



# Haematology and Transfusion Scotland (HaTS) Network

## Annual Report 2021/22

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## Background

Managed Diagnostic Networks are defined as co-ordinated groups of health professionals that support diagnostic services to continuously improve service delivery in order to ensure equitable provision of high quality, clinically effective services. Diagnostics, whether delivered in primary, community or secondary care, have an important role to play in achieving NHS Scotland's quality ambitions by contributing to early, accurate and cost-effective diagnosis, monitoring and self-management.

The role of the Haematology and Transfusion Scotland Network is to improve laboratory haematology and transfusion services and foster close and effective links between diagnostic and clinical professionals. This is progressed through setting clear objectives, with delivery monitored through the annual workplan. In order to most efficiently and effectively drive service improvement this is achieved through:

- An annual data collection exercise and benchmarking report. This provides current and relevant data to inform service improvements, workforce planning activities, and horizon scanning, to ensure the network is future-ready and prepared for upcoming developments.
- Being responsive to emerging challenges occurring within the diagnostic community, and facilitating once-for-Scotland solutions.
- Actively engaging with and pursuing demand optimisation and QI projects to ensure optimal use of resources and skills within haematology and transfusion, and that the most efficient and effective service possible is being provided.
- Upholding professional guidelines and standards and supporting the haematology and transfusion communities to maintain these high standards.

## Covid-19 Impact

Since the COVID-19 pandemic was declared in 2020, the Haematology and Transfusion Scotland Network has provided a vital forum for communication and information sharing, in particular in those early days of the pandemic. Due to the impact on the laboratory workload, some network objectives and workstreams had been deferred or paused. As Scotland moves out of legal COVID-19 restrictions into a more 'endemic' environment, previously-paused objectives and workstreams are starting to be resumed in earnest where local capacity allows.

On a more positive note, as highlighted in our 2020-21 report, the pandemic has also brought about new ways of working and positive changes in practice for the network. The proliferation of virtual meetings and online conferencing tools has provided many new ways to deliver training, and has allowed the network to expand representation at meetings, in particular to colleagues from more remote and rural areas for whom in-person travel difficulties were always a limiting factor. This was highlighted when the network assisted with escalating staffing issues being faced by NHS Orkney – a problem which heretofore would not have been as easily escalated in the 'pre-COVID' work environment. The network was able to support the Board in developing a suitable solution.

Multiple key workstreams have still been progressed throughout 2021-22 amid the hurdles of the pandemic emergency, highlights of which are given in the next section.

## **Highlights**

### **ADAMTS13 Testing**

Following the shutdown of the National Laboratories Programme, the Coagulation Subgroup submitted a successful business case for some residual funds to help establish ADAMTS13 testing in Scotland. This testing, to help identify patients with Thrombotic Thrombocytopenic Purpura (TTP), was previously referred to England. This had an obvious knock-on effect in terms of turnaround times and the need to implement mitigating treatments, in some cases before the ADAMTS13 result was even known, with a subsequent impact on the patient journey and care.

Following distribution of funds, the test is now established in both Glasgow and Edinburgh, ultimately reducing costs and clinical risk from unnecessary transportation and plasmaphoresing of patients.

### **National Laboratory Information Management System (LIMS) Development**

The network has continued to provide subject matter expertise to the National LIMS Consortium throughout the tender process, and facilitated communications between stakeholders and the Consortium. With the preferred bidder for the LIMS now in place, the network is focusing on standardisation activities to ensure a swift and effective implementation of the new system when the time comes.

### **Continuing to Connect a Community in Crisis**

The network has continued to play a key role in facilitating important communication in relation to issues arising during the COVID-19 pandemic. The Transfusion Subgroup in particular has continued to meet regularly and enable professionals to identify challenges and agree changes at relatively short notice as blood stocks have wavered. The network also proved a valuable conduit in escalating some important staffing issues being experienced by NHS Orkney due to staff absence and retiral, with temporary solutions now being implemented to deal with this.

### **Annual benchmarking data and Demand Optimisation**

The network's annual benchmarking report highlights where there is variation in haematology testing and the laboratory workforce across Scotland. This allows the opportunity to identify and target areas for improvement within particular diagnostic pathways, or within NHS Boards. It also provides useful data to inform and support both local and national business cases.

