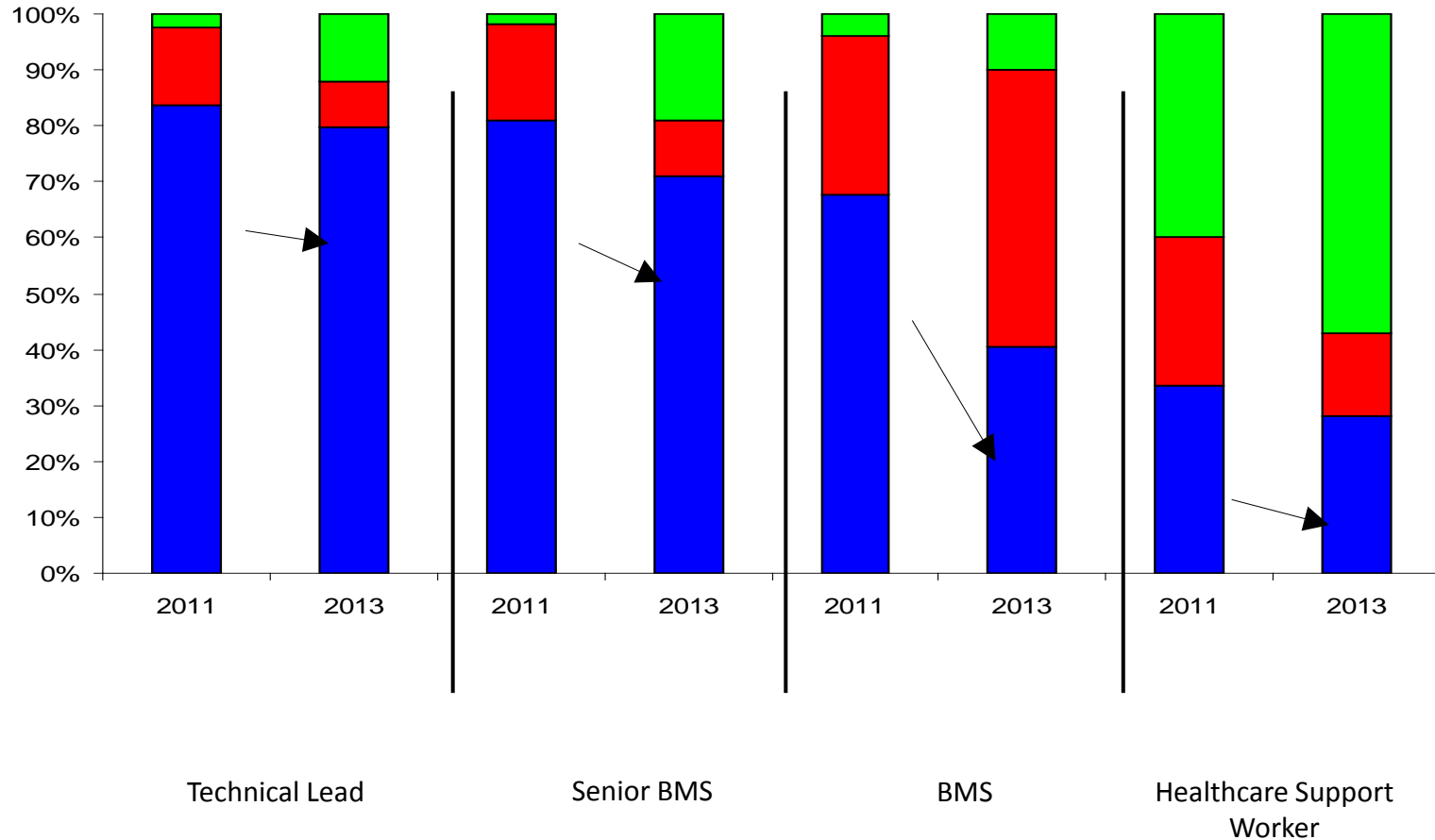
44% (63/144)

47% (71/151)

