PATIENT BLOOD MANAGEMENT STEERING COMMITTEE

“ Achieving better patient outcomes through national policy and drivers to support state and territory programs in encouraging patient blood management”

Committee Terms of Reference

Approved by Leigh McJames
General Manager
September 2014
Introduction

The overarching aim of the Patient Blood Management Steering Committee (PBMSC) is to improve patient outcomes by guiding the implementation of Patient Blood Management (PBM) practices throughout the Australian health care system.

This document details the governance arrangements and Terms of Reference (TOR) for the PBMSC. These governance arrangements and TOR are approved by the NBA’s General Manager. The TOR and key membership considerations have been provided to all jurisdictions. The PBMSC will report, via the NBA’s General Manager, to the Jurisdictional Blood Committee (JBC).

Definition and Rationale for PBM

The aim of patient blood management is to improve outcomes for each patient by minimising or avoiding unnecessary exposure to blood components. A multidisciplinary team determines, with the patient, the specific management plan, which makes every reasonable endeavour to:

- optimise the patient’s own blood volume, especially red cell mass
- minimise the patient’s blood loss, and
- optimise the patient’s physiological tolerance of anaemia.

The rationale for Patient Blood Management addresses Evidence-Based Transfusion Medicine Practice and Stewardship of donated blood, to:

- view a patient’s own blood as a valuable and unique natural resource that should be conserved and managed appropriately
- acknowledge that altruistically donated blood is a valuable, unique and costly resource that is held in trust, and that it will only be used as therapy when there is evidence for potential benefit and potential harm will be minimised
- consider transfusion alternatives
- ensure quality products are available in a timely and safe manner
- ensure potential hazards are considered and balanced against the benefits, and
- explain the benefits and risks to the patient/relatives.
Scope and Governance Structure

The PBMSC has been established to:

- provide expert advice on
  - the design and delivery of PBM activities
  - PBM implementation and evaluation initiatives
  - system based approaches to sustain PBM practices
  - the management, administration and use of blood and blood products
  - education and training priorities
  - practice performance improvement
  - data and system requirements
- influence the uptake of PBM practice
- provide advice on intergovernmental coordination and cooperation on PBM implementation activities
- monitor guideline development projects to ensure they meet their objectives
- link the PBM program activities to deliver the priorities for the National Safety and Quality Health Service (NSQHS) standards
- integrate the PBM program with the Australian Commission on Safety and Quality Health Care (ACSQHC) initiatives for delivery to health providers and their safety and quality framework
- network with other NBA committees to share information as appropriate.

The PBMSC will monitor and provide guidance on guideline development projects as referred by the NBA including:

- consideration of resourcing and scope
- review and approval of revisions to the Project Plan and Terms of Reference, and
- advice on the design and execution of implementation and evaluation.

The PBMSC will promote the delivery and implementation of the NSQHS standards, including the management, administration and use of blood and blood products under NSQHS Standard 7 blood and blood products.

Figure 1 outlines the governance arrangements of the PBMSC and the committees reporting to the NBA.
Committees Reporting to the NBA and communication channels to and from the PBM Steering Committee

NBA

JBC

National Ig Advisory Committee

Specialist Advisory/Working Committee/s

Education and Training

Haemovigilance Advisory Committee

National PBM Steering Committee

Specialist Advisory/Working Committee/s

Expert Working Group

CRGs

Blood Sector Systems Steering Committee

Specialist Advisory Committee/s

National Haemophilia Management Committee

Specialist Advisory/Working Committee/s

Reporting

Communication
Relationship of PBMSC to other NBA committees

The PBMSC will communicate, through the NBA secretariat and cross membership to other NBA committees to manage any common areas of interest. There are three key product related committees. These are:

- Patient Blood Management Steering Committee (PBMSC) which predominantly focusses on the appropriate use of fresh products (and avoidance of unnecessary exposure).
- National Immunoglobulin Advisory Committee (NIGAC) which focusses on appropriate use of immunoglobulin products.
- Australian Haemophilia Centre Directors’ Organisation which focusses on appropriate use of clotting factors.