The network's Data Subgroup have remained active during the pandemic and have contributed to the development of further data collection for the 2021-22 period, with the collection of transfusion data from SNBTS labs also now becoming 'business as usual' for HaTS data collections.

This year's collection will continue to include data requests supporting the National Demand Optimisation Project as it highlights patterns in service recovery and remobilisation.

## Looking forward

With the increasing moves within Scotland toward an 'endemic' Covid response rather than a 'pandemic' response, it is hoped that more network activities can resume. Over the course of 2022/23, the network will continue to monitor the ADAMTS13 service in Glasgow and Lothian, and begin setting up (in conjunction with the Scottish Clinical Biochemistry Network [SCBN]) a dedicated subgroup forum for remote and rural colleagues in blood sciences.

Also in conjunction with SCBN, work is continuing on the scoping and development of a business case to help resource Serum Free Light Chains (SFLC) testing on a national basis, following a recent change in clinical guidelines recommending the use of this in a first-line myeloma screen in place of Urinary Bence-Jones Protein tests. HaTS is represented on and chairs this group, with many Boards considering SFLC as a haematology test, so the network is a key stakeholder in development of this work.

An in-person Education Day is currently scheduled for June 2022 – the network's second overall, and first since the COVID-19 pandemic began – and the Workforce & Education Subgroup has already developed a draft programme of engaging speakers and activities. A practical training event has also been mooted for later in 2022, with a return to the outline planned in 2020 prior to the pandemic.

A new Inflammatory Markers subgroup will be established to deal with issues surrounding ESR and CRP testing, and their clinically-appropriate use.

The network will also continue to develop all key workstreams noted in the 2022-23 proposed workplan. This includes engaging with Scottish Government colleagues on development of the new national Diagnostics Policy Framework; establishing a new Inflammatory Markers subgroup to look at reducing variation in CRP and ESR testing; and introducing new practical training opportunities with the return to in-person education events.

## Finance

The network has not utilised its budget during this financial year, due to pandemic restrictions preventing the arranging of in-person education events or meetings. It is expected that in-person events will resume in some form during the 2022-23 financial year, with one already planned at time of writing. The network will therefore consider best use of its budget accordingly.

## HATS report against workplan – 2021-22

When defining network objectives please consider the Institute of Medicine’s six dimensions of quality, which are central to NHS Scotland’s approach to systems-based healthcare quality improvement:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

### Key

RAGB status	Description
<b>RED (R)</b>	The network is unlikely to achieve the objective by the agreed end date.
<b>AMBER (A)</b>	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
<b>GREEN (G)</b>	The network is on track to achieve the objective by the agreed end date.
<b>BLUE (B)</b>	The network has been successful in achieving the network objective to plan.

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at	Anticipated Outcome	RAGB status
<b>1. Effective Network Structure and Governance</b> <small>[linked to Quality Dimensions 3,4,5,6]</small>						
2021-01	Ensure appropriate governance through developing Terms of Reference to focus the activities of the HMDS, WFE and Haemoglobinopathy subgroups	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> July 2021	PM / Core Team	The terms of reference for all three subgroups have been drafted and agreed.	An effective network structure enables, an agreed purpose and direction.	<b>B</b>

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at	Anticipated Outcome	RAGB status
2021-02	HaTS will engage with the new, emerging strategic governance structure for diagnostic services in Scotland. This will ensure HATS play a key role in shaping the structure to ensure it is fit for purpose and is a structure the community can utilise and engage with in the future to progress pieces of work or challenges as required.	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	SPM/PM/Core Team	<p>Members of the HaTS core team have attended relevant LEB and DiSSG meetings on the proposed strategic network throughout 2021-22, as well as a number of engagement sessions with key policy drivers within Scottish Government.</p> <p>Network steering group members have been kept continually updated on the progress of the new strategic model, with feedback received via quarterly LEB meetings.</p>	HATS is able to contribute to and be guided by the strategic vision for diagnostic services in Scotland	<b>G</b>
2021-03	Continue to develop and update the strategic vision for service improvement, as articulated in the five-year work plan and the QI Strategy. This will ensure the most appropriate, efficient and effective objectives are being identified within each work stream.	1 <sup>st</sup> June 2021 – 30 <sup>th</sup> March 2022	SPM/PM/Core team	The network has continued to support workstreams which develop and improve services for patient care – including the ADAMTS13 and SFLC business cases.	Many work streams within the network are improving services for patients such as the Myeloma pathway and the ADAMTS13 test repatriation to Scotland. The network will continue to be open to QI projects and promote and support work streams to enhance and develop the service to patients such as the projects identified by the co-ag sub group.	<b>G</b>

