



Ministry of Health



Council of Governors

INTER-GOVERNMENTAL FRAMEWORK ON COORDINATION OF BLOOD TRANSFUSION SERVICES



Kenya Blood
Transfusion and
Transplant Service

Damu  **KE**

The Kenya Blood Banking Management System

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List of Abbreviations & Acronyms

CG	County Government
CoG	Council of Governors
GDBS	Global Database on Blood Safety
HSIGCF	Health Sector Intergovernmental Consultative Forum
KBTTTS	Kenya Blood Transfusion and Transplant Service
MoH	Ministry of Health
NG	National Government
TA	Transitional Authority
WHA	World Health Assembly
WHO	World Health Organization

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Foreword



Universal Health Coverage (UHC) is a priority agenda by His Excellency the President, Uhuru Kenyatta, C.G.H, with an aspiration that by 2022, all Kenyans will access essential health services through a single unified benefit package, without the risk of financial catastrophe.

Access to Blood and blood products is at the centre of any health system. Transfusion as an emergency saving medication is required for management of cancers and burns, and reduction of maternal deaths and traffic accidents, and is core for successful surgical procedures. Transfusion services are thus increasingly needed within County Health systems, are a strategic intervention for the success of UHC and are the foundation for Kenya's aspirations of being a preferred medical services destination.

The Transition Authority retained Blood Transfusion services as a national function in



Sen. Mutahi Kagwe, EGH.
Cabinet Secretary for Health



line with Global standards for management of blood services. Both national and County Governments recognize that treatment using blood and blood products undertaken in health facilities is a County function. Counties have and continue to make significant investments in strengthening access to health services.

This Inter-Governmental Framework on Coordination of Blood Transfusion Services, developed through a collaborative process between the two levels of Government defines roles and responsibilities, institutionalizes operational mechanisms in the blood ecosystem to safeguard availability and strengthen oversight for patient safety, and will enhance our emergency preparedness. We are confident that it will accelerate our push for self-sufficiency in blood at National level and for each county as country governments establish and manage blood transfusion satellites.



Hon. Gov Prof Anyang' Nyong'o EGH
Chairman COG Health Committee

Acknowledgements



The Ministry of Health has made significant investments in the Blood Transfusion services targeting a strengthened regulatory environment, increased geographic coverage of technologies for blood processing and testing, and deployment of ICT for a nationwide blood information management system. To operationalize these efforts at service delivery level, County governments have invested in establishment, staffing and management of blood transfusion satellites and overall supervision of Transfusion facilities. They are committed to ensuring standards are maintained in both private and public health facilities and patient safety and outcomes are enhanced. The optimal application of these investments will be secured through functional coordination mechanisms with clear roles and

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Ms. Susan Mochache
Principal Secretary for Health



responsibilities as outlined in this framework. It strengthens collaboration amongst stakeholders in the blood ecosystem.

We wish to acknowledge the Directorates of Health Care Services and Inter-Governmental Cooperation and Kenya Blood Transfusion and Transplant Service who have engaged an iterative process with the Council of Governors, County Executive Committee Members of Health, County Directors of Health and County Blood Transfusion Coordinators in the development of this framework. We thank partners for their support including the World Bank and the African Resource Centre for their financial and technical support in the development of this Framework.

A handwritten signature in black ink, appearing to read 'Mary Mwiti'.

Ms. Mary Mwiti
CEO, Council of Governors

Executive Summary



The Ministry of Health is investing in strengthening blood transfusion services with the aim of ensuring availability, accessibility and safety of blood and blood products. The WHO, in its resolution 68/12 of 2010, for which Kenya is a signatory, urges member states to have national policy, standards and oversight, and in-country coordination mechanisms for blood transfusion services.

