

Atlantic Regional Liaison Committee

Meeting Date: May 14, 2018

Location: Saint John, NB

Attendees:

Janice Davidson	Fraser Eaton	Ahmed Elballushi
Gordon Jenkins	Charles Leger	Tim Lea
Lawrence McGillivray	Heather Mingo	Will Njoku
Jessica Pelley	Morley Reid	Calvin Taylor
Karen Turner-Lienaux		

Presenters: Chris Brennan Peter MacDonald

Welcome and Introductions:

Key Points:

- Fraser Eaton was welcomed to his new role as Committee Co-chair.
- New committee member, Ahmed Elballushi was welcomed to the Atlantic Regional Liaison Committee (RLC) meeting. Ahmed has replaced Tate Skinner as President of the MUN Blood Club. Round table introductions followed.

Review of Task Tracking Calendar & Agenda / Approval of Summary Notes:

Key Points:

- The October 2017 Atlantic RLC summary notes were approved electronically by the committee.

Action Item:

- Janice Phillips to submit the October 2017 Atlantic RLC summary notes for posting to blood.ca.

National Liaison Committee (NLC) Update:

Presenter: Fraser Eaton, RLC Co-Chair & Atlantic NLC Representative

Key Points:

- Presentations from the NLC meeting held in March 2018 have been posted to Basecamp.
- It appears that there is a greater focus on user groups at NLC meetings vs. RLC meetings. There were ten different user groups represented at the table.
- The biggest single issue on the NLC agenda was Plasma protein products. This is a huge challenge for Canadian Blood Services as demand is increasing worldwide. Plasma protein products accounts for more than half of Canadian Blood Services' total budget.

Comments/ Questions:

- Can information/presentations sent to RLC members or posted on Basecamp be shared with others?
Unless informed otherwise, information/presentations sent to Atlantic RLC members or posted on Basecamp may be shared with others.

Project Updates:

Presenter: Chris Brennan, Manager, Stakeholder Relations, Canadian Blood Services

Key Points:

- MSM Campus Events
 - Campus Event – Dalhousie University - (Update provided by RLC member, Jessica Pelley):
 - *Event was well received.*
 - *A diverse group of people were in attendance, including five representatives from the LGBTQ community, 10 – 12 blood club representatives and Canadian Blood Services representatives.*
 - *The presentation blended education about the policy with an opportunity for discussion and opinions.*
 - *One of the LGBTQ representatives who attended the event has now joined the Dalhousie Blood Group.*
 - Campus Event – Memorial University of Newfoundland (MUN) - (Update provided by RLC member, Ahmed Elballushi):
 - *Event not well received at MUN.*
 - *Only five people showed up to event; however, there were other events underway on campus at that time.*

- *More posters will be put up around campus and more information sessions will be held next semester to bring students up to date on the MSM deferral policy.*
 - Following the MUN campus event, a staff forum was held at the Canadian Blood Services' site in St. John's, NL. The forum started with a 30-minute education session followed by 60 minutes of discussion. There were about 25 people in attendance.
 - Campus events will be held this fall in Ontario at Fanshawe College and Western University.
- MSM Research Agenda Update:
 - Any changes to the MSM deferral policy must be based on science-based discussions and research.
 - When proposing changes to the policy, it is necessary to show Health Canada data proving that no risk is being introduced, that the changes makes sense and are acceptable to the community and that patients are not negatively impacted in any way.
 - Canadian Blood Services has shared data with international colleagues and blood operators; however, there is not a lot of data available for one-year and behaviour-based deferrals. To obtain the necessary data to implement future changes to the policy, a MSM Research Grant Program was established. Multiple projects by Canadian researchers were funded. Some projects will run from six months to one year and others will run for approximately two years. Initial data from the shorter-term projects will be available within the next month or so. The research data will be used to support future MSM deferral policy change submissions by Canadian Blood Services to Health Canada.
 - Since the one-year deferral period was put in place, there has been no change in HIV rates within the donation system.
 - Although Canadian Blood Services will be attending several Pride events, there are no plans to attend events within Atlantic Canada this year.
- Plasma Strategy:
 - Canada is only 15 – 17% self-sufficient in Plasma for fractionation. The remainder is purchased from the USA.
 - Canada currently ships its materials to two fractionators, one in North Carolina and one in Switzerland.
 - A business plan has been submitted to the Government of Canada to open 40 Plasma collection centres across the country over the next eight years to increase self-sufficiency to 50% and to ensure security of supply. An expert panel was convened to review Canadian Blood Services' submission and a report will likely be released within the next week.
- Corporate Strategy Consultation Report:
 - Every five years, Canadian Blood Services lays out its future roadmap.
 - In the fall of 2017, four regional roundtables were held with senior leaders of healthcare organizations, industry and tech innovation hubs across the country. Feedback was gathered regarding areas of excitement or concern over the next five years and how they were addressing some of the changes. Consultations were also held with the RLCs and NLC. A report from those consultations was submitted to the Board of Directors for review/discussion last week.
 - The top strategic challenges that were raised were funding/financial concerns, aging populations and changing demographics across the country.
 - The corporate strategy will be published to blood.ca by the fall of 2018.
- Criteria Updates:
 - Donation criteria changes were recently implemented. One change was the tattoo deferral period. Effective April 23, 2018, the tattoo deferral period was reduced from six to three months.
- Open Board Meeting:
 - The Open Board Meeting scheduled for June 27, 2018, from 8:00 am – 12:30 pm in St. John's, NL, will be webcast.
 - Public presentations will close out the day.
 - This will be the first Open Board Meeting with the new Board Chair and several new Board members.
- RFP for Plasma Protein Products:
 - Canadian Blood Services purchases and makes available to patients across the country, free of charge, a suite of about 45 Plasma Protein product products.
 - New contracts came into place April 1, 2018. The contracts negotiated over the three years will realize \$significant savings for the system.
 - Patient townhalls are underway across the country to ease any concerns related to these changes.
- To break down the barriers of defense and animosity, it is important to educate the public on the evolution of the MSM policy – where we were, where we are and where we are headed.

