NSQHS Standard 7 Blood and Blood Products

How to use the audit tools

Blood and Blood Products Audit Tools Instructions

The Patient Safety and Quality Improvement Service, Clinical Excellence Division, in partnership with the Queensland Blood Management Program have developed audit tools for facilities and Hospital and Health Services (HHS) to use to collect data in support of evidence in meeting the National Safety and Quality Health Service (NSQHS) standards.

Purpose of the audit tools

The tools provide facilities and health services additional supporting resources to use in conjunction with the existing NSQHS standards workbooks and guides to be able to:

- Demonstrate detailed evidence for an action by providing specific verification rather than noting the action has been met and listing the source i.e. self-assessment
- Collect information and evidence to a further level of detail at a patient, ward and facility level, delving down into specific requirements that further support meeting the action
    - Collect patient level data using a number of methods i.e. chart documentation, observational and asking the patient/carer questions to demonstrate that the evidence has been met, and to what extent
    - Observe ward/unit staff undertaking a process eg clinical handover and recording individual results
- Determine actual performance results at a ward and facility level by rolling up data i.e. auditing all patients in a ward for a ward result, auditing all wards for a facility result
- Clearly identify those detailed gaps/areas that need attention, in order to target improvements and build a robust action plan at the ward and facility level
- Track and monitor audit results at the three levels over time

The tools can be used in conjunction with other resources and directly align to the criteria in the existing NSQHS standards workbooks and guides. Depending on the size of the facility a number of audit questions may not be applicable, it is up to each facility / health service to determine the audit questions for review. Questions and responses can be adapted to suit the requirements of each facility / health service.

The Queensland Blood Management Program and Queensland Health Transfusion Clinical Nurse Consultants have provided valuable input and feedback on the audit tool questions and responses.

The suite of documents include the following:

1. A 'how to' guide on using the tools (this document)
2. A definitions guide to assist in completing the tools
3. Three specific audit tools that allow the collection and collation of information are provided that can be adapted for local use:
   - *Patient audit tool*: collects patient level data (at a ward/unit level), use one audit tool for each patient audited
   - *Ward/Unit audit tool*: collects ward/unit level data and collates the patient level responses
   - *Facility audit tool*: collects facility level data and collates the ward/unit level responses
4. A measurement plan summary for each standard that defines the goals, questions and responses in the audit tools. The plan details each audit question and its alignment to the action/criteria in the standard and can be adapted for local use. Some questions may be used by the facility to demonstrate evidence for other actions, in addition to the action it has been aligned with.

Scope of the Blood and Blood Products Audit tools

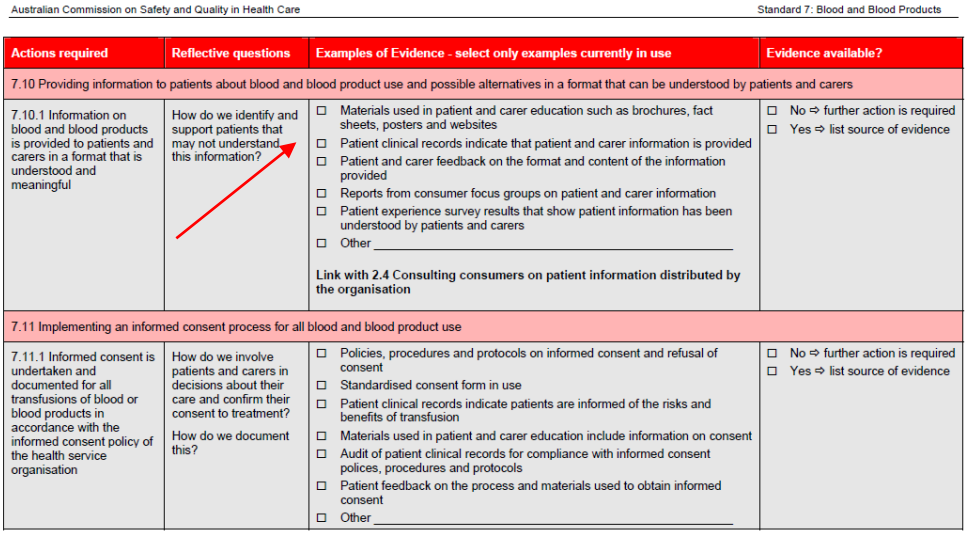
The audit tools at this stage incorporate audit questions on correct completion of crossmatch reports; correct documentation on previous adverse reactions; provision of patient information sheets to patients/carers; correct completion of blood and blood products transfusion consent and surgical consent forms; correct completion of documentation for patients who decline ALL transfusion or specified blood and blood products.