The Inter-Governmental Relations Act 2012 provides for cooperation and consultation between national and county governments under Articles 6 and 189 of the constitution. Pursuant to the provisions of this Act, the Health Sector established the Health Sector Inter-Governmental Consultative Forum (HSIGCF). This framework aligns with the principles of structured dialogue, cooperation, collaboration, concurrence, consensus, communication and commitment outlined in the HSIGCF. It provides the backbone for a

A handwritten signature in black ink, appearing to read 'Patrick Amoth'.

Dr. Patrick Amoth
Ag. Director General for Health



strong system by reviewing mandates, current operating environment and implementation mechanisms against constitutional functions of health, and providing recommendations for a strengthened national ecosystem. National Government roles include policy, regulations, oversight, technical assistance, strategic commodities and equitable access through services such as banking and re-distribution. County Government service delivery roles include collection, processing, banking, distribution and transfusion.

The appointment of County Blood Transfusion Coordinators provides a coordination mechanism for share functions, oversight roles, supervision and reporting. This approach will ensure commodity tracking and security, understanding and fulfilling of the clinical need, and compliance with standards by both public and private health providers in the counties.

A handwritten signature in black ink, appearing to read 'Joseph Mbai'.

Dr. Joseph Mbai
Chair, Caucus of County Executive
Committee Members of Health



01.

Introduction

1.1 Background

Blood is a specialized body fluid. It has four main components: plasma, red blood cells, white blood cells, and platelets. Blood has many different functions, including: transporting oxygen and nutrients to the lungs and tissues, forming blood clots to prevent excess blood loss, carrying cells and antibodies that fight infection, bringing waste products to the kidneys and liver, which filter and clean the blood and regulating body temperature. Blood transfusion is an essential component of health care that contributes to saving lives and improving the quality of life for thousands of people in Kenya and blood safety and sufficiency are fundamental to the country's ability to provide medical services. Blood transfusions are used to treat patients with serious medical conditions that cannot be corrected by other means. Some of the most common type of patients who require blood transfusion include expectant women with bleeding associated to pregnancy and childbirth, bleeding disorders, severe anaemia, victims of trauma, emergencies, disasters and accidents. Blood and

blood products are also indicated to support advanced medical and surgical, acute sickle cell crisis, reversal of anticoagulant effects and prevention of haemorrhage in patients with thrombocytopenia or platelet function defects. Despite the availability of certain blood substitutes that make it possible to maintain the volume or the consistency of circulating blood, the biological activity of cellular and plasma components makes blood transfusion the most efficient treatment for a number of clinical conditions. Universal and timely access to safe blood and blood products, and their appropriate use, are therefore vital elements of good health care provision.

1.2 Global standards for blood transfusion services

Kenya is a signatory of the World Health Assembly Resolution WHA28.72 of 1975 which urges member states to promote the development of national blood services based on voluntary non-remunerated donation of blood. Resolution 63/12 of 2010 categorized blood and blood products in its Essential Medicines list and purposed to strengthen regulation of blood and blood products. In particular, resolution number 2 on the availability, safety and quality of blood products urges Member States to “*take all the necessary steps to establish, implement and support nationally-coordinated, efficiently managed and sustainable blood and plasma programmes.*” Resolution (7) urges members to institute appropriate regulatory systems through an “*Agency to oversight service delivery*” and promote the full implementation of well organized, nationally coordinated blood collection, testing, processing, storage and distribution integrated blood supply networks for and self-sufficiency and sustainable blood programs”.

The WHO *Action framework to advance universal access to safe, effective and quality-assured blood products 2020–2023* guides Member States to achieve a safe and sufficient supply of blood products through implementation of strategies to overcome the challenges identified in the Global Database on Blood Safety 2015 survey (GDBS 2015) from 173 Member States. These included:

- i. Lack or inadequacy of a national blood policy and legislation to establish a nationally organized and managed blood program.
- ii. Multiple blood services and operators within the blood system, functioning at differing levels of performance leading to increased costs of blood transfusion and compromised safety of blood provided to patients.
- iii. Non-standard and non-uniform practices posing potential risk of transmission of infectious agents and incompatibility with transfusion patients.
- iv. Weak Quality Management System and operational inefficiencies leading increased morbidity and mortality.
- v. Inability to undertake surveillance and to meet health care system demand for whole blood and blood components.
- vi. Compromised capacity for emergency preparedness.