## 2. Service Development and Delivery [linked to Quality Dimensions 1,2,3,4,5,6]

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at	Anticipated Outcome	RAGB status
2021-04	HATS will continue to drive and shape the blood sciences service review in collaboration with the NLP, and SCBN colleagues. By ensuring the views of the community are accurately and clearly represented, it ensures the most is made of the opportunity to review and identify improvements which, can be made to the service to provide the best patient care.	1 <sup>st</sup> April 2021 – until Business case completed	NLP/ Core team/ Wider network engagement	<p>The National Laboratories Programme and associated workstreams were shut down in mid-2021 – this included the Blood Sciences Service Review.</p> <p>The network has now incorporated some items of the Blood Sciences Service Review into its business-as-usual plan.</p> <p>Remote and Rural colleagues will be facilitated by the establishment of a cross-network blood sciences Remote and Rural subgroup; while the new Standardisation Subgroup has been instructed to deal with LIMS and standardisation issues in advance of the new National LIMS rollout.</p>	The network will continue to play a key role in driving and shaping the review of the blood sciences services. The network will be engaged and responsive to ensure the most is made of the opportunity to engage with the wider community and NLP to ensure the output of the review is the optimisation of resources, streamlining of services and ultimately the patient service is as effective, efficient and as optimal as possible.	<b>B</b>
2021-05	Continue to support and develop the HMDS and Haemoglobinopathies sub groups, and additionally set up, and establish the inflammatory markers sub group. The network will support these sub groups to scope provision in the respective areas in Scotland, through identification of the data required to obtain an overview of current providers and undertake an assessment of current pathways of care. These will enable areas of improvement to be identified and these will feed into future work streams.	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	Core team	The HMDS and Haemoglobinopathy subgroups are now established, with membership and a terms of reference currently being developed for the Inflammatory Markers subgroup.	Identify gaps in data that will aid the development of patient pathways. The sub groups will explore the detail of the pathway and ensure data requests include the appropriate and most useful questions to ensure the information provides the most	<b>A</b>

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					accurate representation of these pathways, and highlights appropriately were change and develops would be beneficial.	
2021-06	<p>Continue to support the collection of accurate workforce data, including training profiles/roles in different Boards, in order to inform workforce development, training requirements and transformational roles. The network will engage with other bodies to explore equivalence routes, and opportunities/ career paths such as the modern apprenticeship programme. Ultimate aim, is to produce a clear diagram, depicting the variety of career pathways, to ensure clarity is available to enable staff to enter into the discipline and opportunities are supported the enable staff to progress to and fill gaps in staffing.</p>	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	Workforce and Education subgroup	<p>Workforce data have continued to be collected as part of the network’s annual benchmarking exercise, with questions guided by the DiSSG Workforce Planning Subgroup.</p> <p>The HaTS Workforce &amp; Education Subgroup will continue to look at which training centres have accreditation, and determine potential solutions for gaps therein to support career paths across Scotland.</p>	<p>The community will have a robust picture of the current and future gaps in workforce and highlight training gaps that may help support the future work force. Career pathways will be mapped out to provide a clear picture to staff of the options for progression. The role/training profiles will enable sharing of the distribution of work or skills that is occurring in some labs that could be adopted by others to make better use of the resources available, and optimise the skills of different staff. Options such as modern apprenticeships will also be explored and included into the</p>	<b>G</b>



