

Participation in UK Haemovigilance

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Authors: *Debbi Poles, Chris Robbie and Paula Bolton-Maggs*

Reporting in 2017

Participation in UK haemovigilance became more streamlined in March 2017 following the introduction of 'Phase 2' of the unified UK haemovigilance project. This development aimed to link the separate online-reporting systems of the SHOT database (Dendrite), and the Medicines and Healthcare Products Regulatory Agency (MHRA) reporting system, serious adverse blood reactions and events (SABRE).

Following successful implementation, there is now a single point of entry to the system via SABRE, and reports to SHOT are accessed by clicking a link from within the SABRE workspace which allows reporters direct access to the associated SHOT questionnaire. This has reduced the need for a separate login, and has been well received amongst regular users (<https://www.shotuk.org/shot-surveys/>).

Participation in UK haemovigilance remains very high, and in the calendar year 2017 there were only two registered National Health Service (NHS) Trusts/Health Boards that did not make reports to either SHOT or the MHRA.

Analysis by the MHRA shows that only 31/280 SABRE accounts have not made a single report since the start of 2017 (Figure 2.1) and all, apart from three very small individual NHS hospitals in Scotland, are either private hospitals or facilities demonstrating low activity. Most reporters have reported at least once in the preceding two months. This shows that for the majority of hospitals at least, participants are actively engaging in the UK haemovigilance reporting programme.

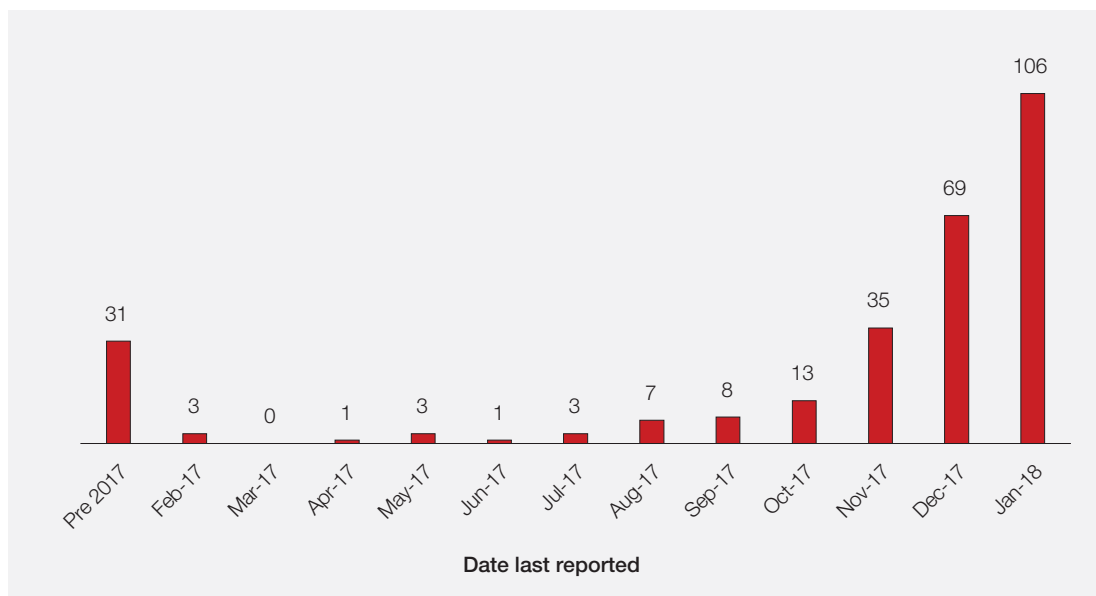
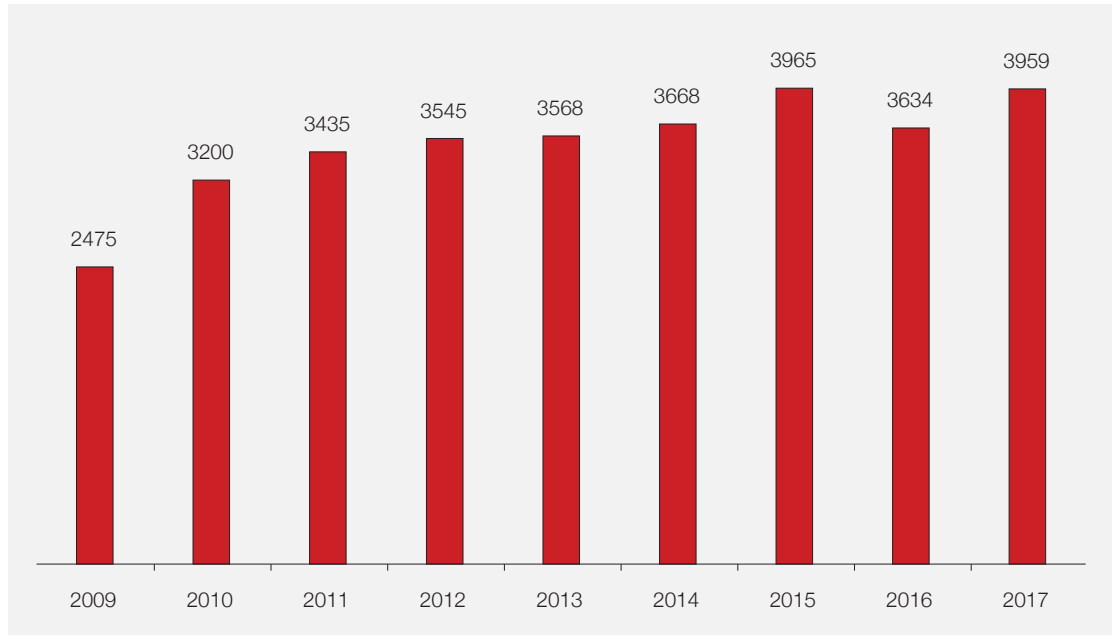


