SHOT Newsletter October 2025

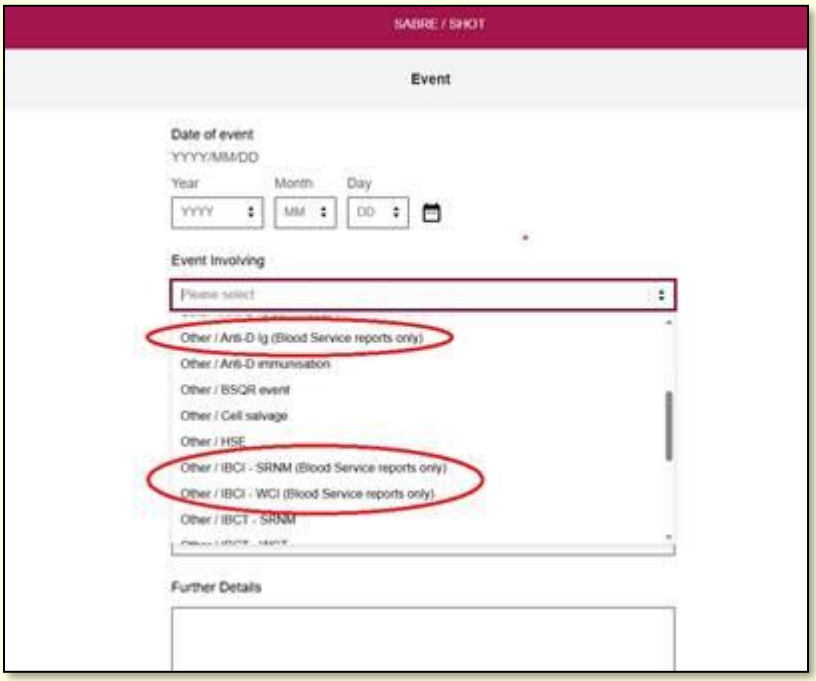
Reporting categories for Blood Services (not for hospital use)

From 5 August 2025, the UK Blood Services began reporting specific error types to SHOT under three new preliminary categories:

- **IBCI-WCI** – Incorrect Blood Component Issued: Wrong Component Issued
- **IBCI-SRNM** – Incorrect Blood Component Issued: Specific Requirements Not Met
- **Anti-D Ig Errors** (Blood Services only)

More details are available on the SHOT website:
https://www.shotuk.org/reporting/incident/blood-services-reporting-criteria/

Three new options have been added to the **'Event Involving'** drop-down list on SABRE. These are **only for use by Blood Services**. The questions linked to these categories are not relevant to hospital incidents.



If you accidentally select one of these categories when submitting a hospital report, please contact the SHOT team for help in updating the category on the SHOT database.

Hospitals should continue to submit reports to SHOT as usual, even if the error originated in the Blood Service. Your reports are essential for ensuring patient safety and supporting haemovigilance across the system.

CONTACT DETAILS
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SHOT Serious Hazards of Transfusion

Website updates

Anti-D cumulative data page

A cumulative data page is now-available for Anti-D immunoglobulin errors. The page contains: previous recommendations, cases, resources, chapters and much more. To access the page, click here

Cases from the Annual SHOT Report 2024

All case study write ups featured in the Annual SHOT Report 2024 have been collated and are now available on the report webpage. You are free to use these examples in your teaching material or other presentations, but please do not alter the details as the copyright to this material belongs to SHOT. To access the page, click here.

National pathology week 2025

National pathology week will take place from 3–9 November. The theme for 2025 is 'Pathology Solutions', which is bound to inspire exciting interesting discussions around innovation and new ideas in disease prevention, diagnosis, and treatment.

Keep an eye on the SHOT website for our interactive weeklong calendar showcasing our pathology resources!

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New community resources

Revised SaBTO guideline on patient consent and shared decision making

The revised guidelines from the expert advisory committee on the Safety of Blood, Tissues and Organs (SaBTO) on patient consent and shared decision-making for blood transfusion has been released in the British Journal of Haematology.

"The purpose of these updated Safety of Blood, Tissues and Organs (SaBTO) guidelines is to enhance the provision of information to patients about blood transfusion, ensure an effective process for obtaining patients' consent and support shared decision-making."