How the tools were developed

An example is provided below using action 7.10.1 in Standard 7

1. The NSQHS standards workbooks and guides were used i.e.:
   a. Hospital Accreditation Workbook - In particular the 'Examples of Evidence' for each action required. (October 2012)
   http://www.safetyandquality.gov.au/publications/hospital-accreditation-workbook/

Example: Hospital Accreditation Workbook – Standard 7 Action 7.10.1(October 2012)



Australian Commission on Safety and Quality in Health Care — Standard 7: Blood and Blood Products

Actions required	Reflective questions	Examples of Evidence - select only examples currently in use	Evidence available?
7.10 Providing information to patients about blood and blood product use and possible alternatives in a format that can be understood by patients and carers			
7.10.1 Information on blood and blood products is provided to patients and carers in a format that is understood and meaningful	How do we identify and support patients that may not understand this information?	☐ Materials used in patient and carer education such as brochures, fact sheets, posters and websites ☐ Patient clinical records indicate that patient and carer information is provided ☐ Patient and carer feedback on the format and content of the information provided ☐ Reports from consumer focus groups on patient and carer information ☐ Patient experience survey results that show patient information has been understood by patients and carers ☐ Other _____ **Link with 2.4 Consulting consumers on patient information distributed by the organisation**	☐ No ⇨ further action is required ☐ Yes ⇨ list source of evidence
7.11 Implementing an informed consent process for all blood and blood product use			
7.11.1 Informed consent is undertaken and documented for all transfusions of blood or blood products in accordance with the informed consent policy of the health service organisation	How do we involve patients and carers in decisions about their care and confirm their consent to treatment? How do we document this?	☐ Policies, procedures and protocols on informed consent and refusal of consent ☐ Standardised consent form in use ☐ Patient clinical records indicate patients are informed of the risks and benefits of transfusion ☐ Materials used in patient and carer education include information on consent ☐ Audit of patient clinical records for compliance with informed consent polices, procedures and protocols ☐ Patient feedback on the process and materials used to obtain informed consent ☐ Other _____	☐ No ⇨ further action is required ☐ Yes ⇨ list source of evidence

Example of Evidence for 7.10.1 'Patient clinical records indicate that patient and carer information is provided'

b. Safety and Quality Improvement Guides (one per standard) – in particular under each action and key task there are 'Outputs' suggested. In addition, the suggested strategies may assist the facility in providing options for how an action can be improved.
(October 2012)
http://www.safetyandquality.gov.au/publications/safety-and-quality-improvement-guide-standard-7-blood-and-blood-products-october-2012/

Example:
Safety and Quality Improvement Guide - Standard 7 Action 7.10.1 (October 2012)

