The top three barriers/challenges identified from the recent global haemovigilance survey with 150 responses from 86 countries (results as on 15th March 2021) were identified as

1. Priority 1 Challenge/Barrier:
   Need for Dedicated Financial provision/Financial Constraints/Limited Financial Resources
2. Priority 2 Challenge/Barrier:
   Lack of trained personnel
3. Priority 3 Challenge/Barrier:
   Need to Identify all stakeholders/Service Providers and bring them common comprehensive system

Initial thoughts on useful tools that the WHO project team can develop/signpost to help overcome these are summarised in the table below:

Financial constraints	Training and education of staff	Identifying stakeholders and service providers
• Writing a business case • SWOT analysis • Using driver diagrams for quality improvement	• Educational resources easily available- documents, videos, infographics/posters, kahoot quizzes • Scenario based learning • Haemovigilance curriculum • Training and competency framework	• Stakeholder identification and management tips and tools • RACI framework • Six Thinking Hats tool for problem solving

Tools that could potentially help address these challenges:

Financial constraints:

- Writing an effective business case: Here are some useful links to help write a business case requesting funding for haemovigilance efforts
  - https://www.bhf.org.uk/for-professionals/healthcare-professionals/resources-for-your-role/business-case-toolkit
  - https://www.knowledgetrain.co.uk/business-analysis/how-to-write-a-business-case
- SWOT analysis: Strengths, Weaknesses, Opportunities and Threats analysis – can be used for options appraisals and decide regarding best option to invest in and develop, template and useful information can be found here: https://www.businessballs.com/strategy-innovation/swot-analysis/
- Using driver diagrams to improve quality and provision of services- will help plan actions to deliver an agreed objective/outcome: http://www.ihi.org/resources/Pages/Tools/Driver-Diagram.aspx (can have a worked example for illustration)

Training and education of staff in haemovigilance:

- Collation of useful resources at a central, easily accessible site- in various formats (documents, infographics, videos- You tube channel, podcasts, etc) and in various languages?

- Making learning fun: Kahoot (https://kahoot.com/schools-u/) or other tools to improve interaction and engagement
- Team based learning (can have haemovigilance and transfusion safety cards to facilitate team discussions like the safety culture cards: https://www.skybrary.aero/index.php/Safety_Culture_Discussion_Cards) and inter-professional learning to be encouraged- scenario based discussions: https://resimion.com/
- Can build a haemovigilance curriculum using platforms such as Panopto (other platforms available as well): https://www.panopto.com/panopto-for-education/
- Develop a training and competency framework for staff in haemovigilance – based on roles

Identifying and engaging with stakeholders:

The following links provide some useful information about stakeholder management (not an exhaustive list):

- https://brainmates.com.au/brainrants/some-practical-tools-for-stakeholder-management/
- https://www.projectmanager.com/stakeholder-management

Having a **RACI framework** will help clearly identify the roles and responsibilities of various individuals/stakeholders in the haemovigilance programme:

- **Responsible:** The person who does the work to achieve the task. They have responsibility for getting the work done or decision made. As a rule, this is one person.

- **Accountable:** The person who is accountable for the correct and thorough completion of the task. This must be one person and is often the senior person in the team. This is the role that responsible is accountable to and approves their work.

- **Consulted:** The people who provide information for the project and with whom there is two-way communication. This is usually several people, often subject matter experts (e.g. haematologists)

- **Informed:** The people kept informed of progress and with whom there is one-way communication. These are people that are affected by the outcome of the tasks, so need to be kept up to date

Task	Responsible	Accountable	Consulted	Informed
Haemovigilance reporting at patient/donor end				
Data collation				
Data analysis				
Review by subject matter expert				
Liaison with reporters				
Outputs from hv scheme				
Surveys/feedback loops				
Developing relevant educational materials				

- de Bono's six thinking hats tool can help with problem solving and innovative thinking in various situations https://www.debonogroup.com/services/core-programs/six-thinking-hats/