Optimization of Transfusion Administration Process: A Quality Improvement Process

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Background

- Blood transfusion is a low-frequency procedure for most nurses
- Transfusions carry inherent patient risk
- Regulatory standards are in place to ensure patient safety during transfusion events
- Transfusion documentation within the electronic health record is described as fragmented, confusing, and devoid of "hard stops" to ensure completion of required elements
- Manual audits of transfusion events are labor-intensive for nurse leaders
- Checklists have proven helpful to organize tasks with multiple steps
- Technology can be leveraged to assist nurse leaders in auditing transfusion documentation compliance

Purpose

- Increase clinical nurse compliance with regulatory transfusion documentation
- Reduce time required of nursing leaders for manually auditing transfusion events in the EHR

Methods

To improve transfusion regulatory compliance in a large medical center, a regulatory transfusion documentation checklist was developed in late 2020 based upon review of hospital policies, regulatory requirements, and stakeholder input. A paper copy of the checklist was supplied by blood bank with every non-emergent blood unit to be transfused.

Upon completion of the paper form, the nurse returned the checklist to the manager for review against dashboard data. To streamline ongoing transfusion compliance audits, an EHR-linked transfusion dashboard was created and shared with all nurse managers to illustrate individual nurse compliance on the six aspects of regulatory transfusion documentation.

Results

A total of 2500 transfusion events were assessed across the medical center.

Compliance with regulatory transfusion documentation increased from 62% to 92% following implementation of the checklist. Subsequent TJC and CMS laboratory and hospital surveys reflected compliance with transfusion documentation regulations.

Nursing leadership reported that the new automated reports facilitated improved patient care due to an increase in transfusion regulatory compliance, enhanced nursing accountability and action planning to support compliance, a reduction in manager transfusion reporting workload, and streamlined transfusion compliance reporting to senior leadership.

Conclusion

The process of using a paper blood transfusion checklist combined with EHR-linked dashboard auditing of transfusion compliance increased compliance with regulatory transfusion documentation and reduced nurse manager workload.

Implications for Practice

Deconstructing a complex, high-risk procedure like transfusion into a simple checklist may enhance nursing satisfaction, promote patient safety, and contribute to regulatory compliance. In addition, removal of manual audits may ease nurse leader burden to follow-up with staff who may need coaching on proper documentation practices. Next steps for this work include implementing the paper checklists and transfusion documentation dashboards across all hospitals in the entire region to monitor continued patient safety benefits for transfusion events.

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