The NBA manages many of the functions that are common to all three committees without the need for additional input. These are depicted in light green below. There are some circumstances however, when specific committees are required. (eg when there is a need for specialist input or when there is a need national consistency). Committees for these purposes are depicted in dark green below.
Desired Outcomes and Objectives

The purpose of establishing the PBMSC is to provide high level advice and assistance to the NBA General Manager and other staff to assist in achieving the following goals:

- **Successful strategies are deployed to:**
  - assist health care professionals to practice in accordance with the PBM and other best practice guidelines
  - assist hospitals to gain accreditation against the NSQHS Standard for Blood and Blood Products.
- **PBM and other best practice initiatives lead to genuine changes in clinical practice and improvements in patient outcomes.**
- **Collaboration between governments and organisations leads to better practice and improved patient outcomes.**
- **PBM and other Guidelines are delivered to a high quality, at an efficient price, in accordance with their stated objectives.**

Membership

**Chair**

The Chair will be appointed by the NBA General Manager. The General Manager may nominate a Deputy General Manager to be a temporary alternate Chair where the Chair is unable to attend a meeting or is otherwise temporarily unable to perform the role of Chair.

The position of Chair will be required to undergo a review process every two years, or at the discretion of the NBA General Manager. The position will be filled by an existing committee member chosen by the NBA General Manager. Where possible, the Chair will continue as a member on the committee to maintain continuity.

**Members**

Members are appointed by the NBA General Manager after consultation with the PBMSC Chair. The PBMSC is a small group comprising members with expertise and knowledge in the health sector, blood management and quality and safety. This small group will enable a focussed approach to considering PBM activities prior to broader consultation. In addition to the Chair the current membership of the PBMSC has the following expertise and representation:

- Patient Blood Management Expert and Chair
- Patient Blood Management Guidelines
- Clinical Academic Expert
- General Practice and community medical practice
- Consumer Health Forum
- Quality Improvement/Hospital Admin
- Education
• State clinical coordinator of Patient Blood Management
• Private pathology
• Australian Red Cross Blood Service
• Australian Commission on Quality and Safety in Healthcare
• Private Hospitals

A list of members observers and expert/advisors is at Attachment 1.

Members are responsible for obtaining all approvals necessary to accept appointment as a member and undertake the role of member.

Membership will be required to undergo a rolling review process with a ‘half-spill’ each review, every two years, or otherwise at the discretion of the NBA General Manager. There will be a maximum term of membership not exceeding eight years.

Observers
The Australian Government Department of Health and Ageing and two State/Territory JBC representatives participate on the PBMSC as observers.

Observers are invited to participate in discussions but do not have voting rights on decisions. The NBA also acts as an observer on the PBMSC.

Expert advisors
The PBMSC will be kept to minimum size to ensure that it is focused and manageable. Therefore, additional expert advice will be sought on an ad hoc basis from experts on specific issues as required.

These expert advisors will report directly to the PBMSC. Advice may be sought from a range of organisations including but not limited to:
• Medicare Australia
• Therapeutic Goods Administration
• Pharmacists (i.e. representative of the Pharmaceutical Society of Australia)
• Clinical change experts (such as the Sax Institute)
• Clinical experts in a specific field (e.g. iron therapy)
• National Prescribing Service (NPS)
• Specialist Advisory/Working group of expert for fresh and other blood products
• Transfusion Nurse (i.e. representative from the Royal College of Nursing), and
• Consumer organisations

Quorum of the PBMSC
At least four members and one observer must be present before the PBMSC can conduct valid business.

Remuneration and Allowances
Remuneration and allowances for members of the PBMSC will be in accordance with the NBA’s third party travel policy and remuneration of Non-NBA Staff Management Instruction or as approved by the General Manager.

Undertaking/Conflict of Interest
PBMSC members and observers will be required to complete undertakings and comply with the terms of those undertakings, in relation to conflicts of interest, confidentiality, document control and
intellectual property. Members and observers will be required to declare any actual or potential, real
or perceived Conflicts of Interest.

