

# Blood Health National Oversight Group (BHNOC)

## Transfusion Risk Group (TRG)

### Terms of Reference

## 1. Purpose

One of the strategic aims of the NHS Wales Blood Health Plan<sup>1</sup> is to place safety and quality at the core of care, reducing variability and supporting innovation and development. Key to this is minimising harm from transfusion by reducing risks associated with transfusion practice. The BHNOC SHOT Working Group was established to support implementation of recommendations from SHOT (Serious Hazards of Transfusion), a UK haemovigilance scheme. The Infected Blood Inquiry (IBI) report and specifically recommendation 7e<sup>2</sup> emphasises the importance of SHOT reporting and implementation of recommendations. From July 2025, the SHOT recommendations have been replaced by the SHOT Transfusion Safety Standards<sup>3</sup> to address recurring trends and embed a proactive approach to enhance safety.

The online platform, SABRE (Serious Adverse Blood Reactions and Events) is used to report all haemovigilance incidents to the Medicines and Healthcare products Regulatory Agency (MHRA) deemed as serious adverse events (SAE), serious adverse reactions (SAR) and/or SHOT reportable.

The BHNOC recognises that the MHRA and SHOT only captures a proportion of incidents related to blood transfusion and that a broader risk oversight of other potentially high risk or trending incidents reported locally only is required to truly understand and address this risk within Wales.

As a result, the established BHNOC SHOT working group has been renamed the BHNOC Transfusion Risk Group (TRG) to monitor the transfusion risk within Wales and support any actions that are generated, whilst also supporting the implementation of any transfusion safety recommendations and standards including SHOT.

## 2. Aim

The aim of the TRG is to provide oversight of transfusion risk within Wales, with opportunity for shared learning and to develop actions for mitigation and escalation where required. This will include consolidation of compliance metrics relating to recommendations and standards from a range of relevant sources, including SHOT. The TRG will collaborate in determining the root cause of incidents, identifying benchmarking opportunities, will develop tools and resources for national use and will lead communications relating to risks associated with transfusion. This will ensure a consistent approach and prevent duplication of efforts to optimise the workforce. This will be achieved through working in partnership with key healthcare professionals and subject matter experts within the spheres of transfusion practice, hemovigilance and patient quality and safety.

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### 3. Governance

The TRG is accountable to the BHNOC and follows recognised governance pathways defined in the BHNOC terms of reference<sup>4</sup>.

### 4. Chair

The TRG group will be chaired by a representative from within the core membership group and endorsed by the BHNOC. A deputy Chair will also be recruited once the group is fully established. Term of office in this role is a minimum of 2 years. The Terms of Reference will be reviewed at a minimum of every 2 years.

### 5. Membership

The membership will be coordinated to ensure equitable representation from NHS Wales Health Boards (HBs). Should a core member be unable to attend, it is expected that a designated deputy will attend in their place wherever possible. A quorum of 5/9 membership representation is expected to ensure valid and equitable decisions can be made. This must include representation from at least 4/6 Health Boards and include the following key members\*.

Members are expected to provide a feedback mechanism to the groups they represent.

<b><i>Core Membership</i></b>
Welsh Blood Service (WBS) Laboratory representation
WBS Blood Health Team (BHT) representation*
Serious Hazards of Transfusion (SHOT) representation*
All Wales Transfusion Practitioners (TP) Group representatives*
Transfusion Laboratory Managers (TLM) Group representatives*
Pathology Quality Lead representative*
Patient Quality and Safety representation
National Risk Pool Representation
Welsh SHOT UK Collaborative Reviewing and reforming IT processes in Transfusion (SCRIPT) representation
<b><i>Non-core Members</i></b>
Members to be invited as required/relevant

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## 6. Meeting Format & Documentation Required

The TRG will meet quarterly prior to the BHNOG meetings; TRG meetings will be held virtually over MS Teams.

The BHT will provide administration support.

The following documentation will be required:

- Notes of the preceding meeting, action and decision log
- Documentation supporting agenda items
- Quarterly BHNOG highlight reports

## 7. Remit

The remit of the TRG is to:

- Develop a mechanism to have oversight of risk and incidents related to blood transfusion – including but not exclusive to SHOT and MHRA reportable incidents
  - SHOT has identified over a number of years that delays to transfusion is a significant risk, and this will be included within this oversight
- Monitor trends and develop recommendations or actions to mitigate identified risks
- Escalate risk and BHNOG support where required
- Monitor and where possible, support implementation of SHOT safety related standards and other recommendations relating to blood transfusion. This may include coordination of gap analysis and benchmarking tools.

## 8. References

<sup>1</sup>The NHS Wales Blood Health Plan 2024-2027

<https://bhnog.wales.nhs.uk/wp-content/uploads/2024/04/BHP-2024.pdf>

<sup>2</sup>Infected Blood Inquiry: The Report 2024

[https://www.infectedbloodinquiry.org.uk/sites/default/files/Volume\\_1.pdf](https://www.infectedbloodinquiry.org.uk/sites/default/files/Volume_1.pdf)

<sup>3</sup>SHOT Transfusion Safety Standards

<https://www.shotuk.org/transfusion-safety/transfusion-safety-standards/safety-standards/>

<sup>4</sup>BHNOG Terms of Reference

<https://bhnog.wales.nhs.uk/wp-content/uploads/2025/12/BHNOG-ToR-V3-2025.pdf>

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