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					career pathway options.	
<b>3. Stakeholder Communication and Engagement</b> <small>[linked to Quality Dimensions 1,3,4,5,6]</small>						
2021-07	Engage with Cancer Managed Clinical Networks (MCNs) to ascertain what variation there is in diagnosis of some cancers and by what means the variation could be addressed, to benefits patients in Scotland.	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	Multi-disciplinary myeloma sub group	Initial discussions and data gathering exercise has begun to begin to form the foundations of a national business case. The HMDS Subgroup will also consider the effectiveness of different diagnostic pathways for a number of haematological malignancies as part of their ongoing work.	The network is driving the Myeloma Pathway sub group; this is addressing the change in guidelines for SFLC in the diagnosis of Myeloma. This has provided an opportunity to address the variation in practise across Scotland and improve the detection of patients with Myeloma in Scotland employing a standardised approach.	<b>G</b>
2021-08	<p>Communication of the network: Continue to raise the awareness of HATS ensuring staff in all roles are engaged with the network and its work through:- Refreshed communications strategy Newsletters (minimum 2 per year) Informative and up to date website, including members area</p> <ul style="list-style-type: none"> <li>Investigate methods for streamlining newsletter production and dissemination such as Microsoft Sway</li> </ul>	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	HATS Core Team	The website has been updated during the past year, with the core team developing a new plan for website content. As part of this, network subgroups have been tasked with refreshing the content of their own pages, to ensure the most accurate and relevant information is on the public-facing areas of the website.	The network is utilising several means of electronic communication through newsletters, Microsoft Teams, Twitter and email. With the adoption of more virtual meetings, it will continue to enable greater engagement from staff in remote and rural sites and even	<b>G</b>

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	<ul style="list-style-type: none"> <li>Continue to develop and update HaTS website to provide a more useful resource of relevant documentation to the Steering Group, subgroups and members, by improving its layout and accessibility. The website will also promote the network to the wider community, highlighting the key work streams.</li> <li>Roll out the use of Microsoft Teams to subgroups and encourage its use for relevant workgroup collaborative activities.</li> <li>Make greater use of Twitter to engage with the haematology and transfusion communities.</li> <li>Continue engagement with laboratory staff via roadshows and other external events where permissible in the current environment, and investigate alternative engagement methods (such as webinars) as suitable replacements in the event of ongoing social distancing.</li> </ul>			The resumption of newsletters in a Microsoft Sway format is planned to take place in mid-2022.	mainland sites to be able to more readily attend meetings as the time commitment is reduced with no travel time. This format will potentially be more beneficial for sub group meetings going forward.	
<b>4. Education</b> [linked to Quality Dimensions 1,2,3,4,5,6]						
2021-09	Develop a virtual/online repository of electronic resources and support the development of training resources to support virtual training programmes in particular to support the challenges faced by remote and rural laboratories.	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	Workforce & Education subgroup, working with IBMS	Discussions are ongoing between the Workforce & Educations subgroup and relevant providers on how best to signpost online resources, especially those most relevant	The network will continue to engage in discussions and explore opportunities to develop greater national training	<b>G</b>

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	<p>Develop the future workforce through engaging with training providers to investigate equivalence routes available to biomedical scientists and support workers for further progression and to fill and staffing/skills gaps, to ensure an efficient and able workforce for the future.</p>		<p>and RCPATH</p>	<p>to remote and rural colleagues.</p> <p>Discussions on equivalence routes have also taken place with RCPATH and the IBMS, with potential pathways under development.</p>	<p>resources for the haematology and transfusion community. The pandemic has altered working practises, so this provides an opportunity to greater develop and adopt virtual training methods. The network is exploring how best to develop, host and signpost stakeholders to training and educational material. This supports standardisation of training resources, reduces repetition of work across Scotland and provides support to the training and opportunities available to remote and rural colleagues. Improved skill and qualification levels among workforce, supporting the long-term development of a more sustainable workforce profile, and the development of new career progression routes for biomedical scientists.</p>	

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2021-10	Develop appropriate education packages to provide an opportunity for the Haematology community to maintain and update their skills. This will be delivered through an annual education day, sharing best practice and hot topics; and the development of a practical/interpretive training day. The key focus of the educational events, is determined through discussions with stakeholders to identify where the key gaps are, and to prepare and offer training to address the skills gap.	Sept 21 – March 22	Education and training sub group	<p>The Education Day and Practical Training Event planned for 2021 did not take place due to COVID-19 pandemic restrictions inhibiting the holding of in-person events, and a lack of clinical capacity limiting the ability to hold a virtual training event.</p> <p>An in-person Education Day is now planned for June 2022, with a practical training event mooted for later in 2022, and potential online seminars to take place in the autumn.</p>	The Haematology community engages and contributes to the development of greater online resources and training opportunities being held on the network website and teams channels. It is expected the community will have a greater understanding of new developments and best practice, which better equips representatives to take back information to their colleagues and local communities.	R
<b>5. Audit and Continuous Quality Improvement</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2021-11	The network will examine the data collected from this years benchmarking exercise and look at how this data can be best utilised to drive service improvement. The data sub group will ensure optimised use of the data to highlight opportunity to improve efficiencies in testing and look at where appropriate to repatriate tests to Scotland where beneficial to the patient	Jun 21 – Nov 21	Data sub group	Returns were received and a benchmarking report issued in November 2021. The collection template has now been issued for the 2021-22 period, with returns expected by 31 <sup>st</sup> May 2022.	The sub group will ensure that data is not just collected but carefully examined, and considered. The data will be utilised to identify key gaps where service improvements, training or workforce	G