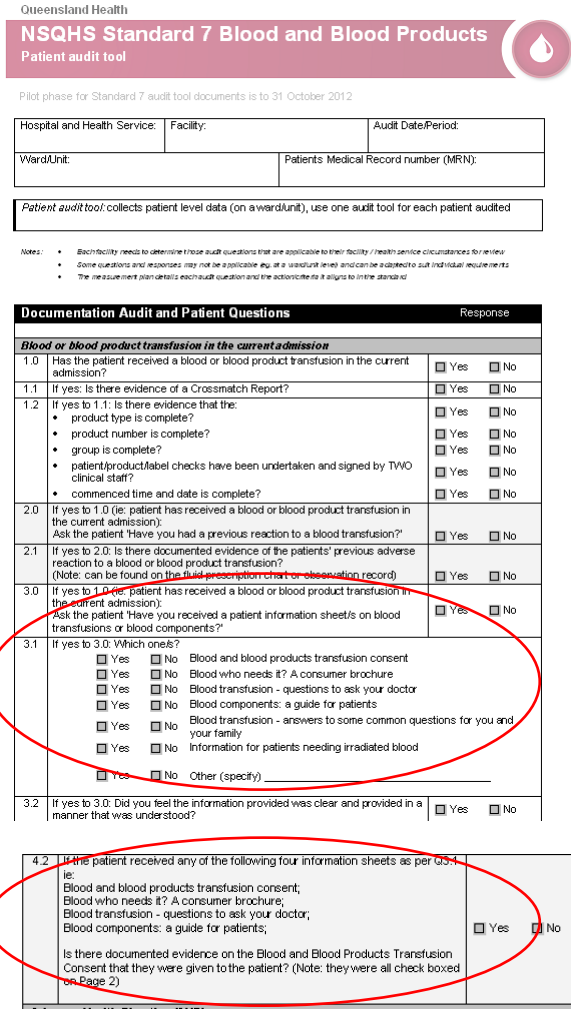
Actions required	Implementation strategies
7.10 Providing information to patients about blood and blood product use and possible alternatives in a format that can be understood by patients and carers	
7.10.1 Information on blood and blood products is provided to patients and their carers in a format that is understood and meaningful	**Key tasks:** • **Provide information to patients and their carers about blood and blood product use and possible alternatives, in a format and of a level appropriate for the patient** • **Seek feedback on resources provided to patients, and revise resources as required** **Suggested strategies:** Clinical areas are well placed to identify opportunities to improve communication between clinicians and patients, families and carers about possible requirements for transfusion. The development of a communication strategy that ensures distribution of appropriate resources supports Action 7.9.1 to provide information to patients and carers. The developmental aspect of this action relates to ensuring it is meaningful and understood. By seeking feedback from patients on the information provided, changes can be made to ensure it is understood and meaningful. You could seek feedback through patient surveys, or more informal discussions with patients and carers. Where communication with the patient may not be possible, due to the acuteness of their condition, a process to manage situations will also be required. If the patient is unable to speak or understand English, you may need to involve an interpreter. Documenting the information provided in the patient clinical record (as required under Action 7.5.1), will provide evidence that the informed component of informed consent was being addressed. It is expected that reports on patient feedback are routinely provided to the Transfusion Governance Group (refer to Action 7.4.1) to assist them in determining the effectiveness of their informed consent procedures. Compliance with provision of this information is monitored through Action 7.11.1. **Outputs of improvement processes may include:** • documentation developed under Action 7.4.1 specifically relating to provision of information on blood and blood products to patients and carers • documentation of the process for communication about blood and blood products • documentation of evaluation, audit and feedback processes around compliance with the communication protocol • patient surveys designed to assess whether the resources available achieved patient understanding of blood and blood products • audit of patients' clinical records that show patients were provided with patient-specific information relating to the risks, benefits of, and alternatives to, blood and blood products.

An output for 7.10.1 'Audit of patients' clinical record that show patients were provided with patient-specific information relating to the risks, benefits of, and alternatives to, blood and blood products'

2. The questions in the audit tools (patient, ward, facility) assess and ask for verification of the examples of evidence and outputs to collect the detailed information necessary to meet that evidence. In addition, other examples of evidence may be used. The questions may directly ask if there is evidence to support, or may be broken down into a series of questions to delve deeper into whether the evidence has been met. In addition, questions may require the auditing of patients in order to demonstrate that the evidence has been met, and to what extent.

   Questions and responses have been developed in consultation with content area experts.

Example: Audit tool questions for Standard 7 Action 7.10.1



Queensland Health

NSQHS Standard 7 Blood and Blood Products

Patient audit tool

Pilot phase for Standard 7 audit tool documents is to 31 October 2012

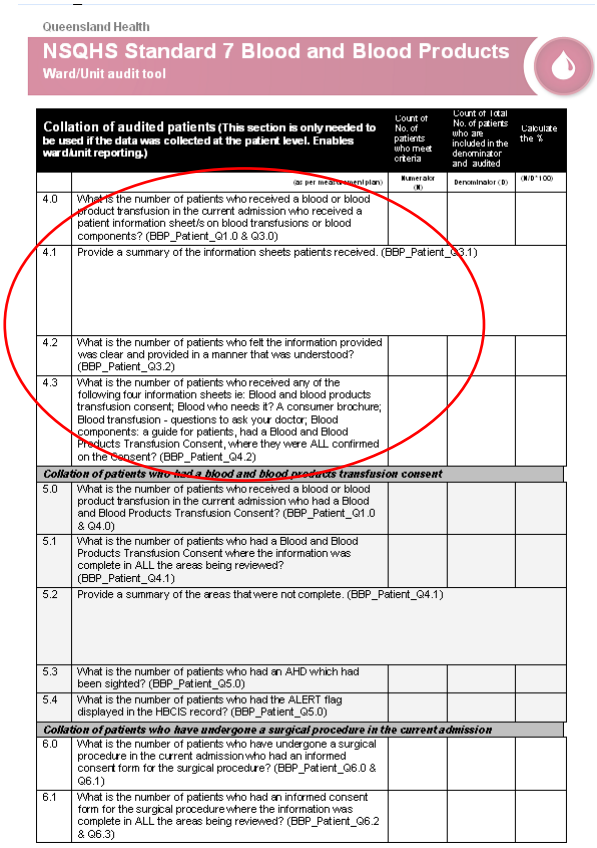
Hospital and Health Service:	Facility:	Audit Date/Period:
Ward/Unit:	Patients Medical Record number (MRN):	

