

Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

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ADMINISTRATIVE ORDER

No. 2010 - 000

SUBJECT:

Policies and Guidelines for the Philippine National

Blood Services (PNBS) and the Blood Services

Networks (BSN)

I. RATIONALE

Pursuant to Administrative Order No. 2005-0002 dated January 10, 2005, the National Council of Blood Services (NCBS) was created. This council is the governing body of the Philippine National Blood Services (PNBS) which is composed mainly and collectively by the blood service facilities of the Department of Health, the Philippine National Red Cross (PNRC) and the local government units (LGUs).

All over the Philippines, blood centers and other blood service facilities within their catchment areas are organized into Blood Services Networks each designed to adopt to the unique situation of their localities but nevertheless adhering to the standards that have been set. Given the National Voluntary Blood Services Program (NVBSP) main goal of Blood Safety and Adequacy towards Quality Care and Patient Safety, additional policies and guidelines need to be issued. The same aims to strengthen the operations of blood service facilities at national and local levels with the end in view of efficiency and timely availability of quality and safe blood supply. This endeavor is pursued to contribute to the attainment of the Millennium Development Goal of Maternal Mortality Reduction, among others.

This Administrative Order is in support of the following issuances:

- Revised Implementing Rules and Regulations of the National Blood Services Act of 1994 (RA 7719)
- National Policy on Patient Safety (Administrative Order No. 2008-0023) through Blood Safety and attainment of 100% Voluntary Blood Donation by end of 2010.

II. OBJECTIVES

This Administrative Order aims to:

- 1. Provide supplementary policies and guidelines in the operationalization of the Philippine National Blood Services and the Blood Services Networks in the context of health sector reform;
- 2. Describe the structures, systems and processes in relation to the collection, testing and use of blood products, facilities and services;
- 3. Define roles and functions of health facilities, health care professionals and other partners in adopting the blood service networks as the key strategy.

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III. SCOPE

This issuance shall apply to all government and private blood service facilities nationwide, which promote voluntary blood donation; recruit, screen and counsel voluntary blood donors; collect, test, and process blood units; and issue blood components to hospitals and other health facilities. Likewise it shall also apply to all hospitals and other health facilities which administer blood transfusion.

IV. PURPOSE

This Order supports the National Voluntary Blood Services Program (NVBSP) and is promulgated to guide the operations of the Philippine National Blood Services (PNBS) and the Blood Services Network (BSN) under the National Council of Blood Services (NCBS). It likewise supports related DOH Issuances: Operational Guidelines for Blood Services Network (BSN) for Blood Safety and Adequacy, Quality Care and Patient Safety; Policies and Guidelines for the Establishment and Operation of Local Blood councils in Support to the Implementation of the National Voluntary Blood Services Program for Blood Safety and Adequacy, Quality Care and Patient Safety; and, the National Policy on Patient Safety (AO No. 2008 - 0023) and the Rapid Reduction of the Maternal Mortality Ratio.

V. **DEFINITION OF TERMS**

- A. APHERESIS FACILITY a blood service facility where blood collection procedure is done in which whole blood is removed, a selected component separated and the remainder returned to the donor;
- B. BLOOD CENTER (BC) a non-hospital based blood service facility licensed by the DOH Bureau of Health Facilities and Services (BHFS) with minimum service capabilities as defined in AO No. 2008-0008. The Blood Centers shall be classified into Regional, Sub-national and National whose additional service capabilities will be determined by the National Council for Blood Services (NCBS);
- C. BLOOD COLLECTION UNIT (BCU) a blood service facility, duly authorized by the DOH-Center for Health Development (CHD) with service capabilities as defined in AO No. 2008-0008.
- **D.** BLOOD DONOR PANEL persons recruited and willing to donate blood and may be called upon anytime to donate;
- E. BLOOD DONOR REGISTRY a document/ system containing the list of individuals who are registered as blood donors with their ABO group and Rh type, identity and contact information (complete name, address, telephone number, e-mail address);
- F. BLOOD SERVICE FACILITY (BSF) a unit, agency or institution providing blood products, either as Blood Station, Blood Collection Unit, Hospital Blood Bank and Blood Center (National, Sub-national and Regional);
- G. BLOOD SERVICES NETWORK (BSN)— an informal organization established to provide for the blood needs of a specific geographical areas or catchment population. It is composed of the designated blood center, hospital blood banks, blood collection units, blood stations and end-user hospitals/non-hospital health facility/ies. The objectives of the Blood Services Network is the efficient distribution of voluntarily donated blood by the blood center to different blood service facilities, hospitals and other end users to make blood available to all patients, maximize utilization of available blood and avoid wastage.