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	pathway, retention of skills in Scotland and improve use to financial budgets.				gaps are so these can be addressed.	
2021-12	Continue to build on the success of the benchmarking work stream and develop the template to ensure useful and valid data capture is achieved within the next ask. The sub group will reflect on the template and through horizon scanning any data that is required or data that is no longer required, to add value to the data collected.	March 22	Data sub group	The template has been revised for 2021-22 to incorporate some additional transfusion questions, and to streamline and rationalise existing workload questions. The template has now been issued with returns expected by 31 <sup>st</sup> May 2022.	The sub group will ensure any data required to drive current work streams is identified and incorporated into the benchmarking report and will continue to develop the annual template to ensure all the correct data capture questions are incorporated.	<b>G</b>
2021-13	HATS will continue to be responsive and adaptive to requirements and support the community by remaining open to innovative approaches and new methods of support and to promote these through the established communication channels within the network and sub groups.	April 21 – March 22	Core team, SG, all members	The network has continued to make use of Microsoft Teams for holding of meetings and sharing of key resources, and use of this is expected to continue even with a return to some level of in-person working.	The network will continue to be responsive to any external or internal requests of support or assistance. The network will utilise the communication mechanisms and network in place to disseminate any new methodologies, approaches or examples of best practise so these can be utilised through Scotland.	<b>G</b>
2021-14	Establishment of ADAMTS13 testing in Scotland to improve testing pathways, turnaround times and patient care.	April 21 – March 22	Coag sub group	A business case was submitted to DiSSG in September 2021, bidding for residual funds leftover from	Unified approach to ADAMTS13 testing across NHS Scotland, with support for better	<b>B</b>

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				the shutdown of the NLP. This was successful, and funds were awarded to help establish an ADAMTS13 service in GG&C and Lothian. This service is now operational, with regular progress reports being received.	testing pathways, improved turnaround time and therefore improved patient care and it will additionally provide an overall cost saving as the transportation costs will be reduced.	
2021-15	A multi disciplinary sub group has been established to look at the change in guidelines for the diagnosis of myeloma, use of SFLC in place of uBJP. The sub group is being driven by HATS, this ensures colleagues from all relevant disciplines are engaged in the discussion, and establishment of a business case to enable Scotland to adhere to the BSH, NICE and Myeloma UK guidelines. The group aims to develop a once for Scotland approach to ensure there is the same access to test and care for this patient group across Scotland.	May 2021 – March 2022	Myeloma sub group	A rudimentary data model has now been established predicting the best- and worst-case scenario SFLC workloads in each Board. The subgroup now considering the resource implications of this, and where best to localise services, prior to development of a full national business case. Due to lack of local capacity in some Boards due to the pandemic, the timeline for this business case has been re-basedlined to later in 2022.	Through use of data and discussions with clinical and diagnostic haematology, immunology and biochemistry, the most efficient, effective and optimal service for a national myeloma diagnostic and monitoring pathway will be designed and developed ensuring a standardised and once for Scotland approach.	A
<b>6. Value</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2021-16	The network will continue to be active in the develop of the new LIMS programme ensuring it suits the needs of the community. Additionally, the community will engage in the potential use of the PathNexus programme to enable standardisation of coding to occur prior to the roll out of the LIMS. This will streamline the process and improve patient care, as	1 <sup>st</sup> May 2021-30 <sup>th</sup> Nov 2021	Standardisation sub group	The funded PathNexus pilot in NHS Grampian will provide a test-bed for automated standardisation of test coding, and HaTS will engage with this where required, including on any future national scale-up.	The initial presentation of the PathNexus programme was presented to the LEB, this will be taken to the DiSSG and a SLWG formed to explore this in more	G

