

### Purpose of this procedure:

This procedure outlines the key steps in the blood transfusion process and the roles and responsibilities of staff involved in any stage of this process.

### Blood transfusion process

There are three key principles of safe blood transfusion:

1. Correct patient identification (ID)
2. Clear, accurate and timely documentation
3. Good communication

The blood transfusion process is complex with the following ten distinct stages identified:

1. **Consent** for transfusion
2. **Request** of the test or blood component for transfusion noting any special requirements
3. Collecting the **blood sample** for pre-transfusion testing including positive patient identification (ID) and correct sample labelling
4. **Sample receipt** by the testing laboratory including checking the suitability of the sample for testing and booking into the laboratory information management system
5. **Testing** the sample in the laboratory and issuing a result
6. **Component selection** based on clinical request and results of testing
7. **Labelling** of component as compatible with/suitable for transfusion to a named patient
8. **Collection** of the blood component for a named patient using documentation with full patient ID
9. **Authorisation** of the blood component by a doctor or trained and competent non-medical authoriser of blood components to include any special requirements
10. **Administration** of the blood component after rigorous bedside checks and monitoring of the patient before, during and after the transfusion

## Roles and responsibilities

Blood transfusion, when used appropriately, can improve the length and quality of life. Nevertheless, as with any clinical intervention, there are risks associated with transfusion. Errors in the requesting, supply and administration of blood and blood components can harm patients (see The Serious Hazards of Transfusion reporting scheme (SHOT) – [www.shotuk.org](http://www.shotuk.org)).

The NHS Lothian Blood Transfusion Policy and associated procedures are designed for use by all doctors, registered nurses and midwives, operating department practitioners (ODPs), perfusionists, physician associates, phlebotomists, healthcare support workers, assistant practitioners, porters and students who are involved in any stage of the transfusion process.

The medical director, associate medical directors, nurse director, associate nurse directors and logistics managers will be responsible for ensuring that the NHS Lothian Blood Transfusion Policy and procedures are made known to all relevant clinical staff and porters. All individuals performing any role in the transfusion process must ensure that they are aware of the procedures and are acting in accordance with them.

As well as adhering to NMC, GMC and HCPC professional standards, nurses, midwives, operating department practitioners and doctors are accountable to patients and to their employer for the provision of care during the transfusion process. It is the responsibility of registered practitioners, in line with their professional body, to ensure that they are trained and competent to participate in any part of the transfusion process relevant to their role.

All staff are required to adhere to policies and standards of practice specified by NHS Lothian and are accountable for the care they provide being appropriate to their level of knowledge and skill. Before taking on any transfusion task clinical staff MUST complete mandatory Learn Blood Transfusion (LBT) *Safe Transfusion Practice* eLearning accessible via Learnpro or TURAS Learn (available at <https://learn.nes.nhs.scot/>). Additional role-based transfusion education guidance is outlined in the [SNBTS Transfusion Training Matrix](#) and further detail is found in [Transfusion education and training](#).

## Responsibility relating to the requesting of blood components

It is the responsibility of the practitioner requesting blood components to check the patient's transfusion history and to ensure any special requirements are communicated to the laboratory on the request form (i.e. irradiated or CMV negative components).

In the haematology department (adults), irradiated blood requirements are communicated to the transfusion laboratory via a specific Transfusion Special Requirements Request Form (see intranet Directory > Haematology > Administrative Documents).

## Responsibility relating to the authorisation to transfuse blood components

Transfusions of blood and blood components must be authorised (this is the correct term used for 'prescribing' blood components) by a registered medical practitioner unless in specific areas where non-medical authorisation of blood components has been agreed by the appropriate associate nurse director.

Nurses who authorise blood component transfusions must have undertaken the necessary education and development: a specific non-medical authorisation programme is available for this purpose and advice regarding this can be obtained from the transfusion practitioners. A register of healthcare practitioners who have successfully been approved as non-medical authorisers of blood and blood components must be maintained in line with the NHS Lothian Authorisation of Blood Components by Non-Medical Authorisers (NMA) Policy (*IN DEVELOPMENT*)

### **Associated materials/references:**

[NHS Lothian Blood Transfusion Policy](#)

[NHS Lothian Blood Transfusion Procedures](#)

[NHS Lothian Blood Transfusion Guidelines](#)

[SNBTS Transfusion Training Matrix](#)

NHS Lothian Authorisation of Blood Components by Non-Medical Authorisers (NMA) Policy (*in development*)