Memorandum of Understanding

Between

Hospital Transfusion Service Provider (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

and

Dispensary/Administration Facility (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For

**The Provision of Blood Component/Product Stock**

**PURPOSE**

The purpose of this Agreement is to establish responsibility and accountability of the two parties named herein to provide safe and effective access to and administration of blood and blood components/products for the patients of Ontario.

**GOALS and FORMS of COOPERATION**

The main interests of this partnership are to:

* Mitigate risk and maximize patient safety through compliance with established, evidence- based national standards for blood and blood components/products.
* Define the respective roles, responsibilities and expectations of the licensed laboratory that provides blood and blood components/products and the dispensing/administration facility that receives and administers the blood and blood components/products.
* Outline the relationship and expectations of each party for ongoing consultation, support and oversight, as well as policy and procedure development in order that the standards may be met and continuously maintained.
* Determine the expectations of accreditation requirements for the dispensary/administration facility.

**COORDINATION**

The medical, technical and administrative coordination of this Agreement is appointed to the following institutions:

**Hospital Transfusion Service Provider:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Dispensary/Administration Facility**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The medical, technical and administrative coordination shall address and resolve logistical and administrative issues that may arise during the term of this Agreement and shall supervise and report on the activities conducted within the framework hereof.

**CLAUSE**

1. **Definitions**

**Hospital Transfusion Service Provider:** A licensed laboratory transfusion service that is providing blood and/or blood components/products that are received from Canadian Blood Services to another facility either for storage or administration.

**Dispensary facility:** Any facility that receives, stores, distributes/issues and administers blood components/products from a hospital transfusion service provider

**Examples:**

* Acute care facilities that do not have licensed laboratories on site but which keep an emergency supply of any blood components/products
* Midwifery clinics that administer Rh immune globulin (RhIG)
* Dialysis clinics that store and infuse albumin

**Administration facility:** Any facility that receives and administers (without storing) blood components/products for a specific patient from a hospital transfusion service provider.  
**Examples:**

* Long term care or rehab facilities that administer red blood cells that have been crossmatched and distributed by a hospital transfusion provider
* Facilities that administer other blood components or products received from a hospital transfusion provider
* Clinics that administer intravenous immune globulin (IVIG) that has been supplied by a hospital transfusion service provider

**Blood component:** any therapeutic component of blood intended for transfusion (e.g., red blood cells, platelets, plasma, cryoprecipitate)

**Blood product:** any therapeutic product, manufactured from large pools of human blood or plasma, or recombinant blood products. e.g.: Rh Immune Globulin (WinRho), intravenous immune globulin (IVIG), albumin, recombinant factor VIII

**B. Roles and Responsibilities**

**General Responsibility: (All Parties)**

* To the extent possible, the participating institutions will ensure that blood components/products are handled, stored, distributed, transported and administered in a manner that prevents damage, limits deterioration, maximizes patient safety and meets the requirements of applicable standards.

(Refer to CSA CAN/CSA-Z902-15 Blood and Blood Components December 2015, CSTM Standards for Hospital Transfusion Services Version 4, April 2017, IQMH Version 7.1 April 2017, Accreditation Canada, Standards Transfusion Services, Version 12, Health Canada Guidance Document: Blood Regulations, March 2016)

**Hospital Transfusion Service Provider (HTSP)**:

* Define the roles and responsibilities of the HTSP
* Some examples include:
  + defined intervals of providing emergency RBC stock
  + ensuring policies and procedures are in place
  + act as a hub site for redistribution
  + forward all relevant Canadian Blood Services (CBS) information such as customer letters and post-donation information and notification of blood shortages
  + provide technical and medical consultation
  + maintain disposition information for all blood components/products and report to CBS
  + assist dispensary/administration sites in the reporting of adverse transfusion events to the required manufacturers, provincial and national bodies
  + perform on-site inspections of equipment used to store and administer blood
  + review transfusion policies and procedures every 2 years

**Dispensary/Administration Facility (DAF)**:

* Define the roles and responsibilities of the DAF
* Some examples include:
  + transporting, receiving and storing blood
  + patient sample collection for testing
  + blood administration
  + informed consent
  + adverse reaction reporting
  + recalls/lookback/traceback
  + training and competency
  + records and documentation
  + appoint an MD at the dispensary facility site who will be responsible for the transfusion
  + establish a Transfusion Committee
  + establish and maintain a redistribution program with the transfusion service provider to minimize wastage of emergency stock
  + procure and maintain as per standards the appropriate storage equipment for the blood and blood components/products being administered
  + maintain all relevant documentation for the period of time defined within provincial and national standards to enable lookback/traceback activities to be conducted effectively
  + report adverse reactions to the appropriate authorities as defined within the standards as well as to the provider named herein in conjunction with the provider
  + establish an orientation, training and ongoing competency assessment program that includes documentation of participation for all personnel involved in transfusion activities
  + seek voluntary accreditation for the transfusion program through either IQMH or Accreditation Canada

C.    Fees and Financial Support

* The HTSP agrees to provide support as outlined in section B above at no charge to the DAF (this may be debatable at some facilities). Should there be additional support/consultation required, fees commensurate with this (time, supplies, reagents, etc.) may be necessary.

**D. Timelines**

* Each party agrees that the responsibilities as outlined within this agreement will be fully executed within one year of the date of signing. Note: If either party is unable to meet these timelines, each party reserves the right to terminate the agreement with 30 days written notice
* This MOU will be valid for two years from the date of signing, renewable upon mutual agreement

**IN WITNESS WHEREOF, each of the undersigned parties represents and warrants that it has the full authority to sign and enter into this agreement on behalf of the institution that each purports to represent.**

**SIGNATORIES**

**HTSP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DAF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_