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	<p>ease of communication across LIMS, and standardisation of test codes minimises risk to patients.</p> <p>Once there is a National LIMS in place, the network will begin work on intelligent function platforms which will greatly improve certain patient pathway, but the roll out is dependent on a new LIMS due to current IT functionality restrictions.</p>			In the meantime, the Standardisation subgroup is being tasked with tackling other more detailed aspects of the standardisation workstream, such as units and best practice.	detail. The adoption of the PathNexus software would enable a more standardised process for the coding of tests, and provide a platform for a much faster route to standardisation of codes in advance of the roll out on the National LIMS.	
2021-17	HATS will promote optimised use of testing through its partnership with the DO optimisation programme by continued contributions to the Atlas of Variation and associated projects.	1 <sup>st</sup> April 2021 – 30 <sup>th</sup> March 2022	HATS SG	<p>The network has continued to engage with the Demand Optimisation programme throughout the past year. Aspects of the DO data collection have been incorporated into the HaTS benchmarking template, and were included in the previous benchmarking report.</p> <p>The launched Atlas of Variation dashboards have been promoted wherever possible to relevant stakeholders within the network.</p>	The network will play a key role in the REDO project, which will support the remobilisation of the services within the NHS. This will help support crucial services to resume to pre covid levels, and to take the opportunity to optimise the delivery of services at this crucial time of change. REDO will drive service improvements and aim to reduce unwarranted variation.	<b>G</b>

## HATS PROPOSED WORKPLAN – 2022-23

When defining network objectives please consider the Institute of Medicine’s six dimensions of quality, which are central to NHS Scotland’s approach to systems-based healthcare quality improvement:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
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<b>1. Effective Network Structure and Governance</b> <small>[linked to Quality Dimensions 3,4,5,6]</small>						
2022-01	HaTS will engage with the new strategic network structure for diagnostic services in Scotland. This will ensure HaTS will continue to play a key role in shaping and implementing the structure, ensuring it is fit for purpose and is a structure which can	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Core Team, Steering Group	The network has contributed feedback to the new strategic network structure, and both the core team and other steering group stakeholders	HaTS is able to contribute to the new strategic network within a functional laboratories facet, and be guided by the	<b>G</b>



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	be utilised by the haematology and transfusion communities to progress pieces of work or challenges as required.			have attended engagement events.	strategic vision produced by the new structure.	
2022-02	HaTS will engage constructively with the new Diagnostics Policy Framework being produced by Scottish Government, and aim to provide support to this where possible.	1st April 2022 – 31st March 2023	Core Team	Members of the network core team have attended DiSSG meetings discussing the development of this framework, and will endeavour to support it where appropriate.	HaTS has constructively engaged with the new Diagnostics Policy Framework, and is able to pursue projects which align with Scottish Government policy priorities.	G
2022-03	Continue to develop and update the strategic vision for service improvement, as articulated in the five-year work plan and the QI Strategy. This will ensure the most appropriate, efficient and effective objectives are being identified within each workstream.	1st April 2022 – 31st March 2023	Core Team	The network will continue to support work streams that are developing and improving services for patient care such as the ADAMTS13 and SFLC Business Cases.	Many workstreams being monitored within the network are improving services for patients - such as the business case for SFLC testing. The network will continue to be open to new QI projects.	G
<b>2. Service Development and Delivery</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2022-04	Help establish a cross-disciplinary blood sciences Remote & Rural Subgroup to give greater attention to specific issues affecting these locations.	1st April 2022 – 30 <sup>th</sup> June 2022	HaTS Core Team, SCBN Core Team, PM, PSO	Discussions have taken place with Remote & Rural labs, who are in favour of having a specific R&R subgroup. A terms of reference is being established, and a membership list drawn up.	Establishment of a successful and engaged subgroup which can provide a voice for R&R issues, and escalate these appropriately where necessary.	G