**Comments/
Questions:**

- Although events such as a recent Syrian clinic in Halifax can be successful, Canadian Blood Services is working towards a model where it can serve any donor, any day, regardless of language/ethnicity.
- Canadian Blood Services' goal is to increase its domestic collections to over 800,000 litres of Plasma, increase self-sufficiency to 50% and possibly open 40 new Plasma collection centres across the country. The first phase of the plan is a request to open three Plasma sites.

Action Item:

- Chris Brennan to post the video interview with the Community-based Research Centre for Gay Men's Health and Canadian Blood Services Chief Scientist, Dana Devine to Basecamp.
- Peter MacDonald to invite someone from Government Relations to discuss Canadian Blood Services' Plasma Strategy during the next Atlantic RLC meeting.
- Chris Brennan to post the date, time, location and web link for the upcoming Open Board Meeting to Basecamp.
- Chris Brennan to post the Final Summary Report for Charting Our Strategic Direction to Basecamp.

Shift to Digital:

Presenter:

Peter MacDonald, Director, Donor Relations Atlantic, Canadian Blood Services

Key Points:

- The number of people managing their own appointments digitally has been increasing and in Atlantic Canada, over 30% of appointments are coming through the digital channel.
- Almost 35% of donors that present at clinic have completed the Record of Donation at home and have a Q-pass.
- Since Canadian Blood Services moved to the Q-pass and Q-osks in clinic for completing the Record of Donation, the number one complaint from donors has been that we don't respect appointments. The Appointment Concierge system was piloted at six sites across the country to address this concern. Following a very successful pilot, the equipment was left at pilot sites and is now fully operational at those locations. In Q3, it will be rolled out to all sites across the country.
- Five key demands of the "always-on consumer"; recognize me, treat me as an individual, make it easy for me, anticipate my needs and give me a voice.
- There are four donor contact flows (recruitment, reminder, missed appointment and retention) in the Customer Relationship Management System. The type of message the donor receives is determined by applicable segments (age, status, activity). The three current channels of contact are e-mail, text and phone/automated voice message.
- Over 180,000 digital profiles were added in 2016-2017. Thirty-two percent of donors with digital profiles made a digital booking.
- A live chat interface function was moved to the blood.ca homepage.
- Shifting the National Contact Centre to a hub for donor contact.
- Donors can select favourite clinics on both blood.ca and the 'GiveBlood' app thereby saving time and simplifying the digital experience.
- Online bookings have tripled in three years.
- Work is currently underway on the following projects; digital booking, donor experience, donor base management and volunteer mobilization.
- Canadian Blood Services' top 10 take-aways in its transition to digital:
 - Be proactive.
 - Innovate – fail early, fail fast, learn cheaply.
 - Continue exploring new ways to optimize UX and digital usage.
 - Get e-mail addresses for every new and returning donor.
 - Talk with donors and honour what they say.
 - Personalize, personalize, personalize.
 - Integrate touchpoints and be consistent with messaging across all channels.

- Analyze the data you have, regardless of the amount.
- Add value for donors – give extra information, experiences.
- Take risks. It is worth it.

**Comments/
Questions:**

- Plasma will soon be included in the CRM system. Booking in the Appointment Concierge system will also apply to Plasma donors.
- Suggested that the app be modified so that when the QR code is scanned it prompts the app to recognize that the donor has arrived for their appointment and allow the donor to then book their next appointment.
- It is important to keep the human experience and satisfaction that donors expect in mind.
Peter MacDonald commented that Canadian Blood Services polls donors and specifically ask questions around satisfaction or specific issues.
- It is important to students who donate that there is a person available at every step of the process. Students who attend clinics together, feel safe, part of a community and that they are doing something good. A growing number of non-Canadian born students are also donating and sharing their experiences because this is something that connects them to the community.
- There is some concern that Canadian Blood Services is losing the “personal touch”. Donors need to feel that they have made a valuable contribution.

Action Item:

- Peter MacDonald to investigate whether donors’ personal information available on blood.ca can be aligned with the app.

Atlantic Canada Operational Update:

Presenter: Peter MacDonald, Director, Donor Relations, Atlantic, Canadian Blood Services

Key Points:

- Hospital demand for Red Cells down 6.8% and continues to go down in Atlantic Canada. Platelet and Transfusable Plasma demand has also decreased.
- In the past three years, Atlantic Canada has experienced significant challenges in meeting its Whole Blood collection targets. Of most significance in the past year is the impact of the 84-day female interval on mobile community events. As of April 1, 2018, 84-day female intervals are reflected appropriately in the mobile clinic plan.
- The Atlantic mobile clinic plan was rebuilt this year. For communities that can absorb it, mobiles will be maintained every 56 – 60 days with perhaps a smaller target. Interval has been moved to every 90 days for communities with a strong penetration rate.
- Nationally, 36.4% of donors are over 50 years old and in the Atlantic Region, 42.5% of donors are over 50 years old. Several years ago, the focus would have been on the need for the next generation of donors. In addition to focusing on the next generation, the Atlantic Region also has an opportunity to reach out to older donors as due to changes in criteria, there is no longer an upper age limit.
- There are 17 weeks in the 2018-19 NL plan without mobiles. Further mobile reductions are not tenable if hospital demand continues to decrease. Research shows that we are at least five years away from the perm site being able to meet hospital demand and would require 2017-18 growth rate year over year.
- St. John’s is the fastest growing perm in the Canadian Blood Services system.
- Needs to be an ability to balance employee value proposition with target reductions and productivity in NL.
- No perm sites will be added in the Atlantic Region in the near or mid-term.
- The Saint John, NB, perm site has been identified as one of the poorest locations in the current system and will be addressed on a larger scale within the next two years.
- The Atlantic Region has moved from a net exporter to self-sufficiency.
- The focus at the local level is to grow the group program.
- Canadian Blood Services has competition from Canadian Plasma Resources in Moncton, NB. Have requested stronger messaging and market-specific activities.

- The introduction of Saturday collection hours at the Saint John perm was unsuccessful. On April 1, 2018, Saturday Whole Blood hours were moved to Wednesday evenings.
- The Saint John perm is the only perm site in the Atlantic Region with a penetration rate lower than the national average.
- Communities with penetration gaps have been called out and not built to current performance but to a realistic target in the 2018-19 plan. Perms based on current run rate.
- Focus is on perm sites. Three of five perms with existing program are on the right track. St. John's will get to its target in an appropriate stepped approach. Halifax and Charlottetown are headed in the right direction and continue to trend appropriately. New Brunswick perms have been identified for incremental help.
- Regional messages, scheduled, approved and available. Always super ceded by Trigger and local In Honour events.
- Review feasibility of moving all mobiles to lowest common denominator (6 beds). If the difference between mobile and perm site set-ups were closer, could we create intact teams and improve employee retention?
- In February 2018, it was announced that three OneMatch Stem Cell Territory Manager positions (in Atlantic Canada, Ontario and the Prairies) were being eliminated. Although awareness and patient campaigns may still take place, going forward, the Atlantic approach will be to focus events in areas that will drive more ethnic diversity and directing individuals interested in joining the registry to online registration. The goal is to have more ethnically diverse males (17 – 35 years old) sign-up online.
- Frontline staff at Canadian Blood Services are required to complete a training module on diversity.

