







Challenges facing implementation of SLMTA Program in blood transfusion service in Kenya

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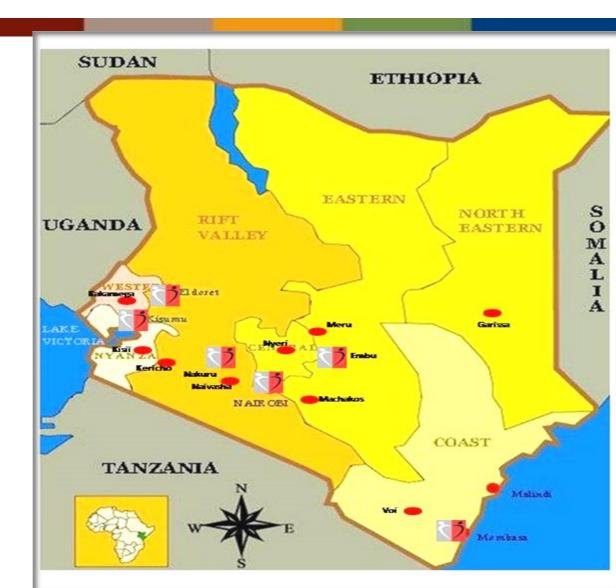


Background

 National coordinating office in Nairobi

 6 Regional Blood transfusion Centres

11 Satellites











Differences

	Blood Transfusion Service	Clinical/ Public Health Laboratory
Pre Analytics	Awareness and MobilizationDonor Selection and counsellingBlood collection	 Test selection Patient preparation Sample collection, transport & handling
Analytics	 Donation testing (TTIs) & Grouping Preparation of blood component (Manufacturing) 	Sample testing
Post- analytics	Issue of compatible bloodBlood AdministrationHaemovigilance	Test reportingTest results issuance for utilization









Quality systems for blood transfusion service

- To ensure safety and availability of blood, a quality system should cover all aspects of transfusion process (Vein to vein)
- SLMTA was endorsed as the process to be used towards vein to vein quality system in KNBTS
- Rationale for using SLMTA
 - ✓ has significant management component applicable to BTS
 - ✓ BTS has laboratory and other aspects that would benefit from SLMTA

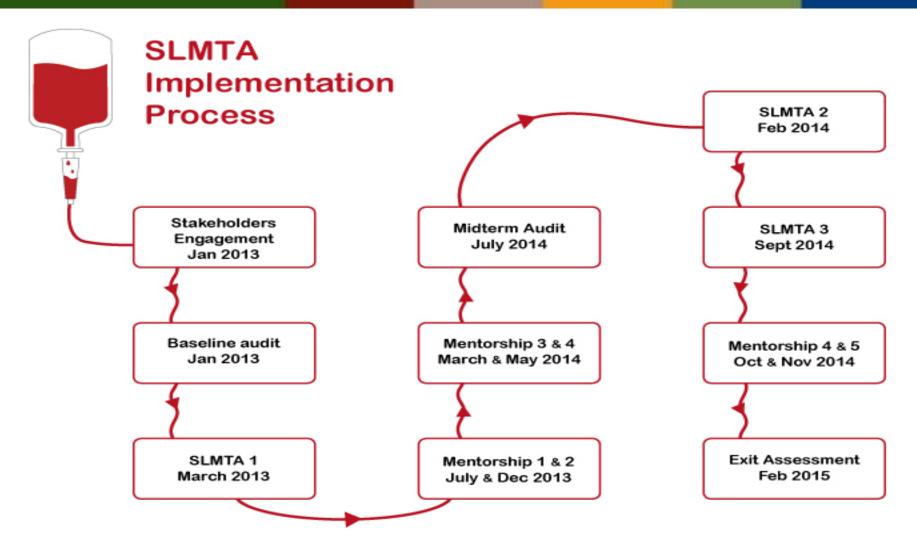








It's safe and it saves.