Figure 2.1:
The last time a report was received on SABRE from an active SABRE account

The introduction of the new combined reporting system has meant that now **all** reports made on SABRE are transferred to the SHOT database automatically. This has resulted in a small increase in the number of reports received by SHOT, although any that are not reportable to SHOT are subsequently withdrawn. In addition, a new reporting mechanism for anti-D immunisations has been added to the

SHOT database, which was previously a paper-based system, and this has also increased the number of reports received. Both factors have contributed to reporting levels rising again following a slight dip in 2016.

Figure 2.2:
Number of reports submitted to SHOT 2009-2017

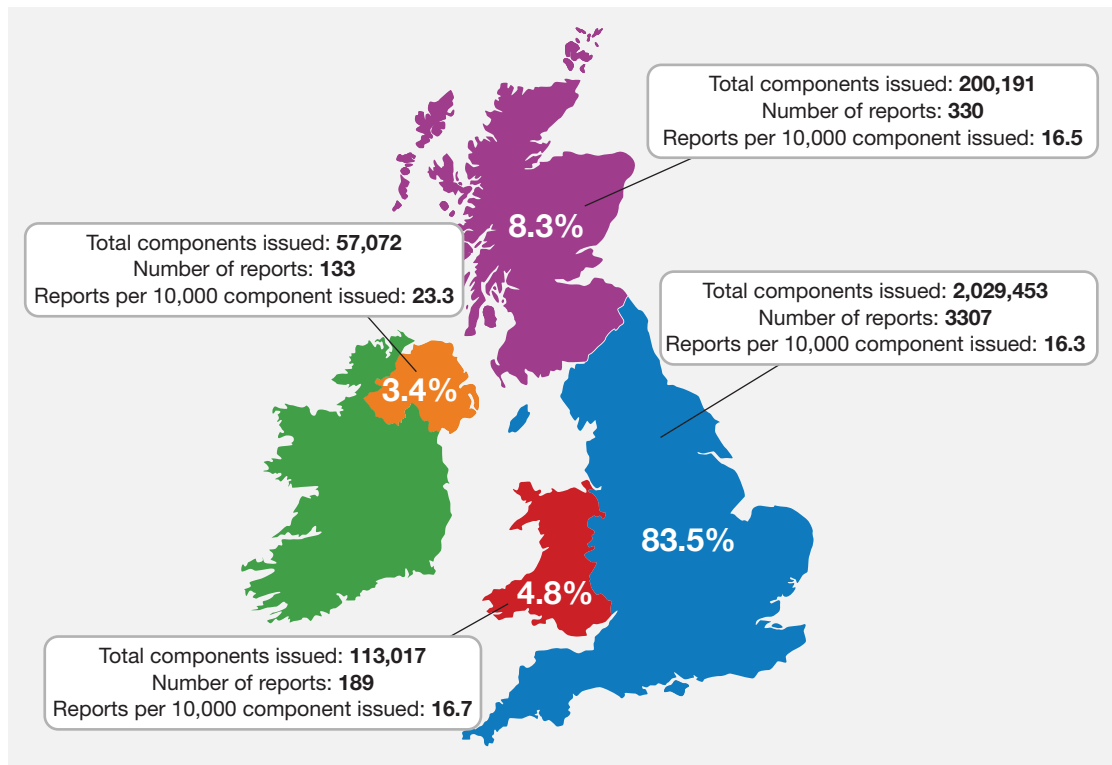


SHOT reporting by UK country

In total, 3959 reports were submitted to the SHOT database in 2017 and the breakdown by country, including component issues, is shown in Figure 2.3.

Full tables containing the breakdown of data from 2017 and previous years can be found in the supplementary information on the SHOT website www.shotuk.org.

Figure 2.3:
Percentage of SHOT reports submitted by UK country



Cases included in the 2017 Annual SHOT Report n=3230

The total number of reports analysed and included in the 2017 Annual SHOT Report is 3230. This is an increase of 139 from the 3091 reports analysed in the 2016 Annual SHOT Report. This number does not include 66 reports of anti-D immunisation.