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- H. BLOOD STATION (BS) a blood service facility, duly authorized by the DOH Center for Health Development (CHD) with the service capabilities as defined in AO 2008-0008
- I. DIRECTORY OF DONOR REGISTRIES an index of blood donor registries by agency or barangay, which includes the complete names, addresses and other contact information.
- J. DONOR RECRUITMENT TEAM a group of two or more trained people who actively recruit and orient potential blood donors.
- K. END-USER HOSPITAL a hospital with a licensed clinical laboratory capable of red cell typing and cross-matching and which does not have any blood service facility but which only receives blood and blood components for blood transfusion as needed.
- L. END-USER NON-HOSPITAL HEALTH FACILITY a licensed/accredited non-hospital health facility without a licensed clinical laboratory but which administers blood transfusion.
- M. HOSPITAL BLOOD BANK a blood service facility in a hospital, duly licensed by the DOH Center for Health Development (CHD), with service capabilities as defined in AO 2008-0008.
- N. HOSPITAL BLOOD TRANSFUSION COMMITTEE (HBTC) a hospital committee primarily responsible for the formulation of Blood Bank and Blood Transfusion policies and guidelines for monitoring and audit of the use of blood and blood components within the facility, provided they are in accordance with the Manual of Standards for Blood Service Facilities issued by the DOH. A functional HBTC is a prerequisite for the licensing of a hospital by the DOH and accreditation by the Philippine Health Insurance Corporation (PhilHealth).
- O. LOCAL BLOOD COUNCIL a non-profit, non-governmental, multi-sectoral group whose members come from government and private sector in the local community committed to support the blood program. Its objective is to plan and implement a local blood donation program in accordance to DOH policies and guidelines on Local Blood Councils.

VI. POLICIES AND GUIDELINES FOR THE PHILIPPINE NATIONAL BLOOD SERVICES AND BLOOD SERVICES NETWORKS:

A. On Donor Selection and Pre-Donation Counseling

- 1. The General principles for the selection of volunteer blood donors as stated in the new DOH Blood Donor Selection and Counselling Manual (launched June 15, 2009) shall be followed.
- 2. Pre-donation Counselling must be provided by trained health workers in an environment with audio-visual privacy to support confidentiality.
- 3. Potential blood donors shall undergo the medical interview and physical examination and pre-donation education and counseling. A potential blood donor may opt to self-defer for reasons of donor or patient safety or both.

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B. On Blood Collection, Post-Donation Counselling, Donor Care and Retention

- 1. Blood shall be collected from voluntary non-remunerated blood donors only. There shall be no payments in cash or kind. To ensure vigorous and sustained voluntary blood donation, advocacy/campaign shall be intensified.
- 2. A potential blood donor who passes the donor selection criteria and has successfully donated blood shall be recorded (i.e. a blood donation record or blood donation card logbook) until such time that a Voluntary Blood Donor's Identification Card containing a unique bar-coded donation number is implemented;
- 3. A first time volunteer blood donor shall be encouraged to become a repeat/regular donor by donating at least every three (3) months;
- 4. For Blood Collection Units (BCUs) and Blood Centers (BCs) which are not yet subscribing to or utilizing the IBBIS, all necessary data on blood donors shall be recorded in the Blood Donor Registry of every Blood Collection Unit and every Blood Center. For BCUs and BCs already subscribing to and utilizing the Integrated Blood Bank Information System (IBBIS) to record blood donor/blood donation information, the monitoring and evaluation of donor data for epidemiological purposes may be done by the PBC through automatic access of necessary information from the IBBIS. A hard copy of the report, however, is preferable until such time that the entire IBBIS network has become operational:
- 5. There shall be an effective donor care and retention to maintain regular and repeat voluntary blood donors.
- 6. Only authorized Blood Collection Units (BCUs) and the Blood Centers, and their authorized Mobile Blood Donation (MBD) Teams may collect blood. Blood shall be collected from healthy voluntary non-remunerated blood donors only.

