

2014/LSIF/PD/015

Centralization and Regionalization - Round Table Discussion

Submitted by: LuxConsulTrans



Policy Dialogue and Workshop on Attaining a Safe and Sustainable Blood Supply Chain Manila, Philippines 30 September – 1 October 2014

APEC Forum on Blood Supply Chain, Manila

Day One 30.09.2014: 16:45-18:00

Centralization and regionalization

Round Table discussion with 6 panelists

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Centralization (resp. regionalization)

Round Table discussion with panelists:

- Dr. Ina-Noelia Pérez-Huaynalaya, Peru and ISBT
- Dr. Yuyun SM Soedarmono, Red Cross, Indonesia
- Ms. Tasanne Sakuldamrongpanich, Red Cross, Thailand
- Dr. Maria Victoria Abesamis, Dept. of Health, Philippines
- Dr. Pham Tuan Duong, Ministry of Health/NIHBT, Viet Nam
- Dra. Omar Sanchez Ramirez, Normalizacion MoH, Mexico



Definition of Centralisation (or centralization)

- In general, is meant the process by which the activities of an organisation, particularly those regarding <u>planning</u> and <u>decision-making</u>, become <u>concentrated</u> within a particular location/ group or keeping all of the important decision-making powers within head office or the centre of the organisation.
- In political science, centralisation refers to the concentration of a government's power – both geographically and politically – into a centralized government.
- In business, centralisation and decentralization refer to where decisions are made in the chain of command.

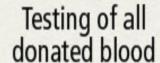


WHO strategy for safe blood transfusion

Stratégie de l'OMS pour la sécurité transfusionnelle

NBS

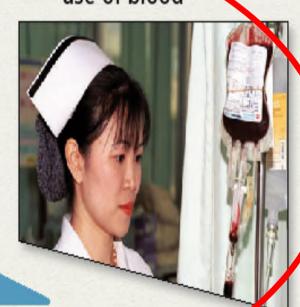
Voluntary blood donation



Safe and rational use of blood







Haemovigilance Quality systems

National coordination of blood transfusion services



Centralization (resp. regionalization): Introduction by the moderator

Understand the difference between

NBS (National Blood System) vs.

NBTS (National Blood *Transfusion* Service)

What is?:

A. a (fully) centralized NBTS

B. a centrally coordinated NBTS

C. a lose network of producing blood centres

C. a **fragmented** system/ situation.

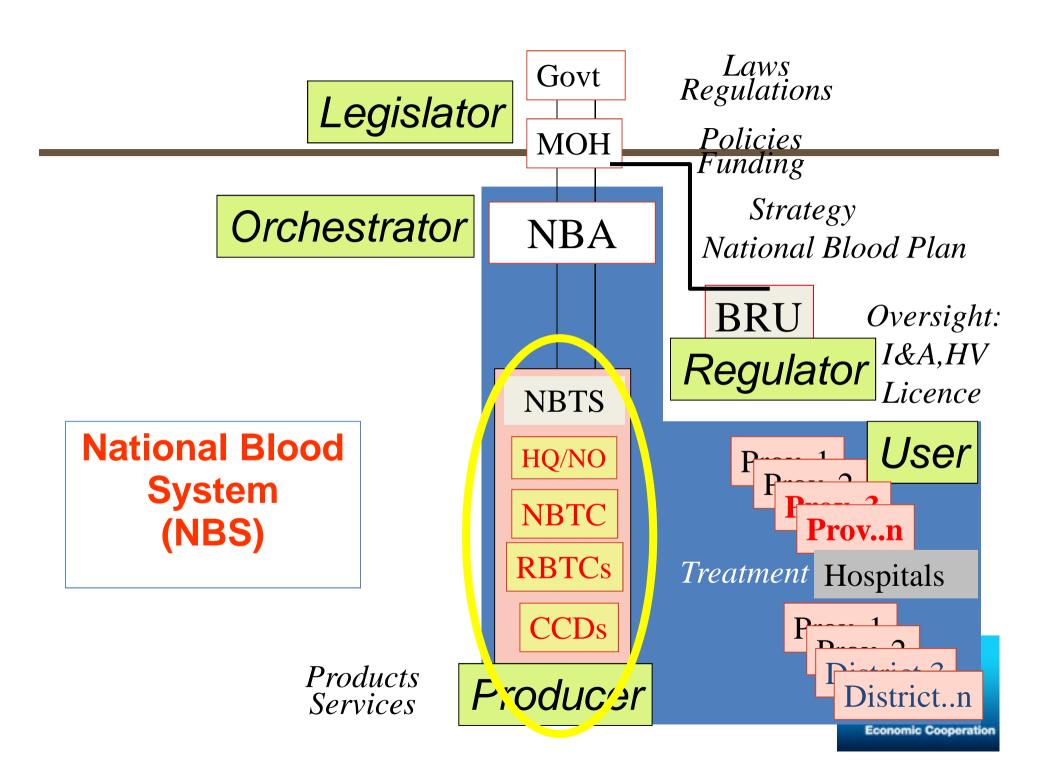


National Blood System (NBS)

NBS is the system (or scheme) in a country allowing for blood transfusions and including the responsible authority, the producers and the users as well as associated structures.