Relevant documents will be provided to members as part of their letter of offer.
Working Arrangements

The working arrangements for the management and governance of activities required to drive a national approach to PBM on behalf of all stakeholders are primarily administered through the PBMSC and the NBA.

The NBA provides the necessary support to allow the PBMSC to perform its functions. This includes secretariat support and other appropriate resources as requested by the Chair.

Role of Chair

The Chair’s main role is to provide leadership to the PBMSC. The Chair will advocate consistency in key messages and ensure the PBMSC carries out its functions effectively and efficiently. Together with the Deputy General Manager and other relevant NBA staff, the Chair will participate in the development of PBMSC agendas and ensure that PBMSC meetings are properly run. The Chair will also provide advice and guidance direct to the General Manager or their delegate on issues as they arise outside of the PBMSC processes to ensure maintenance of momentum.

In undertaking the Chairperson’s roles and responsibilities, the Chair should:

- ensure the PBMSC provides high level advice and assistance to the NBA
- ensure that any PBM activities undertaken by the PBMSC are in accordance with these governance principles
- foster coherence and unity
- ensure the PBMSC has the necessary information and resources to undertake its duties effectively
- undertake public relations activities in relation to PBMSC responsibilities if and when requested by the NBA General Manager
- work with the NBA to:
  - ensure the proper and efficient running of PBMSC meetings,
  - ensure all necessary actions before and after meetings are completed, and
  - coordinate and manage out of session activities of the PBMSC.

Role of Members

It is the responsibility of each PBMSC member to contribute to the success of implementing national policies and drivers that encourage and support PBM. Members of the PBMSC have been appointed based on their specific interests, individual skills and ability to influence stakeholders in their area of expertise or peer group. Members will display their enthusiasm and determination to drive a consistent PBM message.

PBMSC members should:
• provide advice on strategies and initiatives that would influence the uptake of PBM approaches across the healthcare sector, informed by their experience and expertise

• participate in influencing the uptake of PBM initiatives

• gather input on likely responses from their representative organisation or sector to suggested policy and/or initiatives and changes

• actively contribute to setting of the agenda for committee meetings and give input or responses as agreed in meetings

• actively participate in the development of relevant materials to support any research required or to design PBM activities

• ensure that they have access to timely and accurate information, and are well prepared to consider the issues addressed at PBMSC meetings

• provide oversight of, and guidance on the PBM Guideline Implementation plan and tools

• review and provide advice on the adequacy of quality assurance processes used in the development of implementation tools

• express the views of the professional or consumer body they represent and in turn seek their endorsement for activities and initiatives.

Role of NBA

The NBA Deputy General Manager is responsible for oversight of the PBMSC. For the purposes of day-to-day dealings with the PBMSC, the Deputy General Manager may be represented by the Director responsible for the Blood Sector Clinical Development program as notified by the Deputy General Manager to the Chair (subject to any specific powers under the National Blood Authority Act (2003) which require formal delegation).

The NBA will provide funding, project management, secretariat services and administrative support for the PBMSC pending JBC approval. The NBA shall be responsible for:

• seeking relevant approvals and reporting

• establishing the governance framework and operating procedures

• managing contracts for any outsourced activities

• monitoring and managing project finances and resources to ensure they are sufficient

• booking venues and arranging travel, accommodation and meeting arrangements as required and where appropriate

• monitoring, cataloguing and compiling requests for process, data or operational issues

• ensuring that an agenda is circulated, at least one week prior to the meeting, together with any supporting papers after approval from the Chair

• ensuring minutes of meetings are compiled and promptly provided to the Chair for approval

• circulating the minutes within two weeks of the meeting to PBMSC members and observers, as appropriate, and

• following up on agreed action items from meetings.
Role of Observers

PBMSC observers are invited to participate in discussions and provide their advice on the development and implementation of policy and drivers appropriate for national activities that support and encourage PBM. The PBMSC will consider the strategic advice from the observers when considering the most appropriate design and implementation strategies for national PBM activities.