C. On Testing and Transfusion

- 1. All blood units for transfusion must test negative for the following: Hepatitis B, Syphilis, Malaria, HIV 1 & 2, and Hepatitis C Virus. Reagent kits used must comply with the minimum criteria for sensitivity, specificity and test methodology recommended by the NCBS Technical Committee.
- 2. The current sequential testing of donated blood units in various blood service facilities shall be shifted to simultaneous centralized testing in Blood Centers for the five (5) mandatory transfusion-transmissible infections.
- 3. While maintaining confidentiality, blood donors who confirmed positive to any of the mandatory tests shall be

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- recalled, counselled and referred to a trained physician/appropriate health facility for further evaluation and management;
- 4. Blood shall be requested and transfused ONLY when medically-indicated and consistent with the Philippine Clinical Practice Guidelines (CPGs) for the Rational Use of Blood and Blood Products (launched June 15, 2009). Blood component therapy shall be utilized.
- 5. Additional tests performed by the Hospital/Health Facility shall be optional. Non-performance of these additional tests on the blood unit(s) by the Blood Centers shall not be used as basis for rejection by the transfusing facility (i.e. Hospitals/Health Facilities administering blood) from the issuing blood service facility (i.e. Blood Center).
- 6. All blood transfusion reactions observed shall be investigated and properly documented using the standard NVBSP transfusion reaction form as part of the hospital's post transfusion surveillance (hemovigilance).

D. On Issuance/Provision of Blood Units

- 1. Requests for blood units and its issuance shall be DIRECTLY between the requesting hospital/end-user health facility and the authorized Blood Station/licensed Blood Center.
- 2. Hospitals and other health facilities administering blood transfusion shall study their blood requirements to determine the number of units of blood/blood products that it should request from issuing blood service facilities. The blood/blood products to be issued to hospitals on a regular basis will depend on the blood stock inventory as reported to the Blood Station/Blood Center.
- 3. Licensed/Accredited end-user hospital-based or non-hospital based facilities (i.e. renal dialysis centers, ambulatory surgical clinics, and emergency obstetrical care facilities) which provide transfusion of blood or blood components shall establish and maintain a proper audit and inventory system of blood and blood components to ensure an adequate and safe supply of blood to patients.
- 4. All transactions on issuance and transport of blood/blood components should be in accordance with the agreement made between the issuing party and the end-user health facility as reflected in a Memorandum of Agreement.
- 5. It is the responsibility of the Blood Center/Blood Station that all blood/blood components issued to hospitals/end-user health facilities be transported according to the protocol on cold chain management. It is therefore important that the personnel should have the skill and training on cold chain management.
- 6. Every blood service facility shall operate on a non-profit basis.

