Summary report on the Regional meeting of directors of national blood transfusion services

Tunis, Tunisia
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1. Introduction

Blood transfusion services in the Eastern Mediterranean Region have made progress towards ensuring universal access to safe blood and blood products since the first World Health Assembly resolution in 1975. However, significant gaps remain in providing access to sufficient, affordable and sustainable supplies of blood and blood products, while also ensuring the quality and safety of these products in the presence of known and emerging threats to public health. In order to address these gaps, which were identified through a comprehensive situation analysis, and to guide countries to develop and strengthen national blood systems, the WHO Regional Office for the Eastern Mediterranean has developed a 10-year (2016–2025) draft regional strategy and framework for action through broad consultation with national blood transfusion service providers, regional and international organizations and experts working in the field.

In this respect, the WHO Regional Office convened a meeting of directors of national blood transfusion services in the Eastern Mediterranean Region from 17 to 19 May 2016 in Tunis, Tunisia.

The objectives of the meeting were:

- to discuss the regional status of blood transfusion services;
- to discuss country successes, challenges and lessons learned in ensuring the safety and availability of blood transfusion;
- to review and agree on the draft regional strategy and framework for action for blood safety and availability.

Directors of blood transfusion services in Afghanistan, Bahrain, Djibouti, Islamic Republic of Iran, Jordan, Kuwait, Lebanon, Libya, Morocco, Pakistan, Palestine, Qatar, Saudi Arabia, Somalia, Sudan,
Syrian Arab Republic, Tunisia and United Arab Emirates attended the meeting. Participants also included experts from Cameroon, Egypt, the Netherlands, Tunisia, United Kingdom and Zimbabwe and representatives of international and regional organizations, including Africa Society of Blood Transfusion, Arab Transfusion Medicine Forum, International Plasma Fractionation Association, as well as staff from WHO headquarters and the WHO Regional Office for the Eastern Mediterranean.

Dr Humayun Asghar, Regional Adviser, Public Health Laboratories, delivered the message of Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean. Dr Alwan commended the development of the regional strategy and framework for action and reiterated WHO’s commitment to providing the necessary support to Member States for its finalization and implementation. He also expressed appreciation for the commitment and sustained efforts by national blood transfusion services in improving the safety and availability of blood transfusion in the Region.

2. **Summary of discussions**

Data collected from 16 out of 22 countries through a survey linked to the Global Database on Blood Safety and additional information collected from eight countries in 2014 indicated gaps in leadership and governance, coordination and collaboration of national blood systems, provision of safe blood and blood components, patient blood management and clinical transfusion, and quality system and management. Linkages with other health programmes, such as maternal and child health, HIV and hepatitis, injuries, infection control and patient safety need further development. In their presentations, the directors of blood transfusion services of Pakistan, Kuwait, Morocco, Islamic Republic of Iran, Saudi Arabia, Tunisia,
United Arab Emirates, Lebanon and Syrian Arab Republic shared country successes, challenges and lessons learned in ensuring the safety and availability of blood transfusion in the Region.

In Pakistan, the establishment of a regulatory mechanism for the registration, licensing, operation and inspection of blood banks in Islamabad has helped to improve the quality of blood services. Blood transfusion services (both public and private) cooperated with the regulator (Islamabad Blood Transfusion Authority) and the results have been encouraging.

Kuwait described the response of the blood bank to the suicide bombing attack in June 2015. It emphasized the importance of outlining actions that need to be taken before, during and after a crisis in the emergency preparedness and response plan to provide the necessary support to hospitals to manage injured persons.

In Morocco, the implementation of a national strategy for the promotion of voluntary blood donation since 2011 and the initiation of a national blood donation campaign in 2013 has increased the number of voluntary blood donations. It has also resulted in better coordination and collaboration among relevant bodies, including the media, blood donor associations and religious institutions.

The success of the Iranian Blood Transfusion Organization in using recovered and source plasma for production of plasma-derived medicinal products was highlighted. Islamic Republic of Iran started contract fractionation programme in 2004 using 40 000 litres of recovered plasma, which was increased to 200 000 litres in 2015. The country saved more than US$ 11 million in 2011 by meeting the demand for plasma-derived medicinal products. By 2018, Islamic Republic of Iran will send up to 600 000 litres of plasma for
fractionation. In addition, the Iranian Blood Transfusion Organization will establish two local plasma fractionation plants, which will provide an opportunity for countries in the Region to utilize their plasma to meet their needs for plasma-derived medicinal products, through collaborative agreements with Islamic Republic of Iran.