**Comments/
Questions:**

- In the past, when hospital demand decreased, perm sites were closed across the country and mobiles ceased going to certain communities. Before cutting back any further on collections, the potential impact on other products produced from Whole Blood donations need to be considered.
- Some of the drivers for the reduction in demand are less invasive surgeries requiring less blood, the change of physician transfusion orders from two to one unit before checking on the patient to determine the next course of action and better adherence to the National Advisory Committee's guidelines on blood usage.
- More focus is now on preoperative optimization. Tranexamic acid is now being used to control bleeding during surgery and transfusion rates have dramatically dropped in joints, hips and knee surgery. More Fibrinogen (RiaSTAP®) and less Cryoprecipitate is being used. Cell savers are also in use at various sites across Canada and the United States.

Activity Updates from Committee:

Key Points:

- Lawrence McGillivray:
 - Will likely surpass 150 donations this school year. The largest increase in participation has been in their immigrant population.
- Charles Leger:
 - Jacqueline Alain actively worked with the University of Moncton to generate interest. Although the day was well planned, the student centre location was not ideal to accommodate Canadian Blood Services' equipment so she is looking at alternatives. Jacqueline has proposed trying to increase blood donations on holiday Mondays. Charles is unsure how well this would be received and he will be meeting with Jacqueline to discuss other ideas.
- Tim Lea:
 - Providing tours and promoting Transfusion Medicine and good ordering practices to new midwives and LPNs.
- Jessica Pelley:
 - Although the MSN event went well, clinics were not to target. A separate Stem Cell Club is being introduced.
- Fraser Eaton:
 - Will be meeting with the Kinsman Club in St. John's to try to get them back onboard.

- Ahmed Elballushi:
 - Prior to last year, the blood club was primarily focussed on organizing clinics held on campus. Have been partnering with other societies during events such as bake sales to encourage students to join the blood club and to donate.
- Morley Reid:
 - During the last RLC meeting, the committee was advised that there had been meetings with the English School District in NL, possible meetings with the French School District and meetings with the NL Teachers Association. It was determined that instead of trying to implement something mid-year, it would be best to wait until the beginning of the new school year. A meeting will be scheduled to discuss what can be implemented in September. Hope to have something to report on "Learning to Save Lives" at the October 2018 Atlantic RLC meeting.
- Cal Taylor:
 - Visited Ascension Collegiate and Holy Spirit High School to encourage participation in the blood system. A comment received from an Ascension Collegiate representative was that the problem with participation is that they are still held accountable for time off task. Peter MacDonald noted that although approval has been given by the NL English School District, final approval rests with school principals.
 - An In-Honour clinic was held in Conception Bay South on April 17, 2018. Cal arranged for the distribution of well over 1,000 brochures/posters and spoke with a restaurant owner who posted information about the In-Honour clinic on social media and drew two names from the individuals who shared the information for two free cheese cakes. He also provided a cheese cake to the clinic.
- Heather Mingo:
 - Have been holding events for residents and the Medical School. Dalhousie medical students are educated on the need for blood and donation. Last year, What's Your Type and OneMatch presented as a table and provided an informative session on OneMatch, Organs and Tissues and the importance of donating. It was well received and resulted in some new donors.
- Gordon Jenkins:
 - Have been teaching part-time at Holland College. In the fall, will encourage the students he is teaching to attend the clinic.

Action Item:

- Peter MacDonald to follow-up with the NL Territory Manager to ensure the restaurant owner who provided the clinic with a cheese cake and held a draw for two additional cheese cakes has been thanked.
- Peter to forward the contact information of someone from OneMatch to Janice Davidson.

Honouring Our Lifeblood:

Presenter: Peter MacDonald, Director, Donor Relations, Atlantic, Canadian Blood Services

Key Points:

- Honouring Our Lifeblood events have been scheduled for:
 - June 7, 2018 – St. John's, NL
 - June 11, 2018 – Moncton, NB
 - June 12, 2018 – Saint John, NB
 - June 13, 2018 – Charlottetown, PE
 - June 14, 2018 – Dartmouth, NS
- Committee members are encouraged to attend.

Action Item:

- Janice Phillips to post Honouring Our Lifeblood event details to Basecamp.

Future Topics:

- Organ Donor Registration
- Government Relations & Plasma
- Update on Red Blood Cell Antibodies
- Organ and Tissue Donation and Transplantation
- Rebranding of Canadian Blood Services

Next Meeting:

- The next meeting is scheduled for October 22, 2018, at the Canadian Blood Services site in St. John's, NL.
- A 'save the date' e-mail will be sent to Atlantic RLC members.

The meeting was adjourned at 2:30 pm.