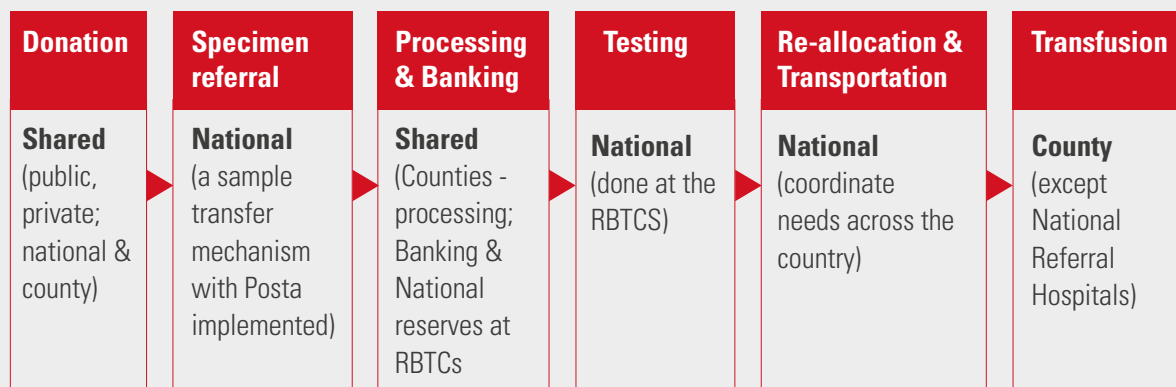


02.

Functions of the National and County Governments of Health

In the year 2010, the Kenyan people voted in favour of a new Constitution that introduced two levels of governance; the National and County. The Constitution of Kenya assigns functions, mandates and roles to both levels of government as contained in the Fourth Schedule. In order to ensure effective transition, Parliament passed the Transition to Devolved Government Act (TDGA) 2013 that established the Transitional Authority (TA). The Transitional Authority issued four gazette notices identifying functions transferred to counties. In the health function, the National Government was allocated the functions of National referral health facilities, research institutions, medical training colleges, Health Policy and

Blood and blood products value chain pathway & functions and the imperative for an Inter-Governmental Framework



Technical Assistance whereas the County Governments were tasked with management of County health services including; County health facilities and pharmacies; Ambulance services; Promotion of primary health care; Licensing and control of undertakings that sell food to the public; Veterinary services (excluding regulation of the profession); Cemeteries, funeral parlours and crematoria; refuse removal, refuse dumps and solid waste disposal.

2.1 Kenya Blood Transfusion Services as a Function of National Government

The Transition Authority Legal Notice No. 182, the Transition to Devolved Governments Act, 2012 (No. 1 of 2012), Transfer of Functions, outlined County Health functions. Blood Transfusion Services, were not transferred to County functions. The constitution of Kenya under Part 3, on Respective functions and powers of national and county governments, article 186 (3) states that *“a function or power not assigned by this constitution or*

national legislation to a county is a function or power of the national Government.” Blood Transfusion Services therefore are a function is a shared function.

2.2 The functions of Counties in Blood Transfusion Services

The Transition Authority Legal Notice No. 182, the Transition to Devolved Governments Act, 2012 (No. 1 of 2012), Transfer of Functions, outlined County Health functions. County health facilities, are a devolved function. Transfusing Blood as a treatment, once prescribed by a medical officer is undertaken in County health facilities and National Referral hospitals thus making the treatment using blood and blood products a concurrent function. Blood donors falls in both levels of governments as there is no classifications on health donors thus a residual function. County Governments plays an important function in the utilization of blood and blood products and can therefore play an important role of collection, preparation of blood products and storage.