Patient audit tool: collects patient level data (on a ward/unit), use one audit tool for each patient audited

Notes:
- Each facility needs to determine those audit questions that are applicable to their facility / health service circumstances for review
- Some questions and responses may not be applicable eg, at a ward/unit level) and can be adapted to suit individual requirements
- The measurement plan details each audit question and the action/criteria it aligns to in the standard

Documentation Audit and Patient Questions		Response
Blood or blood product transfusion in the current admission		
1.0	Has the patient received a blood or blood product transfusion in the current admission?	☐ Yes ☐ No
1.1	If yes: Is there evidence of a Crossmatch Report?	☐ Yes ☐ No
1.2	If yes to 1.1: Is there evidence that the: • product type is complete? • product number is complete? • group is complete? • patient/product/label checks have been undertaken and signed by TWO clinical staff? • commenced time and date is complete?	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
2.0	If yes to 1.0 (ie: patient has received a blood or blood product transfusion in the current admission): Ask the patient 'Have you had a previous reaction to a blood transfusion?'	☐ Yes ☐ No
2.1	If yes to 2.0: Is there documented evidence of the patients' previous adverse reaction to a blood or blood product transfusion? (Note: can be found on the fluid prescription chart or observation record)	☐ Yes ☐ No
3.0	If yes to 1.0 (ie: patient has received a blood or blood product transfusion in the current admission): Ask the patient 'Have you received a patient information sheet/s on blood transfusions or blood components?'	☐ Yes ☐ No
3.1	If yes to 3.0: Which one/s? ☐ Yes ☐ No Blood and blood products transfusion consent ☐ Yes ☐ No Blood who needs it? A consumer brochure ☐ Yes ☐ No Blood transfusion - questions to ask your doctor ☐ Yes ☐ No Blood components: a guide for patients ☐ Yes ☐ No Blood transfusion - answers to some common questions for you and your family ☐ Yes ☐ No Information for patients needing irradiated blood ☐ Yes ☐ No Other (specify) _____	
3.2	If yes to 3.0: Did you feel the information provided was clear and provided in a manner that was understood?	☐ Yes ☐ No

4.2	If the patient received any of the following four information sheets as per Q3.1 ie: Blood and blood products transfusion consent; Blood who needs it? A consumer brochure; Blood transfusion - questions to ask your doctor; Blood components: a guide for patients; Is there documented evidence on the Blood and Blood Products Transfusion Consent that they were given to the patient? (Note: they were all check boxed on Page 2)	☐ Yes ☐ No



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Ward/Unit audit tool

Collation of audited patients (This section is only needed to be used if the data was collected at the patient level. Enables ward/unit reporting.)		Count of No. of patients who meet criteria	Count of Total No. of patients who are included in the denominator and audited	Calculate the %
	(as per measurement plan)	Numerator (N)	Denominator (D)	(N/D*100)
4.0	What is the number of patients who received a blood or blood product transfusion in the current admission who received a patient information sheet/s on blood transfusions or blood components? (BBP_Patient_Q1.0 & Q3.0)			
4.1	Provide a summary of the information sheets patients received. (BBP_Patient_Q3.1)			
4.2	What is the number of patients who felt the information provided was clear and provided in a manner that was understood? (BBP_Patient_Q3.2)			
4.3	What is the number of patients who received any of the following four information sheets ie: Blood and blood products transfusion consent; Blood who needs it? A consumer brochure; Blood transfusion - questions to ask your doctor; Blood components: a guide for patients, had a Blood and Blood Products Transfusion Consent, where they were ALL confirmed on the consent? (BBP_Patient_Q4.2)			
Collation of patients who had a blood and blood products transfusion consent				
5.0	What is the number of patients who received a blood or blood product transfusion in the current admission who had a Blood and Blood Products Transfusion Consent? (BBP_Patient_Q1.0 & Q4.0)			
5.1	What is the number of patients who had a Blood and Blood Products Transfusion Consent where the information was complete in ALL the areas being reviewed? (BBP_Patient_Q4.1)			
5.2	Provide a summary of the areas that were not complete. (BBP_Patient_Q4.1)			
5.3	What is the number of patients who had an AHD which had been sighted? (BBP_Patient_Q5.0)			
5.4	What is the number of patients who had the ALERT flag displayed in the HBCIS record? (BBP_Patient_Q5.0)			
Collation of patients who have undergone a surgical procedure in the current admission				
6.0	What is the number of patients who have undergone a surgical procedure in the current admission who had an informed consent form for the surgical procedure? (BBP_Patient_Q6.0 & Q6.1)			
6.1	What is the number of patients who had an informed consent form for the surgical procedure where the information was complete in ALL the areas being reviewed? (BBP_Patient_Q6.2 & Q6.3)			

The patient audit tool allows you to collect the specific question/s that can be used for 7.10.1 in auditing patient level information.

The ward/unit audit tool allows you to collate all the patient results for a ward/unit level view.

In addition to the collection of information, the ward/unit and facility tools include the ability to be able to collate data i.e.: collate the data collected at a patient level for a ward/unit view, collate the data collected at a ward/unit level for a facility view. Where this is the case, the collation questions refer to where the information can be found eg. BBP_Patient_Q3.0 refers to Q3.0 in the Patient audit tool where the responses to collate the data will be found.

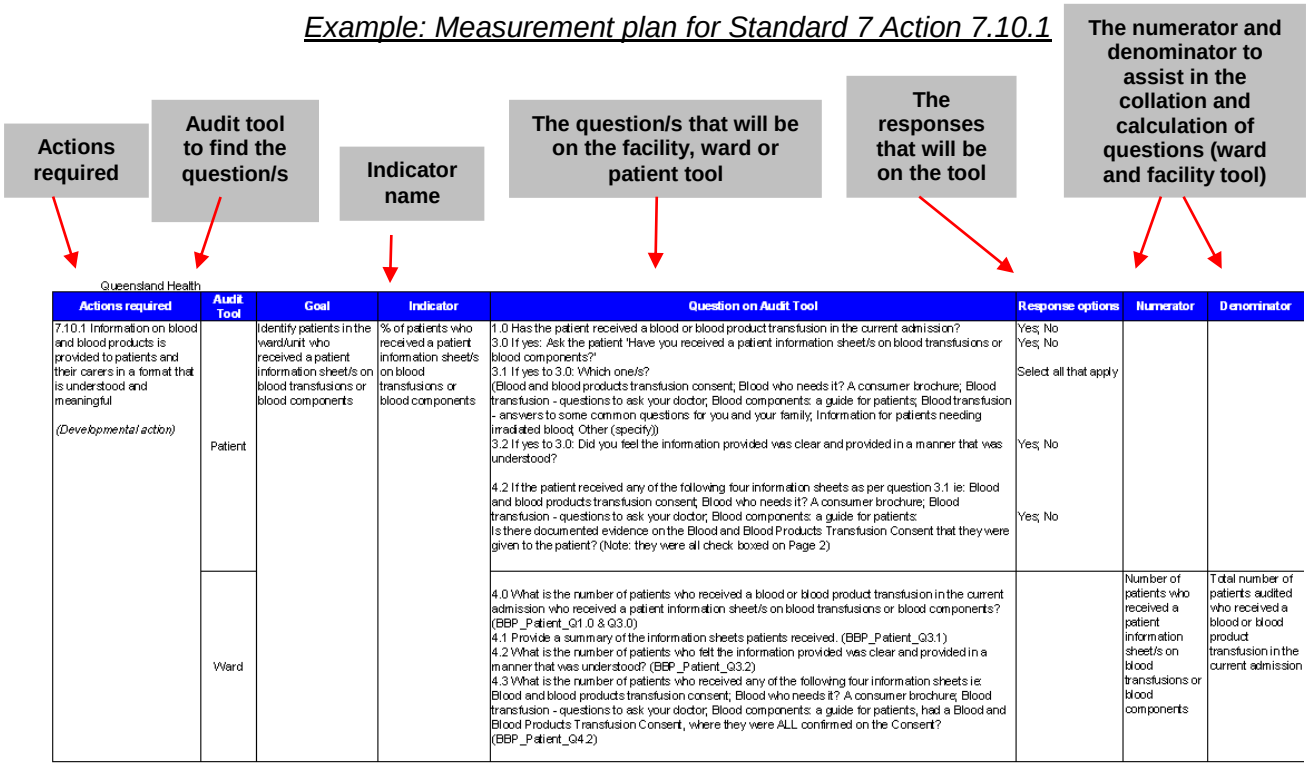
The last three columns in the collation sections i.e.: Num/Den/% allows for the calculation of the % result at a ward/unit and facility level (for reporting). Details of these can be found in the measurement

