

# DEBRIEFING REPORT FOR 2023 REDISTRIBUTION SUMMIT

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Inspiring and facilitating best  
transfusion practices in Ontario.



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## Introduction

In 2007, Ontario Regional Blood Coordinating Network (ORBCoN) initiated its support for the efficient transfer of blood components, plasma protein and related products (PPRP) among different facilities. Subsequently, in 2013, the organization collaborated with the Factor Concentrate Redistribution Program (FCRP) to facilitate the efficient distribution of PPRP. Over the years, the provincial redistribution program has played a crucial role in potentially saving an average of 6 million dollars annually by redirecting blood components and PPRP to other facilities for utilization instead of allowing them to expire and be discarded. The provincial redistribution program, despite its success in mitigating product expiry, faces challenges in terms of efficiency and standardization.

## Purpose

In 2016, a summit was convened in response to the introduction of a "new" shipping container by Canadian Blood Services (CBS). The purpose of this summit was to gather laboratory leaders, review the existing redistribution process, evaluate the influence of the new shipping containers on the process, formulate strategies to optimize efficient redistribution processes, and develop approaches to minimize the impact of the new containers. As part of ensuring the continued success of the program, we convened the laboratory leaders once again for their expertise and insights.

## Design and Methodology

The ORBCoN Redistribution working group agreed to facilitate a one-day summit to review the current redistribution processes for blood components and PPRP between facilities. The focus of the summit was to:

- devise strategies to address ongoing issues encountered,
- maximize efficiencies in the current redistribution process,
- consider potential future strategies to support redistribution processes.

## Results

The morning session consisted of presentations provided by the FCRP, ORBCoN and CBS. The presentations included:

- Overview of the Provincial Factor Concentrate Redistribution Program
- Current Redistribution Process
- Reporting Hospital Disposition
- Environmental Scan Survey Summary
- Provincial Redistribution Logistical Issues

The participants were assigned into breakout groups in the afternoon where the focus for one group was validation and verification, and the second group discussed troubleshooting and improving the process. At the end of the breakout sessions the facilitators summarized the common concerns and the proposed strategies for improvements with all attendees. This information will be brought back to ORBCoN for follow-up and for potential strategy implementation as required.

## Discussion or Recommendations

### Troubleshooting and Improving Redistribution Process

Issues Discussed	Recommendations
<p>Wastage of products because container is opened during transit on patient transfers and redistribution.</p>	<p><b>To Reduce Wastage During Patient Transfers</b></p> <ul style="list-style-type: none"> <li>◆ <b>Review Toolkit</b> - Add to IM.002 - 7.2.4 and IM.007               <ul style="list-style-type: none"> <li>○ Individually put components in a clear plastic bag that closes with a seal.</li> <li>○ Need a device (ie temp sticker) to monitor that temp stayed in range, if shipping container had been opened                   <ul style="list-style-type: none"> <li>▪ Would need a procedure on the maintenance of that device or sticker.</li> </ul> </li> <li>○ Could consider Quarantine for 24 hours for an added safety measure, to check the supernatant for hemolysis.                   <ul style="list-style-type: none"> <li>▪ Include pictures</li> </ul> </li> <li>○ Training of ED staff and EMS                   <ul style="list-style-type: none"> <li>▪ Keep MHP in mind, mirror what is happening in MHP toolkit                       <ul style="list-style-type: none"> <li>▫ Video/ PP presentation</li> <li>▫ Training checklist</li> <li>▫ Quiz</li> <li>▫ Chart - Aid</li> <li>▫ Procedure</li> </ul> </li> </ul> </li> </ul> </li> </ul> <p><b>To Reduce Wastage During Redistribution</b></p> <ul style="list-style-type: none"> <li>◆ <b>Training lab staff</b> – Create or update the following:               <ul style="list-style-type: none"> <li>○ Video/ PP Presentation</li> <li>○ Training Checklist</li> <li>○ Quiz</li> <li>○ Chart – Aid</li> <li>○ Procedure</li> </ul> </li> <li>◆ <b>Tamper proof seal</b> <ul style="list-style-type: none"> <li>○ Add definition of Tamper proof seal in glossary of terms.</li> <li>○ Include suggestions of where they could purchase a paper tamper-proof seal in the 5.2 section of IM.002.</li> </ul> </li> </ul>
<p>Lack of clear definitions for reporting disposition</p>	<p><b>Review Redistribution Toolkit</b> – add the following definitions</p> <ul style="list-style-type: none"> <li>◆ <u>Transfused</u>: include units/doses/vials that were entirely transfused, or partially transfused.</li> <li>◆ <u>Redistributed</u>: include units/doses/vials that were redistributed to reduce outdates/improve utilization.</li> <li>◆ <u>Transferred</u>: include units/doses/vials that were transferred to other hospitals/regions with patients; units/doses/vials received by hospital/hospital region/hospital zone with a centralized inventory intake process, that are then sent to other affiliated hospital sites; units/doses/vials shipped to other hospitals/regions to satisfy other hospital request for a particular product.</li> </ul>

