

To: ICS Clinical Leads, ICS Operational Leads, HTC Chairs

RE: BHNOC ICS WORKSTREAM

3<sup>rd</sup> October 2022

Dear Colleagues

The Blood Health National Oversight Group (BHNOC) has the pan-Wales role of delivering safe transfusion practice through a collaborative system leadership approach and empowering health boards to promote appropriate use of blood through the use of Prudent Healthcare and Patient Blood Management (PBM) principles (for further information please visit <https://bhnoc.wales.nhs.uk/>).

In June the BHNOC established Intraoperative Cell Salvage (ICS) as one of its key workstreams aligning it with other PBM interventions such as management of preoperative anaemia as an essential part of blood conservation strategy.

Critical to supporting the activity in this workstream is the All Wales ICS Network (AWICSN) which has already been an excellent step forwards for ICS over the past 2 years. We have a unique opportunity as a devolved nation to really drive forward the usage, safety and improved efficacy of ICS for the benefit of our patients, and the preservation of blood stocks.

Recent global events have led to a critical shortage of allogeneic blood units being available across the whole of the UK, in Wales we have managed to return to a reasonable level with regards to blood stocks, but the supply chain continues to remain fragile and there is still a significant risk that we will have acute shortages in the future. The use of allogeneic blood also confers on the patient an additional risk of immunological or infectious complication.

As chair of the AWICSN and workstream lead I wanted to update you with our goals for the coming months and years as we try and ensure that ICS forms an integral part of our blood health management across Wales.

Currently we recommend as a minimum that;

1. Each health board has a nominated clinical lead for ICS. This should be a clinician, is often an anaesthetist but could be any interested clinician, providing clinical oversight of ICS
2. Working alongside the clinical lead should be an operational lead for each site where ICS is provided. This is often an ODP but can be anyone who has the necessary working knowledge of ICS to provide supervision, education, training and ongoing troubleshooting for the machines
3. ICS should be a standing agenda point at all HTC meetings, with the clinical lead reporting to the HTC. All SHOT reportable events involving ICS should be reported via the HTC SHOT lead
4. Each health board should have a cell salvage policy which encourages best practice and ongoing patient safety. These are widely available for adaptation
5. Health boards should include their ICS strategy as part of the Blood Shortage Plan
6. Each site providing ICS ensures that data for the usage of ICS is captured and returned to WBS, and this is also entered into the patient record.

As an ideal we would like to see;

1. A team of clinicians and associates working together to maximise the opportunity for ICS use in their health board
2. Regular updates and involvement of the surgical directorates regarding the availability of ICS and gaining feedback/buy-in from these areas
3. Regular feedback to the AWICSN to help us share knowledge, learning and understand any barriers together as an integrated All-Wales group.

The AWICSN are looking to;

1. Develop a series of KPIs to standardise practice allowing HBs to benchmark activity and learn from key users
2. Revise the data collection/audit form to account for changes in working practices since the original design
3. Create a network and data collection system capable of undertaking the desperately needed research to provide evidence for our practice.

I look forward to working with you all and thank our colleagues at WBS for their ongoing support.

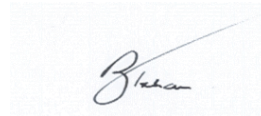
Please don't hesitate to get in touch if there is anything that I can clarify or help with, I look forward to engaging with you all via the network.

Yours sincerely

Louise



Dr Louise Webster  
Consultant Anaesthetist, ABUHB/EMRTS  
BHNOG ICS Workstream Lead



Dr Brian Tehan  
BHNOG Chair

#### Resources

[BHNOG website](#)

Klein AA, Bailey CR, Charlton AJ, et al. *Association of Anaesthetists guidelines: cell salvage for peri-operative blood conservation 2018*. *Anaesthesia* 2018; 73; 1141–50.

UK Cell Salvage Action Group: [Framework for \[ICS\] Service Provision](#)

NICE Interventional procedures guidance [IPG] 144 (2005): [Intraoperative blood cell salvage in obstetrics](#)

UK Cell Salvage Action Group: [Technical Factsheets and Frequently Asked Questions](#)