plan. Future plans for the electronic capture of information will allow the collation of data to be automatic.

3. The measurement plan details the criteria / action and those question/s / responses that correspond to the action.

   Note : Some questions may be used by the facility to demonstrate evidence for other actions, in addition to the action it has been aligned with.

Example: Measurement plan for Standard 7 Action 7.10.1



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Actions required	Audit Tool	Goal	Indicator	Question on Audit Tool	Response options	Numerator	Denominator
7.10.1 Information on blood and blood products is provided to patients and their carers in a format that is understood and meaningful *(Developmental action)*	Patient	Identify patients in the ward/unit who received a patient information sheet/s on blood transfusions or blood components	% of patients who received a patient information sheet/s on blood transfusions or blood components	1.0 Has the patient received a blood or blood product transfusion in the current admission? 3.0 If yes: Ask the patient 'Have you received a patient information sheet/s on blood transfusions or blood components?' 3.1 If yes to 3.0: Which one/s? (Blood and blood products transfusion consent; Blood who needs it? A consumer brochure; Blood transfusion - questions to ask your doctor; Blood components: a guide for patients; Blood transfusion - answers to some common questions for you and your family; Information for patients needing irradiated blood; Other (specify)) 3.2 If yes to 3.0: Did you feel the information provided was clear and provided in a manner that was understood? 4.2 If the patient received any of the following four information sheets as per question 3.1 ie: Blood and blood products transfusion consent; Blood who needs it? A consumer brochure; Blood transfusion - questions to ask your doctor; Blood components: a guide for patients: Is there documented evidence on the Blood and Blood Products Transfusion Consent that they were given to the patient? (Note: they were all check boxed on Page 2)	Yes; No Yes; No Select all that apply Yes; No Yes; No		
	Ward			4.0 What is the number of patients who received a blood or blood product transfusion in the current admission who received a patient information sheet/s on blood transfusions or blood components? (BBP_Patient_Q1.0 & Q3.0) 4.1 Provide a summary of the information sheets patients received. (BBP_Patient_Q3.1) 4.2 What is the number of patients who felt the information provided was clear and provided in a manner that was understood? (BBP_Patient_Q3.2) 4.3 What is the number of patients who received any of the following four information sheets ie: Blood and blood products transfusion consent; Blood who needs it? A consumer brochure; Blood transfusion - questions to ask your doctor; Blood components: a guide for patients, had a Blood and Blood Products Transfusion Consent, where they were ALL confirmed on the Consent? (BBP_Patient_Q4.2)		Number of patients who received a patient information sheet/s on blood transfusions or blood components	Total number of patients audited who received a blood or blood product transfusion in the current admission

In addition, we recognise that each facility will define when the audit will take place, how often, how many patients to audit and who will perform the audit.

Queensland Health facilities have the ability to enter their audit data on-line using an existing secure electronic web-based system, Measurement Analysis & Reporting System (MARS), available via the Queensland Health intranet. Please email mars@health.qld.gov.au for further information.

We recognise and appreciate that there may be gaps in the scope and questions included in these tools, however, as this is a **'Work in Progress'**, future versions will build upon the existing scope and questions, and incorporate staff feedback and suggestions for improvement.

The Patient Safety and Quality Improvement Service, Clinical Excellence Division, welcomes feedback on the audit tools and the measurement plans, to ensure the tools meet the needs of Hospital and Health Services. We appreciate any feedback you can provide for the next version.

Please email Patient Safety and Quality Improvement Service on PSQIS_Comms@health.qld.gov.au for feedback or comments.