Should sites be more independent to redistribute?	<p><b>Review Redistribution Toolkit</b> - add the following information:</p> <ul style="list-style-type: none"> <li>◆ Prior to reporting, need to check within corporation.</li> <li>◆ Look at courier systems in place.</li> <li>◆ Consider contacting sites with established couriers prior to reporting to survey.</li> <li>◆ Create a list of high users for certain PPRP for use by ORBCoN/FCRP (potentially add a question in the bi-monthly survey).</li> </ul>
Responsibility for reporting to Health Canada for errors/accidents of blood components?	<p><b>Review Redistribution Toolkit</b> - add the following information:</p> <ul style="list-style-type: none"> <li>◆ Shipping site's responsibility to inform HC, but receiving site is responsible for notifying the shipping site.</li> </ul>
How do you handle having too many J82 and E38 containers at your site?	<p><b>Review Redistribution Toolkit</b> - add the following information:</p> <ul style="list-style-type: none"> <li>◆ Contact your local CBS supplier to arrange a pick-up of the extra containers.</li> </ul>

## Validation and Verification Processes

Issues Discussed	Recommendations
How to address sites that packing configuration different than what is indicated in the MoU.	<p><b>Review Redistribution Toolkit</b> - add the following information:</p> <ul style="list-style-type: none"> <li>◆ Have site include a picture of their packing configuration when submitting the MoU, so that ORBCoN can send it to the receiving site when making the redistribution arrangements.</li> <li>◆ Add a box to check off on Inter-Hospital transfer form that indicates if ORBCoN packing configuration is being used or their own validated packing configuration.</li> </ul>
Shipping Containers – new biodegradable inserts for the J82 insert do we need to perform a validation?	<ul style="list-style-type: none"> <li>◆ Do not go ahead with the validation of the biodegradable Styrofoam insert, since we already know that it does not meet the needs for redistribution. <ul style="list-style-type: none"> <li>○ Can't keep temperature in correct range for 24 hours in all conditions.</li> </ul> </li> <li>◆ Develop a statement on how to handle the current shipping container.</li> </ul>
If we don't go ahead with the validation of the biodegradable insert for the J82, what should be done?	<ul style="list-style-type: none"> <li>◆ Purchase more dataloggers and have an area to trial their use to acquire data to build a business case to present to the MOH to buy data loggers for every hospital. <ul style="list-style-type: none"> <li>○ Wish list for dataloggers to purchase: <ul style="list-style-type: none"> <li>▪ Collect temp data throughout the journey</li> <li>▪ Identifiers in dataloggers to be sent back to shipping site</li> <li>▪ Easy identification of on/off and excursions</li> <li>▪ Easy programming/ plug and play without additional software</li> <li>▪ Multiple use</li> <li>▪ Calibration hub for yearly checks to meet ACD/HC requirements.</li> </ul> </li> </ul> </li> <li>◆ Once dataloggers have been purchased and implemented, purchase CBS shipping containers currently used with the plates, discontinue the use of the CBS ISC that have the biodegradable Styrofoam insert.</li> </ul>

## Conclusions

Following the completion of the Redistribution Summit meeting, ORBCoN will be moving forward with a set of defined steps to ensure the successful progression of the Redistribution Program. These steps include:

- Putting into place a provincial stakeholder group tasked with advising on the redistribution processes.
  - Consultation with the provincial stakeholder group will be held before implementation of any of the recommendations identified in the outcome tables.
- Reviewing the Redistribution Toolkit to include the stakeholder recommendations identified in the outcome tables.
- Investigate the potential incorporation of the use of dataloggers in the redistribution program and if successful, implement their use provincially.
- Investigate the potential incorporation of the use of CBS Insulated Shipping Containers with phase change materials in the redistribution program and if successful, implement their use provincially.

By following these next steps, we are ensuring that the redistribution program meets ORBCoN's strategic goal of inspiring and facilitating best practices in inventory management.

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