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2022-05	Establish an Inflammatory Markers subgroup to progress and escalate issues around ESR and CRP testing, and other related matters.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Core Team	A terms of reference and initial membership list are currently being developed.	This subgroup will explore the appropriate clinical usage of CRP and ESR testing, and develop relevant guidance. Other inflammatory marker testing will be considered where relevant.	G
2022-06	Provide a monitoring process for the new ADAMTS13 testing service, ensuring that funding for this service is being utilised appropriately and effectively, and allowing for issues to be highlighted in a timely manner.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Coagulation Subgroup, Core Team	The service was successfully funded in November 2021, with finance schedules agreed and monies distributed in February 2022. The Coagulation Subgroup will develop monitoring criteria in conjunction with the PM to provide regular updates to DiSSG and LEB on the progress of this new service.	A well-functioning and cost-effective Scottish ADAMTS13 testing service is active in both GG&C and Lothian, providing much-needed time-critical tests to patients in need.	G
2022-07	Continue to support the collection of accurate workforce data, including training profiles/roles in different Boards, in order to inform workforce development and training requirements The network will engage with other bodies to explore equivalence routes, and other career path opportunities. This will provide a clearer picture to staff of the progression pathways and opportunities available to them.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Workforce & Education Subgroup	Workforce data have continued to be collected as part of the network's annual benchmarking exercise, with questions guided by the DiSSG Workforce Planning Subgroup.  The HaTS Workforce & Education Subgroup will continue to look at which training centres have accreditation, and determine potential solutions for gaps	The community will have a robust picture of the current and future gaps in workforce. Career pathways will be mapped out to provide a clear picture to staff of the options for progression. The role/training profiles will enable sharing of the distribution of work or skills for best-practice adoption in	G

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				therein to support career paths across Scotland.	other labs. Options such as modern apprenticeships will continue to be explored and included into the career pathway options.	
2022-08	Progress standardisation work in advance of the new National LIMS being introduced in 2022-23.	1st April 2022 – 31st March 2023	Standardisation Subgroup, Core Team, PM	Discussions are ongoing with representatives from the National LIMS Consortium on how work can proceed in this area.	The network to have contributed meaningfully to standardisation work in advance of the National LIMS rollout, with all boards able to implement the new software effectively.	G
<b>3. Stakeholder Communication and Engagement</b> <small>[linked to Quality Dimensions 1,3,4,5,6]</small>						
2022-09	Continue to optimise the communication streams that are employed by the network, to best highlight work ongoing within the network, and raise awareness of the network more widely. This will include: <ul style="list-style-type: none"> <li>Relaunched newsletters.</li> <li>An update to the network website and redesign of the members' area.</li> <li>Expand the use of Microsoft Teams for subgroups and encourage its use for relevant workgroup collaborative activities beyond video calls.</li> <li>Make greater use of Twitter to engage with the haematology and transfusion communities.</li> </ul>	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Core Team	The network Core Team will conduct a full review of the website, and implementation of its outcomes will be tasked to the PSO. The PM is encouraging subgroups to take greater ownership of their website content and develop specific content for upload, with a view to developing a more active public-facing resource.	The network has successfully adopted and utilised a number of means of electronic communication and collaboration. Staff engagement will remain at high levels from multiple boards, especially those from remote and rural sites.	G

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	<ul style="list-style-type: none"> <li>Continue engagement with laboratory staff via roadshows and other external events where permissible following the easing of COVID-19 restrictions, and investigate alternative engagement methods (such as webinars) as suitable replacements during times of increased caseload.</li> </ul>					
<b>4. Education</b> [linked to Quality Dimensions 1,2,3,4,5,6]						
<b>2022-10</b>	Plan and hold an annual in-person education event in June 2022, allowing network members to hear talks on relevant topics, and engage in fruitful discussions on appropriate matters in a networking environment.	1 <sup>st</sup> April 2022 – 29 <sup>th</sup> June 2022	Workforce & Education Subgroup, Core Team	The WFE Subgroup have already developed a draft programme of engaging speakers on a variety of topics. A venue has been secured, and preparations are well underway.	An education event will have been successfully held with a good attendance from a suitably representative number of Boards. Feedback will hopefully indicate a renewed desire for further events in future.	<b>G</b>
<b>2022-11</b>	Investigating online e-learning resources, with the aim of providing a central location to existing web-based courses and learning material, and advertising virtual opportunities for staff in remote & rural locations.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	WFE Subgroup, Core Team	Discussions are ongoing between the Workforce & Educations subgroup and relevant providers on how best to signpost online resources, especially those most relevant to remote and rural colleagues.  Discussions on equivalence routes have also taken place	The network will continue to engage in discussions and explore opportunities to develop greater national training resources for the haematology and transfusion community. New training methods and	<b>G</b>

