

Clinical Decision-Making and Authorising Blood Component Transfusion: Developing the Non-Medical Workforce to Improve Patient Safety and Experience through Virtual Education

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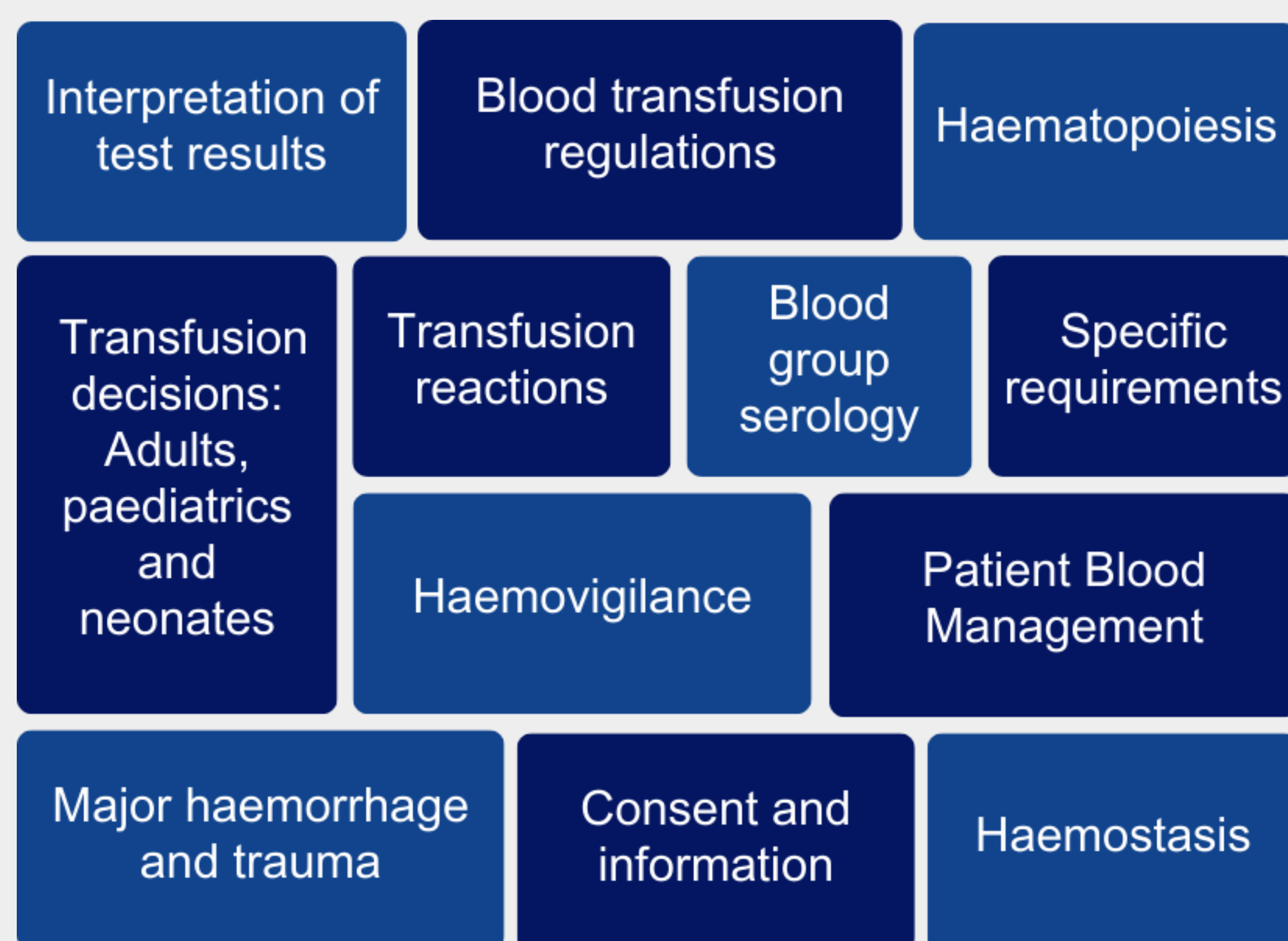
Patient Blood Management

Introduction

The NHS Blood and Transplant (NHSBT) Patient Blood Management (PBM) team provides a four-day Non-medical Authorisation of Blood Components (NMA) virtual course, aimed at providing registered and regulated healthcare professionals with the necessary theoretical knowledge for making informed decisions and providing written instructions for blood component transfusion. This poster explores the impact of the course.

Course Overview

The course covers the following essential topics:



The course is accredited by the **Royal College of Nursing** and undergoes a rigorous annual assessment. The course content complies with the **UK and Ireland Blood Transfusion Network's** framework on **Clinical Decision-Making and Authorising Blood Component Transfusion – 'A Framework to Support Non-Medical Healthcare Professionals.'**

Improving Accessibility

In partnership with NHSBT's Disability and Wellbeing Network, we conducted an extra literature review, concentrating on inclusivity. Our goal was to address challenges for attendees with dyslexia, dyspraxia, ADHD, or colour blindness. We made significant revisions to the format of the learning materials and now information on hardware and software settings is provided before and throughout the course.

