

## PBM Perspective, Part 3 – The Operational Perspective

### Patient Blood Management

Patient Blood Management (PBM) is an evidence-based, multidisciplinary approach to improve care of patients. Application of PBM strategies can improve patient experience and quality of care while reducing cost. When institutions begin to consider a PBM program the focus often turns to the lab and more specifically the Transfusion Service (TS) since blood products are its area of responsibility. As a result, TS becomes the “home” for PBM and responsible for implementing the program. However, the lead for PBM should not entirely fall on the Transfusion Service. A holistic PBM program has far-reaching impact throughout the hospital. PBM affects clinical practice, staff engagement, patient satisfaction, and hospital procedures. To be successful, the appropriate leadership must be willing and able to address these challenges.

Along with bold, insightful and collaborative leadership, a healthcare system needs a diverse, cross-functional team to create a successful PBM program. This team must motivate and mobilize an entire organization to engage in PBM initiatives. Principles of change acceleration should be employed to understand stakeholders’ perspectives and

ensure effective, sustainable change. Three components are required: the right mindset, the right skillset, and the right toolset. Without proper leadership and operational mindset, even the most skilled PBM team will fail. Furthermore, deploying and successfully implementing a PBM program is not trivial. The challenge is to respect the realities of medical practice where every patient is unique; every clinical situation is different; every physician has learned from his/her own unique combination of mentors and experiences.

### Sustainable Behavior Change



Any PBM program should be grounded in the recommendations of The Joint Commission’s 2012 National Summit on Overuse. One of the key opportunities in blood utilization is to achieve consistent evidence-based utilization in the face of the desire to practice medicine individually.

To accomplish this requires:

- Strong, collaborative leadership
- Open, honest communication
- Cross-functional engagement

With these elements, PBM initiatives can succeed and survive, resulting in patient-centered care, reduced waste and improved staff engagement. Let’s get going!

### References

1. *Proceedings from the National Summit on Overuse*, Organized by The Joint Commission and the American Medical Association-Convened Physician Consortium for Performance Improvement® September 24, 2012

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