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				with RCPATH and the IBMS, with potential pathways under development.	practices will be highlighted to Boards, with the aim of including remote and rural sites who would normally have struggled to attend in-person training.	
2022-12	Investigate the feasibility of holding a practical scientific training event in late-2022 / early-2023, to provide a measure of lab-based training in a cross-Board environment.	1 <sup>st</sup> April 2022 – 28 <sup>th</sup> February 2023	Workforce & Education Subgroup	Plans for training topics were developed for an abortive practical training event in 2021. A number of these are transferable to a new practical training event.  The WFE subgroup will look at timing and location for any potential event.	A successful practical training event is held in a suitable timeframe within this financial year, with a representative sample of Boards taking part.  Positive feedback will hopefully have been received on this style of teaching and event, enabling further such practical events to be developed in future.	G
<b>5. Audit and Continuous Quality Improvement</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2022-13	Collate annual benchmarking data and produce an annual benchmarking report. This highlights successes and areas in which the network could be of assistance or develop future business cases.	1 <sup>st</sup> April 2021 – 31 <sup>st</sup> March 2023	Data Subgroup, NHS board representatives, IMS	The data template for the 2021-22 collection has now been issued, with returns expected by 31 <sup>st</sup> May 2022, and a benchmarking report due in autumn 2022.	To have a clearer picture of haematology and transfusion lab activity, and an agreed method through which to develop and utilise the data received.	G

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2022-14	Continued development of the data benchmarking template, ready for circulation on 31 <sup>st</sup> March 2023 for the 2022-23 data capture period. This ensures that the most relevant evidence base exists and can be used the network to horizon scan for potential service improvements, and to support business cases.	1 <sup>st</sup> February 2023 – 31 <sup>st</sup> March 2023	Data Subgroup, Core Team, IMS		To have a clearer picture of haematology and transfusion lab activity, and an agreed method through which to develop and utilise the data received.	G
2022-15	Continued progression of the Serum Free Light Chains (SFLC) Business Case, ensuring clinical screening for myeloma aligns with all agreed national clinical guidelines.	1 <sup>st</sup> April 2022 – 30 <sup>th</sup> September 2023	Myeloma sub group	The Myeloma Subgroup has had regular discussions on development of a business case following the change to clinical guidelines for first-line myeloma screening, which now uniformly recommend Serum Free Light Chain testing. The subgroup is exploring data models to predict future SFLC workload once Boards switch over, and will move to considering resource implications and developing a full business case once these models are refined.	Through use of data and discussions with clinical and diagnostic haematology, immunology and biochemistry, the most efficient, effective and optimal service for a national myeloma diagnostic and monitoring pathway will be designed and developed ensuring a standardised and once for Scotland approach.	G
<b>6. Value</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2022-16	Continue to engage and support the progress of the National LIMS consortium, by providing expert advice where necessary, and by engaging in standardisation activities to assist development and ultimate roll-out of the National LIMS.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Standardisation Subgroup, Steering Group	The PathNexus pilot in NHS Grampian will provide a good testbed for automated standardisation of lab test coding. The Standardisation subgroup is also being revived to progress more detailed aspects of standardisation	A national standardised list of codes will be produced in time for the national roll out of the new LIMS. This will enable a more streamlined setup and	G

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				work, such as on units and methods.	implementation, and eventually assist cross-working and data transfer between laboratories in a Once for Scotland approach.	
2022-17	Continue to actively engage with the Demand Optimisation Programme to promote optimised use of testing in Scotland.	1 <sup>st</sup> April 2022 – 31 <sup>st</sup> March 2023	Innovation Subgroup	<p>The network has continued to be engaged with the DO programme throughout the COVID-19 pandemic. Aspects of DO data collections have been incorporated into the previous year's benchmarking template, and discussions with the DO programme will take place on elements to be included in future templates.</p> <p>The newly-launched Atlas of Variation has also been promoted by the network where possible.</p>	The network continues to play a valuable role in shaping and assisting with the work of the DO programme, ultimately supporting the remobilisation and recovery of NHS services within Scotland.	<b>G</b>