The experience of Saudi Arabia in accreditation of blood banks was presented and invaluable lessons learned. The Food and Drug Authority is the regulatory body responsible for regulating blood and blood products in Saudi Arabia. The blood banks run by the Ministry of Health are accredited by Joint Commission International and Central Board of Accreditation for Health Institutions. Recently, many blood banks have also been accredited by the American Association of Blood Banks.

In Tunisia, the Ministry of Health issued several circulars related to haemovigilance, which requires compliance from local, regional and national bodies responsible for blood transfusion. Haemovigilance data are collected, analysed and disseminated regularly. This has helped to improve the quality of blood transfusion services in the country.

Implementation of a quality system management in Sharjah Blood Transfusion and Research Centre in United Arab Emirates was presented and discussed. The centre developed standard operating procedures (SOPs), trained personnel to implement SOPs, in compliance with international references. Initially, it was challenging to convince and motivate staff to implement quality systems, especially as it required a tedious documentation process and continuous assessment, which constitutes an additional workload. The centre conducted regular meetings and training for staff to improve their understanding of the quality system and its positive impact.
The reorganization of blood transfusion services in Lebanon resulted in improved national coordination. Prior to the reorganization, blood transfusion services were fragmented with no national coordination. There was no national supervisory authority dedicated to blood transfusion. The Ministry of Public Health established the National Committee of Blood Transfusion and Haemovigilance by a ministerial decision in February 2011 to implement a nationally coordinated blood transfusion service.

In the Syrian Arab Republic, the safety and availability of blood transfusion is severely affected by the ongoing conflict. The demand for blood has increased. Blood banks in conflict areas are not under the control of the national blood transfusion service and most are damaged or demolished. Hospitals are struggling to cope with the increasing demand. People are willing to donate but there is serious shortage of supplies, equipment and infrastructure to collect and process blood.

Countries also highlighted challenges faced in ensuring the availability and safety of blood transfusion.

The second and third days of the meeting were dedicated to reviewing the draft regional strategy and framework for action for blood safety and availability (2016–2025). Before presentation of the draft regional strategy and framework for action, the Regional Office presented the process of development of the draft, which included literature review and situation analysis, and consultation with directors of blood transfusion services and experts. The presentation also highlighted the process of review and finalization of the draft document for submission to the Regional Committee for endorsement.

Participants were divided into four working groups to review the draft regional strategy and framework for action. The working groups were
asked to review the structure, as well as the content of the document section by section – all sections by each group. The working group discussed the draft document on the second day while the framework for action was discussed on the third day of the meeting. All working groups submitted their comments in Word documents with track changes, which were also presented and discussed in the plenary.

The following comments were made on the draft document.

- The draft regional strategy and framework for action for blood safety and availability is comprehensive, based on extensive situation analysis and developed in consultation with relevant stakeholders.
- The Arabic and French versions of the draft document need language editing by a professional editor with technical knowledge of blood transfusion services.
- The English version of the draft document also needs language editing as suggested with track changes.
- Participants suggest uniformity of terminology used in the document, to add a glossary of definitions and list of abbreviations, as well as footnotes.
- Provide information on World Health Assembly resolutions and decisions.
- Elaborate on medical products of human origin and the role of blood transfusion services haematopoetic stem cells transplantation.
- Elaborate on monitoring and evaluation section including revising the objectives to make them specific, measurable, attainable, realistic and time-bound.
3. Next steps

The meeting ended with adoption of the regional strategy and framework for action for blood safety and availability with the comments provided and the following next steps.

- WHO will incorporate the comments and finalize the draft for circulation by e-mail among participants by the end of May 2016.
- Directors of national blood transfusion services will review the revised document and confirm agreement by 14 June 2016.
- WHO will take the necessary actions for endorsement of the regional strategy and framework for action for blood safety and availability (2016–2025) by the Regional Committee, and its implementation, including sensitization of governments and policy-makers to give more attention to blood transfusion services, particularly in providing financial resources.
- Directors of national blood transfusion services will request WHO to facilitate regular meetings of directors of blood transfusion services and establish other platforms to assist information-sharing and an exchange of knowledge.
- WHO will prepare country profiles on blood safety and availability.
- WHO will establish an advisory group to provide technical guidance to countries.