NBS offers the frame and contains the vital elements/ constituents of the system in a robust way and allows them to function in a balanced and coordinated way to achieve the ultimate goal of safe blood donations and blood transfusions available and accessible to all who are in a need.





Producer(s) in the NBS

NBTS (National Blood Transfusion Service)=a countrywide organisation with responsibility for the *production/ provision/ supply* of blood and blood products for transfusion and for the liaison with clinical services on appropriate use of blood for patient care. It comprises a NBTC, RBTCs, other BTCs. It coordinates all activities from blood donor recruitment and selection, collection, testing, processing/production, storage and distribution of blood and blood products (BC-blood components and PD -plasma derivatives), QA,...

NBTC (National Blood Transfusion Centre)=the leading institute of the NBTS, a reference centre or centre of excellence for the country

RBTC/PBTC (Regional/Provincial Blood Transfusion

Centre)= blood centre/establishment with all activities from collection to distribution to hospitals in a defined region/ province

≠ blood bank in the hospital (pre-tx)

Trends in European Blood Transfusion (Dr J. Leikola, Finland – 2001)

- 1. Regulation becomes stricter
- 2. Perceived and real blood safety overriding everything
- 3. Trends towards **centralisation**
- "Reasons for **consolidation**:
- Good Manufacturing Practice (GMP), Quality Assurance (QA)
- NAT (PCR) testing possible only in selected laboratories
- Implementation of national blood policy
- Better control by health authorities
- Economies of scale"



Situation in Blood Transfusion worldwide in 2012

- Universal trend towards National Services leading to centralisation and coordination:
 - Europe: UK, France, Finland, Ireland, Belgium, Netherlands, Switzerland,... even Italy and other federalistic countries)
 - North America (Canada, US to some degree: clusters ARC, ABC, Blood Systems,...)
 - Pacific: Australia, New Zealand
 - Asia: Japan, Malaysia, Indonesia, Thailand, Vietnam, Laos,... but some countries are lacking behind; (Singapore, Hongkong, Macau)
 - Africa: a lot to do (except: South Africa, some Mediterranean countries,...)
 - Latin America: mostly fragmented, except Nicaragua, Colombia

"The key to our success is a simultaneous *centralisation and decentralisation*" H. R. Nevanlinna 1968, Finland

"Centralisation is *not an "all-or-nothing"* function" J. Leikola, 2001,

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What are the respective advantages/ disadvantages of:

- A. centralized model
- B. centrally coordinated
- C. loose network of autonomous blood centres
- D. fragmented

N.B.

National, regional, local, institutional

Supra-national (a geographic region/ area, economic alliance,...

Global

What have been obstacles/ difficulties/ problems in centralization/ consolidation?



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What is the single **most important problem** for developing APEC countries and the **most significant danger** for their populations in this context?







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Advantages of centralized organization:

- Economies of scale; national budgeting possible
- Harmonization of product range
- Standardization of quality & safety of blood and blood products
- Effectiveness and efficiency of operations increased
- Inventory management improved (outdating reduced)
- Logistics facilitated (blood bags, TTIs, ...)
- Screening (EIA, CLEIA,...) in fewer laboratories
- NAT testing at a "reasonable" cost in a few testing sites
- Regular inspections by regulatory authority in the BCs possible
- Haemovigilance strengthened (for donors, recipients, products, processes, personnel)
- Rapid alert & early warning speeded up
- CAPA uniform and implementation time shortened,...

APEC Forum on Blood Supply Chain Advantages of centralization (resp. regionalization)

Other advantages of centralized organisation:

- Uniformisation facilitated (for methods&techniques, for equipment, material&reagents, products&services)
- Maintenance and repair of equipment facilitated
- Human resources optimized (especially in countries with lack of qualified, experienced personnel)
- Plasma programme feasible (for PDMP through contract fractionation)
- Competition for donors and customers (hospitals) avoided
- etc



Low volume donations: here 250 ml – a major obstacle for adequate blood supply to satisfy demand



Advancing centralization (resp. regionalization)

Potential risks and drawbacks of centralized organisation:

. . .



Advancing centralization (resp. regionalization)

Other potential risks and drawbacks of centralized organisation:

- Longer reaction time in emergencies
- Delays in blood supply/ delivery in difficult conditions (geographic, topographic, meteorologic, disasters,...)
- Loss of flexibility
- Distance to patients in hospitals
- etc



- What have been obstacles/ difficulties/ problems in centralization/ consolidation?
- Politics
- Compartimentation culture
- Local/ individual interests
- Resistance to change
- etc



Advancing centralization (resp. regionalization)

What to centralize (absolutely):

Plasma (for fractionation, for exchange with finished products PDMP, for selling,...)

Purchasing of material (equipment, disposables, reagents,...)

Training programmes

Standards and guidelines (S&G)

Quality management (QM) concept

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Advancing centralization (resp. regionalization)

What can be decentralized (although coordination needed):



Experience

Regionalization and Centralization

Conclusions:

