TRANSFUSION ERROR SURVEILLANCE SYSTEM (TESS), 2017-2019[1]

TESS project

TESS captures non-nominal data on errors occurring at any point in the transfusion chain for improving transfusion processes and patient safety

2005 This project was initiated in 2005. The detailed methodology of TESS can be found here

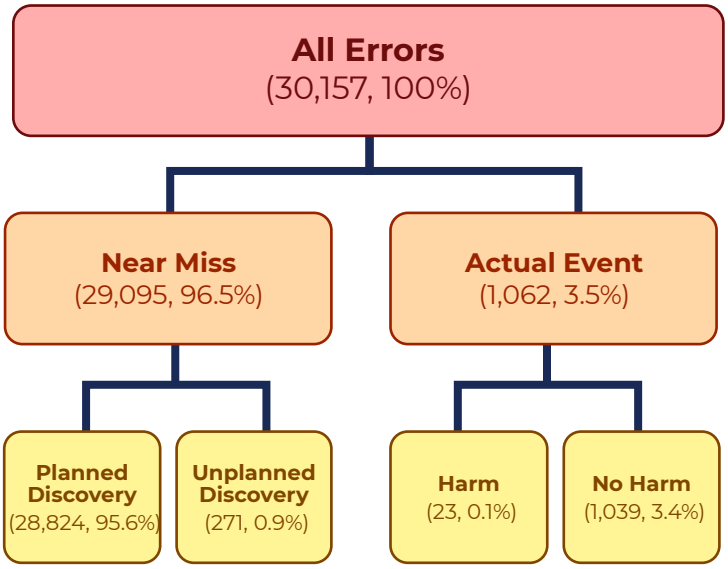
16% of national blood transfusion activities in Canada are monitored through 4 jurisdictions participating in TESS

Surveillance data summary

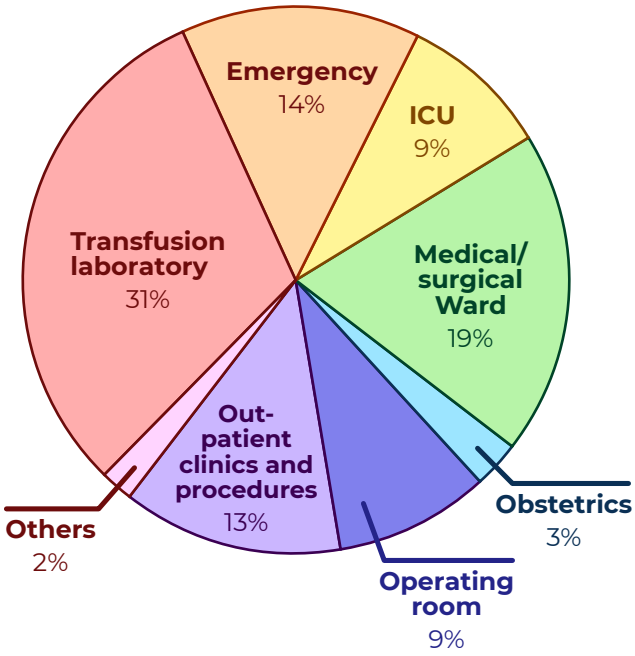
30,157 Errors[2] (e.g. blood sample labelled with incorrect patient identification) were reported during 2017-2019

0.1% of all reported errors resulted in harm[3] to the patient

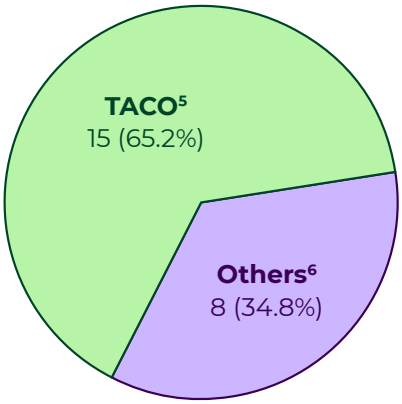
OVERALL COUNTS OF REPORTED ERRORS FOR 2017-2019[4]



LOCATION OF ERROR OCCURRENCE



HARM CAUSED BY ERRORS



Reporting and investigating errors in both transfusion services and clinical settings help identify and control risks before resulting in harm to the patient, thus providing valuable opportunities to improve transfusion safety

LEARN MORE ABOUT TESS

Visit Canada.ca and search "Transfusion Error Surveillance System" and Follow us on Twitter @GovCanHealth

1 As a result of comparing dynamic databases, small discrepancies between PHAC and provincial or territorial numbers are expected

2,4 The definition of error, near miss, actual event, planned discovery and unplanned discovery can be found here

3 Harm: the patient had an unintended or inadequate response to transfusion or suffered a negative impact or adverse transfusion reaction as a result of the error

5 TACO: transfusion associated circulatory overload

6 Others (n=8) include: 2 unspecified adverse reactions, 1 febrile non-haemolytic reaction, 1 delayed serological reaction, 1 hypotensive reaction, 1 IVIG headache, 1 delayed haemolytic reaction, and 1 case of harm was associated with transfusion delay

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