Staffing

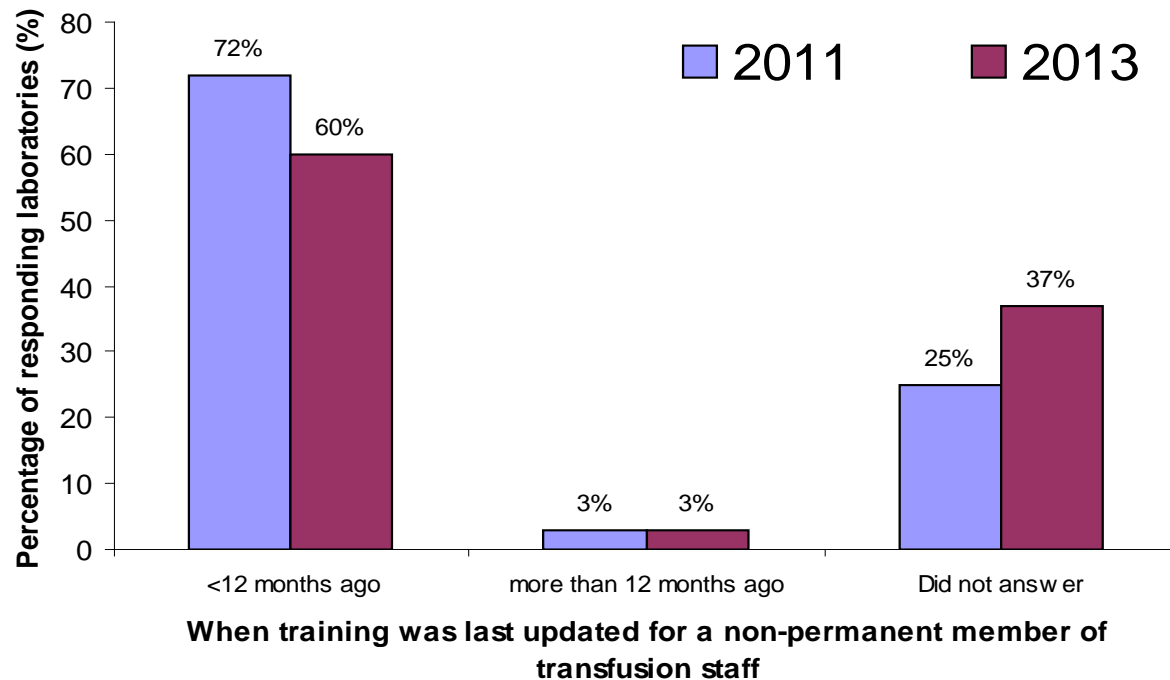
Proportion of staff that are based for at least 75% of their time in blood transfusion

■ Yes ■ No ■ N/A



Knowledge and Skills

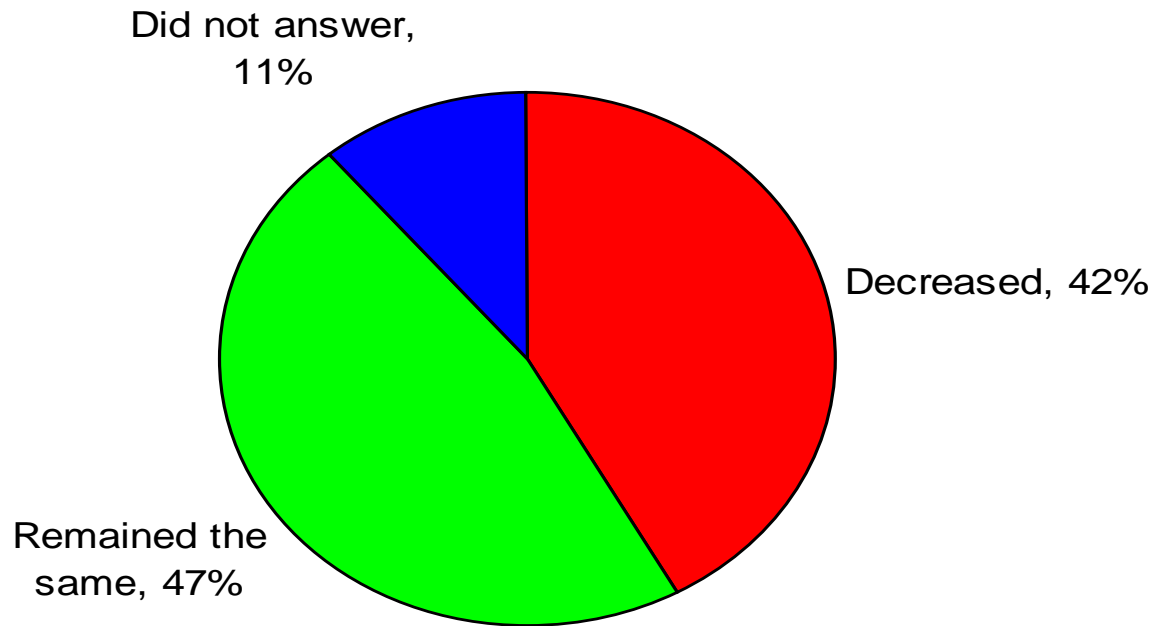
Numbers of staff with training updates completed within the last 12 months fell from 72% in 2011 to 60% in 2013