The number of reports excluding 'near miss' (NM) and 'right blood right patient' (RBRP) is 1671 (1581 in 2016).

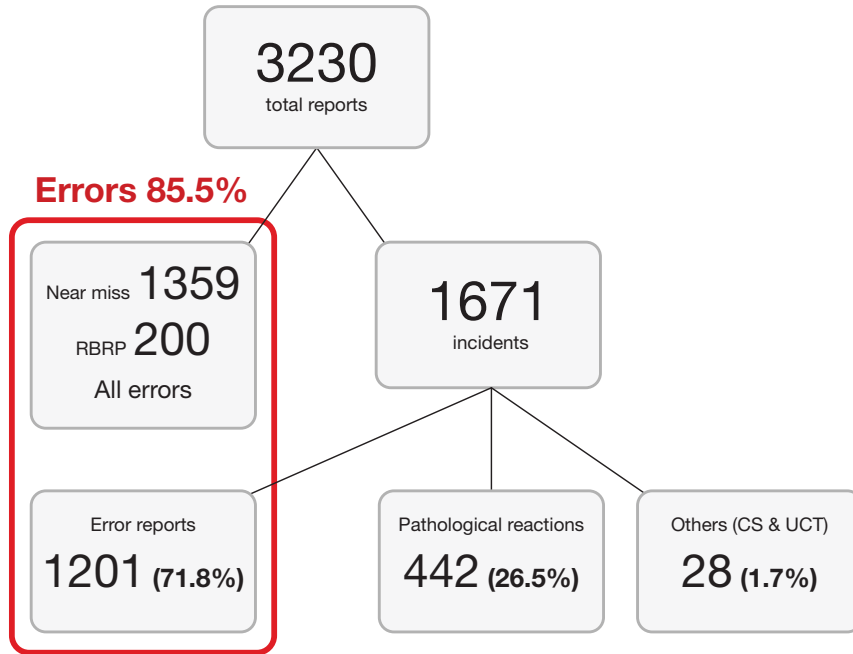


Figure 2.4: Categorisation of reports analysed in 2017 n=3230

RBRP=right blood right patient; CS=cell salvage; UCT=unclassifiable complications of transfusion

Analysis of errors by location

The trends of error reports for different locations have been updated and included again this year. Emergency departments have continued the upward trend in reporting, and account for an increasing percentage of all error reports to SHOT, from approximately 5% of all errors in 2010 to almost 10% in 2017.

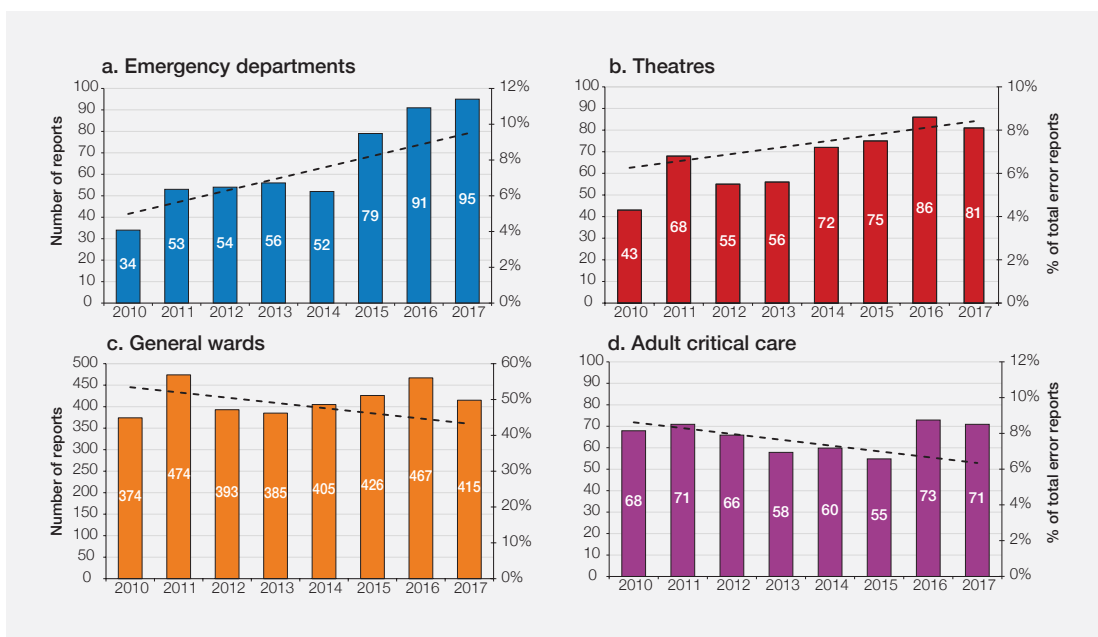


Figure 2.5: Trend of error reports from different departments