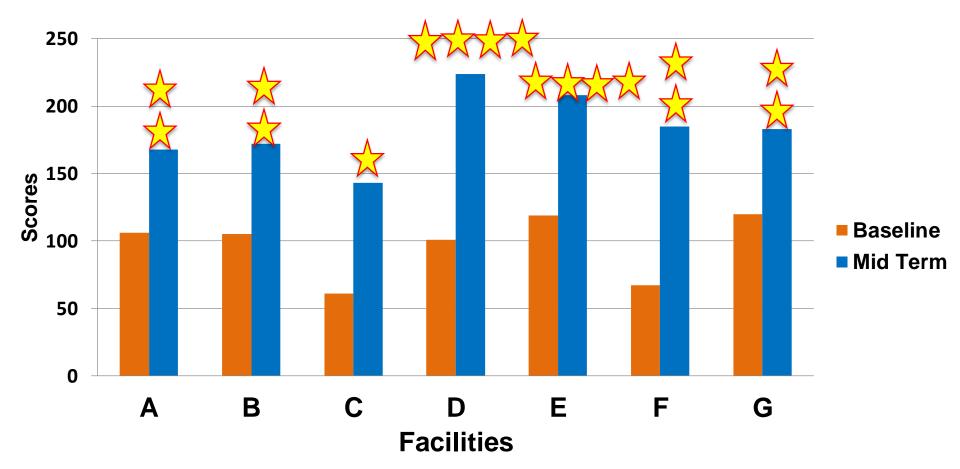








Results for Baseline and Midterm Audits



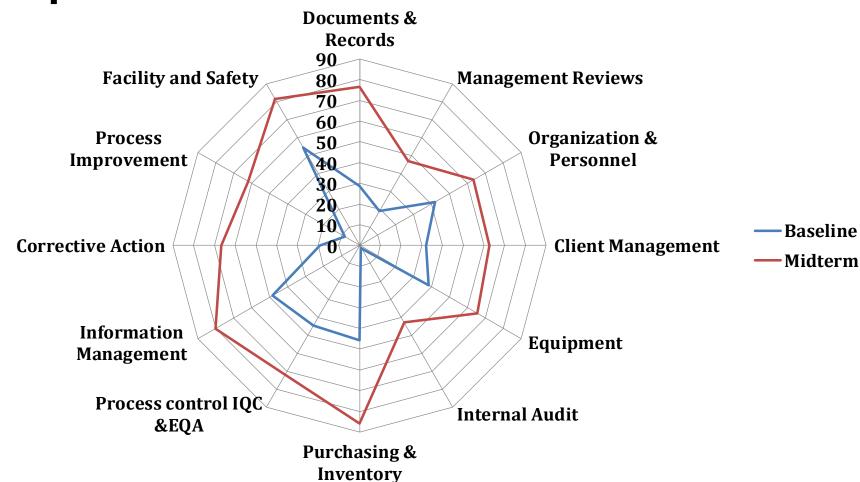








Improvements











Challenges faced in implementing SLMTA

- 1. SLMTA Training Toolkit Content
- 2. Target group
- 3. Implementation challenges
- 4. National level challenges
- 5. Facility level/Individual level









SLMTA Training Toolkit Content

Donor

- Mobilization&
 Recruitment
- Donor Screening
- Hygienic Blood Collection
- Donor Reactions
- Donor Counseling

Testing

- TTI Testing
- Grouping
- Test Results
- Traceability (Test Tube to Results)

SLMTA Main focus **Component Production, Storage, Issue, Transfusion**

- Sterile Component Production
- Proper Storage (Cold Chain Mgt)
- Product labeling
- Issuing of Transfusable Product
- Blood Administration Transfusion Reactions
- Hemovigilance









Target Group

- SLMTA Target group is mainly clinical, public health labs
 - ✓ Laboratory Management
 - ✓ Laboratory technologist
- BTS involves other cadres
 - ✓ Nurses
 - ✓ Recruiters
 - ✓ Non Medical Managers
- There was need to customize learning activities during the workshops to suit the scope of services/ other cadres









Implementation pathway

Lack of enough trained auditors **Audits** with a wholistic understanding of the entire blood transfusion service Learning activities needed Workshops customization to suit scope of service of blood transfusion Inadequate mentors experienced in **Mentorship** blood transfusion activities









Facility level/individual challenges

- Staff adapting to the culture of quality- Documentation, audits, continuous improvement
- Some staff considered SLMTA as additional work
- In some facilities, SLMTA was considered a laboratory affair by other departments
- Coordination of all the facility departments to ensure they are implementing the required quality measures









National level challenges

- Delays in KNBTS strategic plan, Policy and guideline making, adoption and dissemination
- Insufficient financial resources to address emerging gaps-Major funding mechanism PEPFAR (80%), funding lines had prior determination
- Equipment maintenance and calibration









Outcome of SLMTA

- SLMTA has helped to improve overall quality of services provided
- Working environment is safer
- Staff more motivated and committed to their workincreased blood collection
- Improved TAT (lab, donor clinic, blood issue)









Recommendations

- Adoption of KNBTS strategic plan where SLMTA is anchored
- Orient SLMTA TOT, mentors and assessors on blood transfusion service
- Make reference to other BTS accreditation standards/guidelines (AFSBT, AABB etc.) during trainings
- Obtain buy in at highest level to ensure ownership and compliance at facility level









Acknowledgement

- PEPFAR
- CDC
- KNBTS
- RSBTK
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- ASLM









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Thank you