Role of Experts and Advisors

Other influential clinical stakeholders will be invited to contribute from time to time to the PBMSC in relation to policy changes, and design and implementation of PBM activities. Where clarification is required by the PBMSC, expert advisors will be asked to provide the PBMSC with advice to support their decisions around the priority activities.

Meetings

The timing, agenda and mode of meetings will be determined by the NBA and the Chair, after any necessary consultation with members. Meetings will ordinarily be held at the NBA’s premises in Canberra. It is intended that the PBMSC will meet in person at least 2 times per year. Meetings by teleconference of no more than two hours will be used when appropriate and expedient.

Out of session activities

The PBMSC may, in accordance with a process determined by the Chair, undertake activities to give advice or assistance to the NBA out of session. Members may be called upon for ad-hoc advice via email between meetings. They will also be required to actively participate in the development of materials and provide input via the secure web-portal ‘Govdex’ (an online management framework of collaborative initiatives across government and non-government stakeholders).

Contributions will be required on various documents including, but not limited to, statements of requirement for engaging consultants, PBM materials, meeting minutes and out-of-session papers.

Members may also be required to engage in forum style discussions. Members should not undertake out of session activities in their capacity as PBMSC members without the prior approval from the Chair and the NBA.

Conduct

Members of the PBMSC are expected to carry out their role in accordance with the highest ethical standards. A PBMSC member when undertaking PBMSC related functions should:

- act honestly, in good faith and in the best interests of the NBA
- use due care and diligence
- have regard to the interests of all stakeholders of the NBA
- contribute to NBA activities in a co-operative, impartial, well-informed, thoughtful and productive way
- be independent in judgement and actions and take all reasonable steps to be satisfied as to the soundness of advice provided by the PBMSC
 agree with the NBA and Chair on an appropriate response and approach to external stakeholder interest or enquiries relating to the PBMSC work plan

not make improper use of information acquired as a PBMSC member, both during and after the term of appointment, and

not engage in conduct likely to bring discredit upon the NBA.
# Attachment 1 List of Attendees

<table>
<thead>
<tr>
<th>Member</th>
<th>Representative</th>
<th>Expertise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
<td></td>
<td>Patient Blood Management Expert</td>
</tr>
<tr>
<td>General Practice representative(s)</td>
<td>General Practitioner</td>
<td>Craft group expertise</td>
</tr>
<tr>
<td>Patient Blood Management Guidelines representative(s)</td>
<td>Expert working group or Clinical/consumer working group</td>
<td>Guideline development and implementation knowledge</td>
</tr>
<tr>
<td>Consumer representative(s)</td>
<td>Consumer</td>
<td>Patient and consumer information</td>
</tr>
<tr>
<td>Haematology representative(s)</td>
<td></td>
<td>Craft group expertise</td>
</tr>
<tr>
<td>PBM coordinator(s)</td>
<td>Clinical Nurse Consultant</td>
<td>Patient Blood Management implementation</td>
</tr>
<tr>
<td>Representative(s) private pathology provider</td>
<td>Pathologist</td>
<td>Craft group expertise and sector Knowledge</td>
</tr>
<tr>
<td>Australian Red Cross Blood Service</td>
<td></td>
<td>Current providers -Sector Knowledge</td>
</tr>
<tr>
<td>Clinical Academic Expert</td>
<td></td>
<td>Sector knowledge</td>
</tr>
<tr>
<td>Quality and Safety Representative</td>
<td>ACSQHC representative</td>
<td>Blood Standard 7</td>
</tr>
<tr>
<td>Lead Clinicians</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>Quality Improvement/ Hospital Admin</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>Private Hospitals</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>National Blood Authority</td>
<td></td>
<td>Sector knowledge</td>
</tr>
</tbody>
</table>

## Observers

Policy development/Government representatives | Commonwealth, State and territory governments | Sector Knowledge |

## Expert /Advisors

As required

## Secretariat

National Blood Authority | Coordination/project management |