



National Survey about quality indicators and outcome analysis

BHS JACIE subcommittee



1) QI for collection of cell products



- collection efficiency (CD34+ cells and blood platelets)
- requested number of cells reached ?
- sterility (microbiological testing of the cell product)
- composition of the cell product (% granulo, Hct)
- engraftment data
- incidence of SAEs during collection
- incidence of SAEs after infusion (likely to be cell product-related)
- donor evaluation complete
- number of apheresis days per donor / duration of collection
- number of collection failures

START SURVEY

How often are these QI for collection analyzed ?

- *Four times/year (which ones):*
- *Twice/year (which ones):*
- *Annually (which ones):*
- *Others: specify*

2) QI for processing of cell products



- cell recovery / cell yield after processing and cryopreservation
- enrichment/depletion efficiency after in vitro cell selection (CD34+)
- microbiology testing of processed cell products (sterility)
- cell viability (WBC and CD34+) after cryopreservation
- clonogenicity (potency testing)
- engraftment data
- incidence of SAEs after infusion (likely to be cell product-related)
- others, specify:

How often are these QI for processing analyzed ?

- *Four times/year (which ones):*
- *Twice/year (which ones):*
- *Annually (which ones):*
- *Others: specify*

3) QI for clinical transplantations



- engraftment data
- number of graft failures (and reason of GF)
- mortality at day 100
- TRM (at day 100)
- disease status at d100
- mortality at 1 year post-transplantation
- (allo) incidence of acute GVHD (which grades for outcome analysis?)
- (allo) incidence of cGVHD (and which grade)
- incidence of ICU admission
- incidence of SAE's (specify which ones)
- others: specify

How often are these QI for the clinical program analyzed ?

- *Four times/year (which ones):*
- *Twice/year (which ones):*
- *Annually (which ones):*
- *Others: specify*

4) Other QI ?



Open question: are there other quality indicators in relation to the complete programme that are analyzed?

5) DLI (TC-T) ?



Do you perform outcome analysis of DLI (TC-T)?

If yes, how do you organize it ?

6) How are acceptable (normal) reference values defined ?



- based on **internal (historical) data**
- based on **literature data**
- **others** (specify)

7) For which parameters do you use reference ranges / critical performance indicators ?



8) Who is responsible for the QI / trend analysis ?



- program director and/or facility directors
- quality manager
- the statistician
- other staff members (specify):

9) How are the results communicated to other team members ?



- QM meetings (with notules). Frequency ?
- Management review (with notules). Frequency ?
- Others methods?

10) Do you perform patient satisfaction surveys ?



- if yes, how do you organize this ?





11) Additional questions or remarks ?