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- 7. BLOOD ITSELF IS FREE. However, the expenses for the recruitment of donors, collection and processing of the blood and blood components such as the actual cost of blood bag, reagents, supplies and overhead expenses for the provision of the unit of blood shall be charged as SERVICE FEES for cost recovery as authorized by RA 7719 and the latest Administrative Order prescribing the maximum allowable blood service fees.
- 8. Blood and blood components shall be available 24 hours. Every hospital shall determine their minimum blood stock inventory level and have a ready stock of unassigned tested blood units available at all times for emergencies;
- 9. Each blood service facility shall operate in accordance with the Manual of Standards for Blood Centers, Blood Banks, Blood Collection Units or Blood Stations;
- 10. All Blood Service Facilities of the DOH, Local Government Units (LGUs) and PNRC, and if any, Blood Service Facilities owned/operated by non-government organization (NGO), shall be organized into Regional/Provincial Blood Services Networks for maximum sharing of blood resources through proper blood stock inventory and efficient distribution system to minimize wastage of blood;
- 11. All blood service facilities, hospitals and non-hospital endusers shall subscribe to and utilize the Integrated Blood Bank Information System (IBBIS) to facilitate traceability of donated blood/blood component and validation of test results and other pertinent information accessible through the database of the IBBIS.
- 12. Estimates for the annual blood needs per region shall be based at one percent (1%) of the total population (latest statistics issued by the National Statistics Office/NSO). However, this estimate shall be adjusted to the actual requirements of hospitals/health facilities within the region;
- 13. Apheresis of blood donors shall be encouraged especially when rare blood types are needed and the demand for units of platelet concentrate is high such as during an outbreak of dengue hemorrhagic fever, and in diseases like leukemias, aplastic anemia and similar conditions.
- 14. Autologous transfusion, bloodless surgery and strategies for blood conservation such as the use of hematinics and erythropoietin shall be encouraged.

E. On Blood Supply, Storage and Distribution

1. Taking into account the terrain and distance among blood service facilities and the hospitals, communication and transport facilities equipped with appropriate temperature

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control shall be established to ensure the accessibility, availability and quality of blood and blood components;

2. All national and local government hospitals (Levels 2 to 4) shall have the appropriate Blood Service Facilities (Hospital Blood Bank or at least a Blood Station (BS)) within the premises to ensure timely access to needed blood. If a Level 1 hospital is identified as a provider of Basic Emergency Obstetrical and Neonatal Care (BEmONC) services, it shall likewise have the appropriate blood service facility (either Hospital Blood Bank or at least a Blood Station).

3. All blood service facilities licensed/authorized to store blood shall have appropriate cold storage equipments.

F. On Community Mobilization through Local Blood Councils

- 1. Every region, province and highly urbanized city shall establish a Local Blood Council that shall support the Regional Blood Services Network;
- 2. A Local Blood Council is encouraged to be formed in component cities, districts, municipalities and barangays;
- 3. The Local Blood Council shall assist the local blood services networks in public education, donor re cruitment and organization of mobile blood donation and providing human and financial resources;
- 4. Policies and Guidelines for the establishment of Local Blood Council shall be issued in a separate Administrative Order.

G. On Blood Donor Panels/Registry

- 1. All barangays of the country shall establish and maintain a Blood Donor Panel as a reference for the mobilization of blood donors especially in emergencies;
- 2. Any agency, whether government or private, may establish a Blood Donor Panel. Every Blood Bank/Blood Center or Blood Collection Unit shall establish its own Blood Donor Registry to include Rh Negative and other rare blood types. Each Blood Bank/Blood Center or Blood Collection Unit shall submit the data to the IBBIS Unit of the Philippine Blood Center for the purpose of sharing information, research and facilitate access to voluntary blood donors of rare blood types and maximize the utilization of blood by patients who need them;
- 3. The National Council for Blood Services (NCBS) upon recommendation of the Committee on Information Technology shall formulate the guidelines for the establishment of the National Directory of Blood Donor Registries;
- 4. All Blood Service Facilities shall submit appropriate data about Rh negative and rare blood types to the PNRC-National Blood Services (PNRC-NBS) and to the Philippine Blood Center. The PNRC-NBS shall disseminate the current guidelines for the



- operation of the Donor Registry of Rh Negative and Other Rare Blood Types;
- 5. The PNRC-National Blood Services shall submit periodically to the NCBS through the Philippine Blood Center, the updated Registry of Rh Negative and other Rare Blood Types to assure consistency of the databases at PNRC and DOH.