Knowledge and Skills

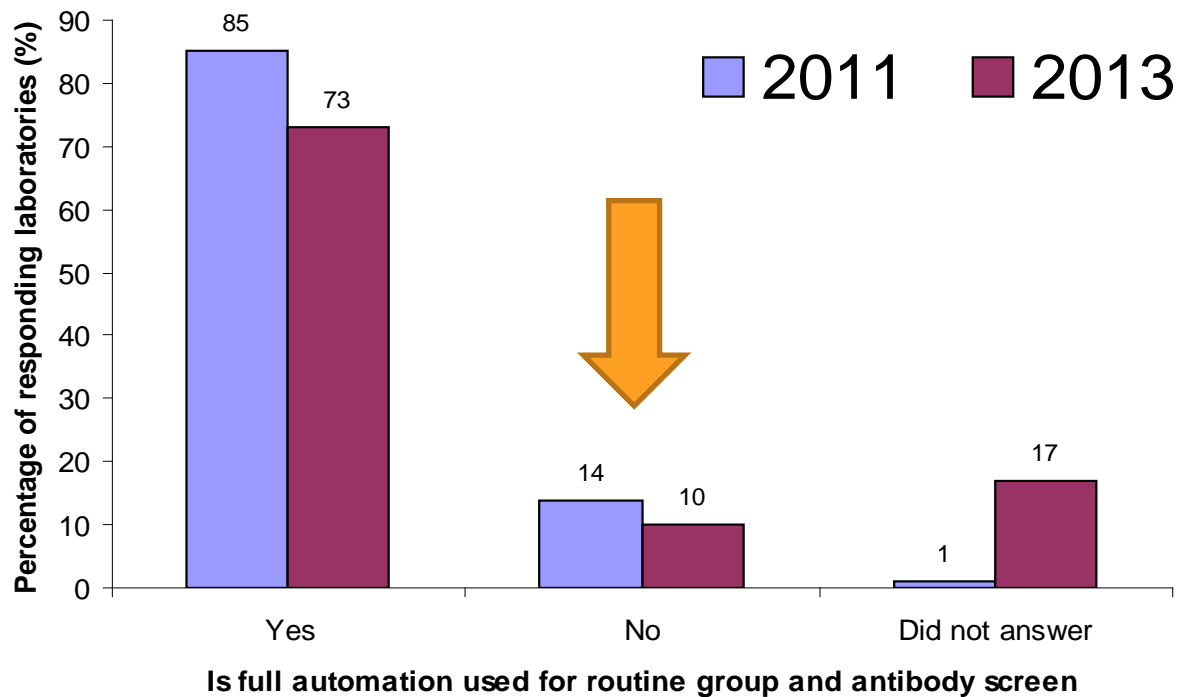
No respondents reported an increase in funding for education in 2013 and
42% reported a reduction

**Changes to the financial
resources available to
support staff education
between 2011 & 2013**



Technology

Is full automation used for routine group & antibody screen during core hours?



Main reasons for not addressing UKTLC recommendations

- They were just recommendations
- No 'Big boys' to regulate compliance
- Lack of resources
- Managers unsupportive

UK TLC **STANDARDS** 2014

- Updated and re-drafted
- Accepted by Transfusion Medicine for publication – Probably in Jan 2015
- Produced in cooperation with CPA and MHRA

UK TLC STANDARDS 2014

- Main updates

- Protected time available for quality management system elements of service delivery to be achieved
- 24/7/365 walkaway technology OR documented procedures to mitigate procedural laboratory errors
- EI essential where systems are robust and in line with BCSH and MHRA guidance
- enhanced requirements for and monitoring of competence
- detailed expectations of knowledge and practical based competence for managers

UK TLC STANDARDS 2014

- Main updates continued
 - Managers / Lab leads excluded from calculations on core hours staff numbers / skill mix and from 'shifts' which impact on 'core hour' availability
 - minimum qualifications for anyone working unsupervised
 - locally defined annual programme of both practical and knowledge based competency assessment relevant to the job role
 - CPA and MHRA will use compliance with the new standards as evidence to support their own laboratory inspections

The Assessment of Competence

Practical Based

- Follow an SOP
- Ability to operate departmental analysers
- Familiarity with departmental IT system(s)
- Familiarity with departmental manual procedures

Knowledge Based

- Case studies and reviews
- Application of professional guidelines
- Principle of tests
- Sources of error
- Quizzes

<http://tact.uknegasbtlp.org.uk>

Thank you - Any Questions?