2.3 Implementing shared functions on Blood Transfusion Services

The Inter-Governmental Relations Act 2012 provides for co-operation and consultation between the national and the county governments and amongst county governments as provided under Articles 6 and 189 of the Constitution. Pursuant to provisions of this Act, the health sector established the Health Sector Intergovernmental Consultative Forum (HSIGCF) that plays a crucial role for structured dialogue on health matters through cooperation, collaboration, consultation, concurrence, consensus, communication and commitment.

Blood transfusion is a shared function, with the National Government retaining the responsibility of the policy development. Blood Transfusion Services, including putting in place a national blood system to ensure timely access to safe, sufficient and equitable availability of blood and blood components for transfusion. The County Governments retain the responsibility of managing the actual blood transfusion within their health facilities. Additional shared functions for effective delivery of blood transfusion services include: partnerships including private and public partnerships, monitoring and evaluation, implementation of health information systems and research.



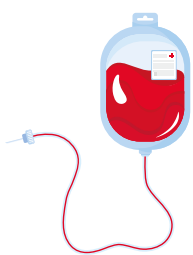
3.

Situational Analysis on Blood Services

3.1 Current status

Current blood management is a result of World Health Assembly recommendation of 1975 where all countries had to develop a national blood policy. All WHO member countries, including Kenya, prescribed to the policy of screening all blood meant for transfusion for Transfusion-Transmissible Infections. With the advent of HIV/AIDS as from 1985, there were reduced blood collections and increased cost of blood in the country. Emphasis on blood safety and availability became even more critical which became explicitly apparent immediately after the August 7, 1998 bomb explosion in Nairobi. Following 1994 workshop, the Ministry of Health in collaboration with stakeholders and donor agencies made concrete efforts to realize the workshop's recommendations which included the establishment of the Department of National Blood Transfusion, Tissue & Human Organ Transplant Service.

The recommendations ensured the development of policy guidelines on Blood Transfusion in Kenya, fundamental blood safety guidelines for the collection, processing storage and distribution of blood and blood products had been established. Six regional blood transfusion centres were established to run the above functions. To enhance sufficiency of blood 30 satellites centres have been established primarily for collection, storage and preparation of blood products. The management of blood is through a centrally coordinated system from the National level through the regions then to satellites. Blood is collected, screened for safety from the regional centres, products prepared from the regions and some satellites and dispensed to transfusing facilities. The Department of National Blood Transfusion, Tissue & Human Organ Transplant Service has established 6 testing centres defined as regional blood transfusion centres. This centres are able to perform the following; collection of blood, testing of blood, preparation of blood products, storage and distribution of blood and blood products. The KBTTTS in partnership with county governments have been able to establish 30 satellites centres whose main role is to collect, store, prepare blood products and distribution of blood and blood products. 12 Counties lack the satellites and the regional blood centres and purely depend on other counties for the blood needs.



To enhance sufficiency of blood **30 satellites centres** have been established primarily for collection, storage and preparation of blood products. The management of blood is through a centrally coordinated system from the National level through the regions then to satellites.

3.2 Challenges with the current coordination systems

The current blood transfusion management system has served the country for the last 20 years with challenges that include:

- i. Inadequacy of a national blood policy and legislation to establish a nationally organized and managed blood transfusion services.
- ii. Inadequate funding and support for the national and county blood transfusion services.
- iii. Multiple blood transfusion services and operators within the blood system, functioning at differing levels of performance safety.
- iv. Non-standard and non-uniform practices by different stakeholders resulting from lack of coordinated oversight for compliance.
- v. Weak Quality Management System in the supply chain and value chain between National and county services leading to wastage.
- vi. Inability to meet health care system demand for blood and blood components and efficiently delivery to patients.
- vii. In effective monitoring and surveillances systems due to lack of organized data and early warning systems.
- viii. Inability to respond to emergencies due to lack of clarity of structures, roles and responsibilities.