Received: 19 June 2025 | Accepted: 25 July 2025
DOI: 10.1111/bjh.70075

GUIDELINE

BJHaem

Guidelines from the expert advisory committee on the Safety of Blood, Tissues and Organs (SaBTO) on patient consent and shared decision-making for blood transfusion

Michael F. Murphy[1,2,3] | Damien Carson[4] | Anwen Davies[2] | Stephanie Ditcham[5] | Graham Donald | Roger Graham | Lizzie Hutchinson[2] | Paul Kerr[6] | Denise McKeown[7] | John Moppett[8] | Shruthi Narayan[1] | Paolo Polzella[2] | Ella Poppitt[1] | Megan Rowley[9] | Tracey Shackleton[10] | Julie Staves[2] | James Neuberger[11]

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[8]Bristol Royal Hospital for Children, Bristol, UK
[9]Scottish National Blood Service, Edinburgh, UK
[10]Alder Hey Hospital, Liverpool, UK
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Summary
Evidence from national audits of practice indicates that the provision of information to patients about transfusion and the taking of consent to transfusion have not improved in recent years. Although the final report of the Infected Blood Inquiry did not make a specific recommendation about consent to transfusion, it emphasised the need for cultural change, the importance of openness and giving patients a voice. The purpose of these updated Safety of Blood, Tissues and Organs (SaBTO) guidelines is to enhance the provision of information to patients about blood transfusion, ensure an effective process for obtaining patients' consent and support shared decision-making. The guidelines emphasise that there is a duty on staff administering a transfusion to check that the documentation for consent is present and valid before commencing the transfusion. Hospitals and other healthcare facilities must facilitate this step by ensuring that documentation for consent can be easily found in a standard format and location in the patient's paper or preferably their electronic record. They should employ mechanisms through their arrangements for clinical governance to support the training of all staff who may take consent to transfusion and monitor the implementation and compliance with these SaBTO recommendations with subsequent improvement plans developed and implemented if necessary.

KEYWORDS
blood transfusion, consent to transfusion, patient information, refusal of transfusion

Want to know more?....

Many supporting documents will be released soon. These include:
Appendix 1: Summary of recommendations
Appendix 2: Shared decision process for consent
Appendix 3: Examples of methods to document consent
Appendix 4: Training resources and additional information

Click here to access the revised guideline on patient consent

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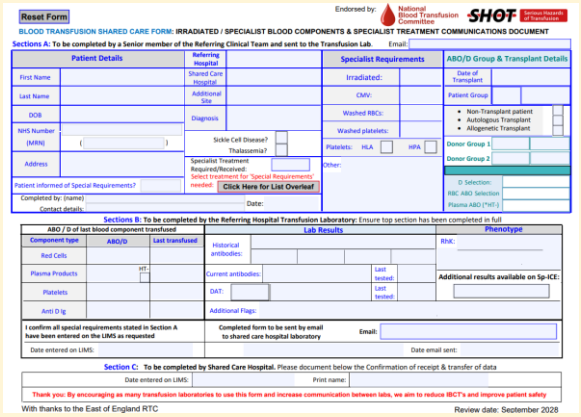
SHOT Serious Hazards of Transfusion

National blood transfusion shared care form

- SHOT have collaborated with the NBTC to create a national shared care form. This form is a patient safety initiative to improve shared care transfusion practices.
- We are encouraging all organisations to use this form, when communicating shared care needs between clinical teams and laboratories, as well as between different laboratories, as it covers all aspects of shared care and has been vigorously reviewed by a range of groups and professionals.
- The form is an interactive PDF, it does not need to be printed, and details can be directed inputted into the form.
- Please download the form prior to editing. We recommended that the form is saved on a local quality management system to ensure document control. Guidance on completion is incorporated into the form.


Reset Form

Endorsed by: National Blood Transfusion Committee, SHOT Serious Hazards of Transfusion

BLOOD TRANSFUSION SHARED CARE FORM: IRRADIATED / SPECIALIST BLOOD COMPONENTS & SPECIALIST TREATMENT COMMUNICATIONS DOCUMENT

Sections A: To be completed by a Senior member of the Referring Clinical Team and sent to the Transfusion Lab. Email:

Patient Details | Referring Hospital | Specialist Requirements | ABO/D Group & Transplant Details

First Name | Shared Care Hospital | Irradiated: | Date of Transplant

Last Name | Additional Site | CMV: | Patient Group

DOB | Diagnosis | Washed RBCs:

NHS Number (MRN) | Sickle Cell Disease? Thalassemia? | Washed platelets:

Address | Specialist Treatment Required/Received: Select treatment for 'Special Requirements' needed: Click Here for List Overleaf | Platelets: HLA HPA | Other:

Patient informed of Special Requirements? | Completed by: (name) Date: | Contact details:

- Non-Transplant patient
- Autologous Transplant
- Allogeneic Transplant

Donor Group 1 | Donor Group 2 | D Selection: | RBC ABO Selection | Plasma ABO (*ref-)

Sections B: To be completed by the Referring Hospital Transfusion Laboratory: Ensure top section has been completed in full

ABO / D of last blood component transfused

Component type	ABO/D	Last transfused
Red Cells		
Plasma Products		
Platelets		
Anti D Ig		

Lab Results: Historical antibodies: | Current antibodies: | Last tested: | DAT: | Last tested: | Additional Flags:

Phenotype: RhK: | Additional results available on Sp-ICE:

I confirm all special requirements stated in Section A have been entered on the LIMS as requested | Completed form to be sent by email to shared care hospital laboratory Email:

Date entered on LIMS: | Date email sent:

Section C: To be completed by Shared Care Hospital. Please document below the Confirmation of receipt & transfer of data

Date entered on LIMS: | Print name:

Thank you: By encouraging as many transfusion laboratories to use this form and increase communication between labs, we aim to reduce IBCT's and improve patient safety

With thanks to the East of England RTC | Review date: September 2028

Click here to access the Blood Transfusion Shared Care form

Never Event consultation

Detailed findings from the 2024 consultation on the Never Events framework have been published. Further information, including a summary of the consultation outcomes and details of next steps can be found on the Never Events framework: 2024 consultation findings webpage. The detailed report can be found here

Key findings

The breakdown of favoured option across all respondents was:

- Option 1– no change, continue with the existing framework: 8% (70)
- Option 2 – abolish the Never Events framework and list: 18% (152)
- Option 3– revise the list of Never Events to only include those with current barriers that are 'strong, systemic, protective': 26% (224)
- Option 4 – revise definition of and process for Never Events to create a new system that does not require all relevant incidents to be 'wholly preventable': 48% (418)

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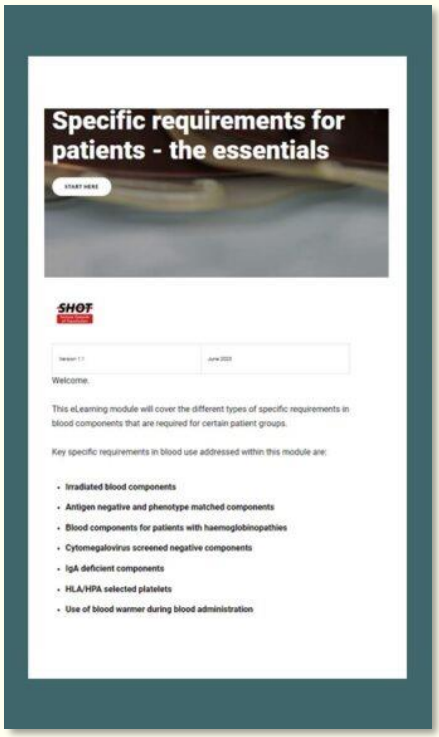
Spotlight on: E-learning

Did you know SHOT e-learning modules have been developed and are relevant for all healthcare staff, clinical and laboratory, involved in the transfusion process? One such module is:



Specific requirements for patients – the essentials

This includes key information on the following components:

- Irradiated
- Antigen negative and phenotype matched
- Cytomegalovirus screen negative
- IgA deficient
- HLA/HPA selected
- Use of a blood warmer

This is available on the NHS Learning Hub. To access the e-learning modules please click here: NHS Blood and Transplant (NHSBT) – Learning Zone. You need to be logged in to be able to see the courses and they can be accessed under the SHOT catalogue.

For more information visit: https://www.shotuk.org/resources/e-learning/

Human Factors and Ergonomics (HFE) courses

The SHOT team are excited to announce our next **Human Factors and Ergonomics in transfusion courses**. These **full day workshops** are **interactive, free to access** and will be hosted on **MS Teams**

Monday 3rd November 2025 **Register here**

Thursday 27th November 2025 **Register here**

Monday 15th December 2025 **Register here**

Places are **limited to 30** on a first come first served basis.
The course is delivered over one day, and the content is the same on all dates.
You only need to register for and attend one of the available dates.
Click on the links above to take to the registration page.
Don't miss out on this opportunity!

More information can be found here

Meet the Experts (MTE) webinars

A 20-minute overview of chapter content including: trends, highlights and example cases **followed by 40-minute Q&A**

Haemolytic Transfusion Reactions (HTR) & Haemoglobinopathies	**Friday 14th Nov 13:00 CET (MS Teams)**	**Click here to register**
Acknowledging Continuing Excellence (ACE)	**Wednesday 17th Dec 13:00 CET (MS Teams)**	**Link coming up shortly**

Click here for all the latest 'Meet The Experts' Virtual Sessions recordings

Forthcoming webinars

IHN: Partnering with patients is key to safer transfusion (click here to see the flyer)	**Tuesday 21st Oct 13:00 CET (Zoom)**	**Click here to register**
Transfusion Safety Standards: From Paper to Practice (click here to see the flyer)	**Wednesday 22nd Oct 13:00 CET (MS Teams)**	**Click here to register**
SHOT & National Comparative Audit (NCA) (click here to see the flyer)	**Tuesday 4th Nov 13:00 CET (MS Teams)**	**Click here to register**

Upcoming Conferences

RCGP Annual Conference and Exhibition 2025 9-10 October 2025 (Newport, Wales)	**BBTS Annual Conference** 14-16 October 2025 (Harrogate)	**UKNEQAS BTLP** 25th November (Birmingham)
Register here	**Register here**	**Register here**

If you would prefer not to receive haemovigilance communications from SHOT, then please email SHOT.unsubscribe@nhsbt.nhs.uk and you will be removed from the distribution list.

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