H. On Operations of the Blood Services Network

- 1. Blood and blood products shall be made available at all times. The availability of blood and blood products is the shared responsibility among the attending physicians, the community and the management and staff of the health facilities (hospitals and blood service facilities);
- 2. All BSF, (government, private or PNRC) shall provide safe and quality blood and blood components at all times and shall conduct quality assurance in all aspects of its operation;
- 3. Since it is recognized that there is no system that will ensure absolute safety in blood transfusion, the blood center shall not be liable for any transfusion-associated infections provided that all quality standards and requirements, and technical operating procedures have been complied with and documented;
- 4. All Blood Centers and BCUs shall develop and implement policies and procedures on blood collection from voluntary non-remunerated healthy blood donors only;
- 5. All Blood Service Facilities shall not charge more than the Maximum Allowable Blood Service Fees promulgated by the DOH based on the recommendation of the NCBS:
- 6. All hospitals with a blood bank/blood station shall establish and maintain a functional Hospital Blood Transfusion Committee.

I. On DOH Licensing and Authorization

- 1. All Blood Centers shall be licensed by the DOH-BHFS in coordination with the NCBS;
- 2. All hospital based blood banks shall be licensed by the DOH-CHD in coordination with the Regional Blood Centers;
- 3. All Blood Collecting Units (BCU) and Blood Stations (BS) shall be authorized by the DOH-CHD in coordination with the Regional Blood Centers;
- 4. Hospital Blood Banks and Hospital-based Blood Stations shall be licensed or authorized to operate through the One-Stop-Shop Licensure for Hospitals and are therefore not required to obtain a separate LTO or ATO. For details, please refer to AO 2007-0021;
- 5. The active participation in a Blood Services Network of a blood service facility shall be a requirement for the issuance of

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- license of blood banks and authorization for BCU & BS by the DOH-CHDs;
- 6. As part of the licensing/authorization requirements for blood service facilities, the lead blood center of the region shall issue a Certificate of Inclusion to all blood service facilities actively participating in the network and complying with policies, guidelines and standards;
- 7. The National Reference Laboratories shall provide External Quality Assessment Surveys (EQAS) as a requirement for the renewal of license to operate as blood centers and blood banks,
- 8. Pertinent information regarding application for LTO for BCs and BBs and ATO for BCUs and BSs and other matters relative to requirements and application process are prescribed in AO No. 2008 0008.

VII. IMPLEMENTING GUIDELINES

A. Structural Organization – Annex A of AO 2005-0002 as Organizational Chart and Annex B as Functional Diagram

1. Blood Services Network

The Blood Services Network is composed of the following as stated in AO 2005-0002:

- a. The National Council for Blood Services and its various Committees;
- b. The Philippine National Blood Services (composed of National, Sub-National & Regional Blood Centers);
- c. Authorized Blood Collection Units and Apheresis Facilities: Government, the PNRC, or Non-Government Organizations;
- d. Hospital Blood Banks and Blood Stations, both government and private;
- e. Non-hospital based-Blood Stations: government, or the PNRC;
- f. End-User Hospitals and Non Hospital-based Health Facilities, both government and private;
- g. National Reference Laboratories for Immunology and Immunohematology.

2. National Council for Blood Services (NCBS)

a. Composition

The National Council for Blood Services shall be the governing body of the Philippine National Blood Services. The composition and functions are stated in AO 2005-0002 and elaborated in relevant Department Circular.

- b. Committees:
 - i. The National Council for Blood Services shall establish the following:
 - Executive Committee
 - Technical Committee
 - Committee on Public Education and Advocacy
 - Committee on Professional Education
 - Committee on Curriculum Development