Measuring the impact of the course

Did the course meet your foundation learning needs?

93 Yes 2 No

Has the introduction of non-medical authorisation in your clinical area resulted in a positive impact on the patient care experience?

88 Yes 7 No

Methods

A survey of attendees who completed the course at least six months ago (**n=95**) yielded valuable insights into their experience of authorising blood components and the impact the course had on their practice, patient care, and service.

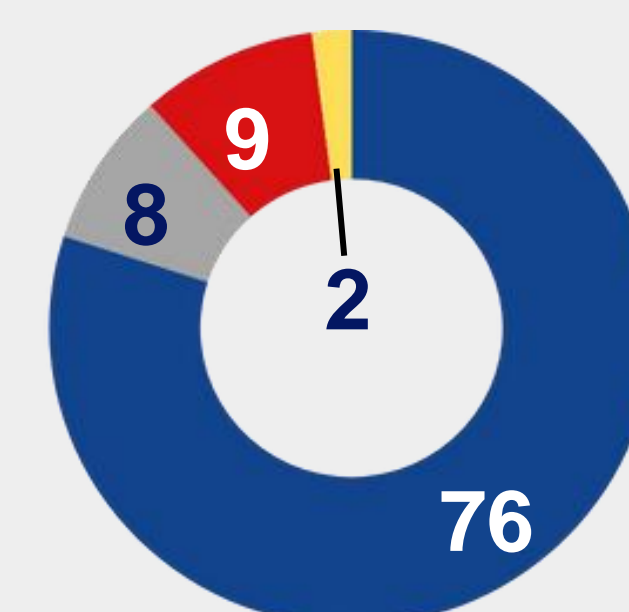
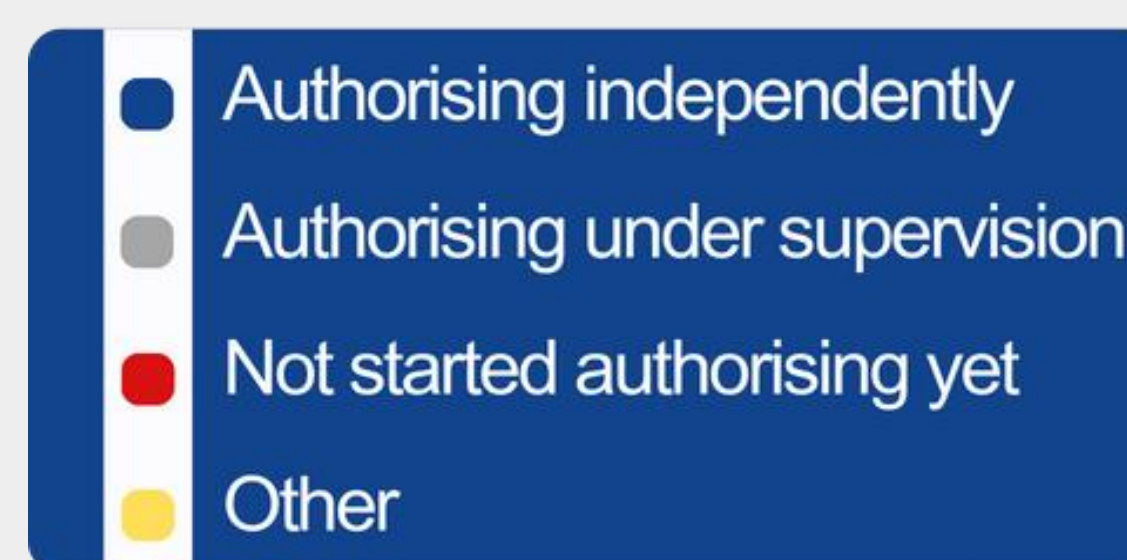


University teaching hospitals (48) and district general hospitals (35). The remaining were from specialist hospitals (7), independent hospitals (2) and others (3).



40 respondents practiced in haematology, 23 oncology, 22 emergency / critical care, 16 medicine, 13 surgery, 9 neonatal care, 4 renal, and 12 did not specify (respondents selected all that applied)

What stage of blood authorisation have you reached?



What are you authorising?

Of those surveyed, 90.5% authorised red cell transfusion and 69.5% authorised platelet transfusion at least monthly. For fresh frozen plasma transfusions, 32.6% were authorising at least monthly, and for cryoprecipitate, the figure was 27.4%.

Overruling of decisions

4/95 respondents reported a decision **to authorise transfusion** overruled, and 11/95 respondents had a decision **not to authorise transfusion** overruled by a senior colleague.

Conclusion

The results highlight the impact of comprehensive training in transfusion decision-making and suggest that the course increases the confidence of attendees who go on to independently authorise blood components. Attendees reported that the introduction of NMA has had a favourable impact on patient care and experience.

By equipping healthcare professionals with the necessary knowledge, this course can play a vital role in improving transfusion outcomes and enhancing the quality of care provided to patients.

Acknowledgements:

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[Translations available and further information](#)

