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Introduction

- Haemolytic disease of the foetus and newborn (HDFN) can be prevented with routine antenatal anti-D prophylaxis (RAADP)
- The RAADP should be administered during the pregnancy, according to local guidelines, and within 72 hours of delivery
- This qualitative review was undertaken to determine if early discharge is negatively affecting the administration of RAADP within 72 hours of delivery

Method

SHOT data was reviewed for two years - 2017/2018 and incidents where early discharge may have led to late administration or omission of RAADP were analysed

Results

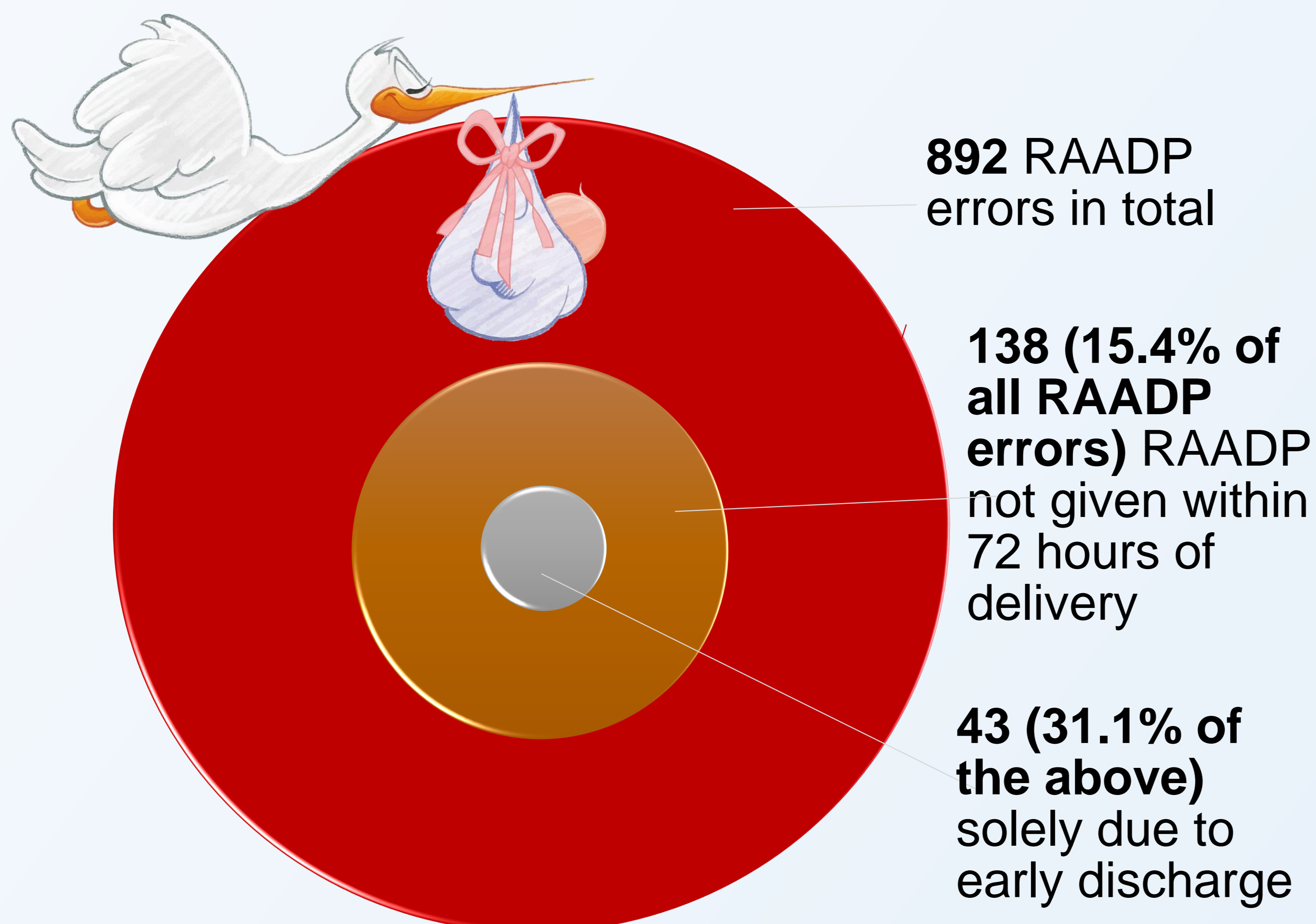
- Errors relating to RAADP in the two years 2017 and 2018 totalled 892 (13.6% of all reports to SHOT)
- There were 138/892 reports (15.4%) where RAADP was not administered within 72 hours of birth

Results

- Of those 138 reports, 43 (31.1%) were solely attributed to the early discharge of the women
- There were only 4 incidents noted to be out-of-hours
- The time range for out-of-hours is from 20:00 to 08:00

Results

- The remaining 95 (68.8%) involved early discharge but had other attributable causes not solely related to the early discharge
- In all these cases the women were identified and did receive RAADP >72 hours after delivery. This was largely administered in the community



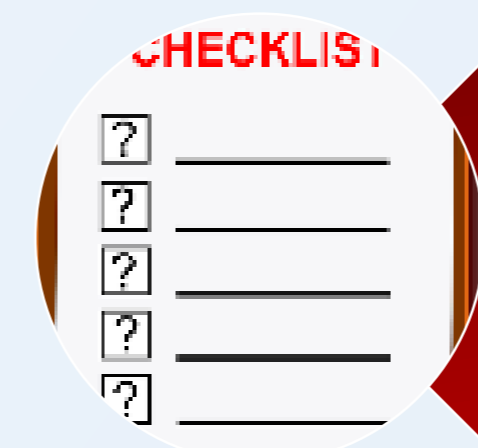
Recurring themes identified



Lack of communication between hospital and community midwifery teams



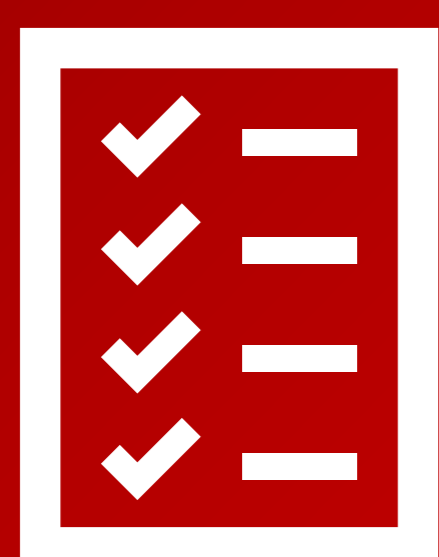
Lack of understanding amongst staff of when anti-D Ig is required



Checklists ticked when RAADP not administered

Conclusions and recommendations

Maternity teams need to have robust systems to administer RAADP within 72 hours of birth



Blood results should be checked prior to discharge and women who require RAADP should be identified



Administration of RAADP could be arranged in the community with a simple standard that each woman who requires RAADP should receive this on day two after delivery day



This standard could form part of the ongoing patient and staff education. Setting such a standard could also improve communication between hospital and community teams