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- Committee on Finance
- Committee on Information Technology
- Other Committees that shall be created as necessary
- ii. The Council shall appoint the Chairs and Members of the committees who will exercise the duties and responsibilities delegated to them by the Council.
- iii. Composition and Functions of the Executive Committee:
 - Chairperson or his/her authorized representative;
 - Vice Chairperson or his/her authorized representative;
 - The Director of the Philippine Blood Center or his/her authorize representative;
 - Chairs of different Committees of the Council;
 - Technical experts that may be appointed by the Council.
- iv. The Executive Committee shall exercise such powers as may be delegated to it by the Council. The Executive Committee shall review and resolve matters to be considered by the Council, to make recommendation to the Council and serve as advisory body to the Council.
- v. Other Committees: The composition and functions of the other Committees under the NCBS are stated in the relevant Department Personnel order (DPO) and Department Circular (DC), respectively.
- c. Meetings and Quorum
 - i. The Council shall hold regular meetings at least quarterly;
 - ii. Special meetings may be conducted at the call of the Chairperson or by three (3) members of the Council;
 - iii. The Chairperson or his/her authorized representative shall preside over the meetings of the Council. In the absence of the Chairperson or his/her representative, a temporary presiding officer shall be designated by the majority of the Quorum;
 - iv. Fifty percent (50%) plus one (1) of the total membership (current members) shall constitute a quorum to transact business and a vote of the majority of those present, there being a quorum shall constitute a valid decision of the Council;
 - v. The meetings of the Council shall be conducted according to Roberts Rules of Order, modified as appropriate to ensure the speedy discussion and resolution of matters/issues that come before the Council.
 - vi. Each Committee shall hold regular meetings at least quarterly.
 - vii. Fifty percent (50%) plus one (1) of the total membership (current members) of the committee shall constitute a quorum to transact business.
 - d. Compensation of the Members of the Council and Committees:
 - i. The non-DOH members of the Council and Committees shall be entitled to per diem for each meeting actually attended at such amount as may be fixed by the Council in accordance with existing laws, rules and regulations;

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- ii. The Members of the Council and the Committees may claim actual and necessary expenses while performing their duties in the Council or Committees or otherwise engaged in the projects or activities of the Council or the PNBS subject to the approval of the Council.
- B. Roles and Responsibilities of Major Implementing Partner Agencies and specific Units/Committees/Personnel shall be defined in the relevant Department Circular:
 - 1. Philippine Blood Coordinating Council
 - 2. Philippine National Red Cross
 - 3. Hospital Blood Transfusion Committee
 - 4. Blood Centers
 - 5. National Reference Laboratories (NRLs)
 - 6. DOH- Center for Health Development
 - 7. Regional Blood Program Coordinator
 - 8. Head of Blood Service Facilities

VIII. REPEALING CLAUSE

All the existing issuances/provisions inconsistent with this Administrative Order are hereby repealed.

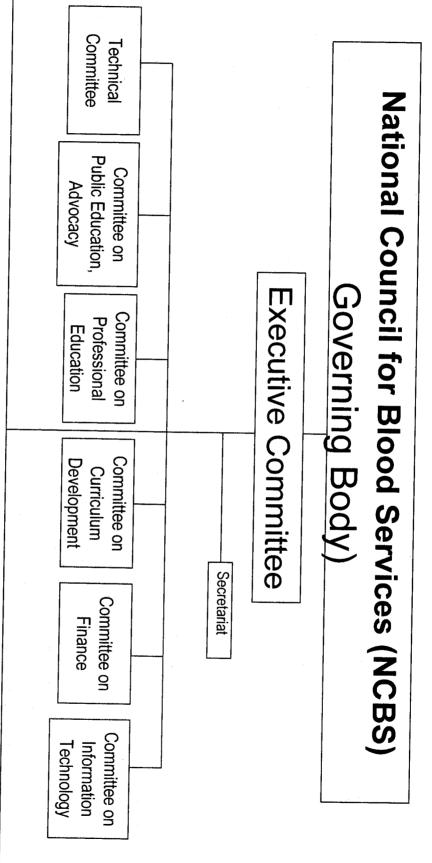
IX. EFFECTIVITY

This Administrative Order shall take effect immediately.

FRANCISCO T/DUQUE III, MD, MSc

Secretary of Health

Organizational Structure



Philippine National Blood Services (PNBS) - composed of Blood Centers of DOH, LGUs, PNRC

- National: DOH Philippine Blood Center & PNRC National Blood Center, Metro Manila
- Sub-National & Regional Blood Centers for Luzon, Visayas & Mindanao (upon recommendation of NCBS)



Blood Services Network