4.

An Inter-Governmental Framework for coordination of Blood Transfusion Services

4.1 Rationale

An important goal of a national blood system is to ensure timely access to safe and sufficient supplies of blood and blood components for transfusion. The World Health Assembly (WHA) has endorsed multiple resolutions directed towards achieving this goal. Most recently, WHA resolution 63.12 of 2010 on the *Availability, safety and quality of blood products* urges Member States “to promote the full implementation of well organized, nationally coordinated and sustainable blood programs with appropriate regulatory systems”.

In view of the shared functions in line with Global requirements for which Kenya is a signatory, an Inter-Governmental frame work to coordinate blood transfusion services will ensure safety, accessibility,

availability and sustainability of blood and blood products in Kenya.

4.2 Benefits of an Inter-Governmental Framework for the coordination of Blood Transfusion Services

- i. **Enhanced efficiencies:** Consolidating and rationalization of key blood transfusion management processes will lead to efficiencies in management of human resources, strengthened supply chain including commodity inventory and logistics and lower costs for critical service delivery elements such as testing and screening of blood. For instance, testing of larger numbers of samples and blood components will reduce testing costs while strengthening oversight of Quality to ensure patient safety. A wide range blood testing and screening services are constrained or inappropriate because of high costs, technical limitations or human resources requirement.
- ii. **Improved quality, safety and efficacy of blood components:** Integration of processes, equipment and materials in regionally centralized blood I will result in greater consistency and overall improvement in quality, safety and efficacy, leading in turn to better patient outcomes.
- iii. **Improved oversight for private and public facilities to ensure quality and patient safety:** Establishment of regulations and coordination of implementation will strengthen oversight of private health facilities at National and County levels, that

have traditionally not been regulated in matters blood transfusion, thus improving patient safety and outcomes.

- iv. **Opportunity for sharing skilled workforce:** Standardized training and capacity development for technical and service delivery staff and blood establishment managers.
- v. **Improved public confidence:** Shared vision, shared goals, shared responsibilities and shared work plans by both levels of Governments through a centrally coordinated blood system may facilitate the establishment and maintenance of robust and fully functional linkages with hospital blood bank laboratories and clinical users, thereby enhancing the quality and safety of the entire blood transfusion chain. Improvements in the safety, efficacy and availability of blood products contribute to better patient outcomes and increased safety. These in turn inspire public confidence in the blood system.

4.3 Objectives

The specific objectives of this Framework include:

- i. To define the scope of different elements of the coordination framework.
- ii. To align the management of blood services to the existing structures and their functions.
- iii. To specify the roles and responsibilities of different actors in the coordination partnership.

- iv. To establish mechanisms to monitor and evaluate implementation of a functional blood system.
- ii. **Inclusiveness & Consultation:** The two levels of government will have equal opportunity to provide inputs in sector actions as required.

4.4 Principles

Principles of Implementation of this Framework

In addition to these objectives, all actors need to adhere to the following principles that allow for the coordination to function. These principles include:

- i. **Transparency:** Coordination of the blood services in an open manner, with information and actions shared by all partners.
- iii. **Trust:** Interaction between and amongst the two levels should be in an environment of mutual trust.
- iv. **Mutual Respect:** During engagement between the two levels of Government, there needs to be real, and exhibited respect for each other.
- v. **Sharing of Tasks:** The two levels of government, should synergize as per the existing Intergovernmental Participatory Agreements.



vi **Empowerment:** The two levels should support each other to ensure they are adequately able to engage in the coordination process.

4.5 The Kenya Blood Transfusion Service as a Strategic enabler of Blood Transfusion Services

Through a nationally coordinated intergovernmental blood service, significant potential benefits can be realized. Appropriate mapping, rationalization and harmonization of key functions to confer advantages in volumes, scale and convergence of procedures, which support improvements in efficacy, efficiency and cost-effectiveness. Anticipated benefits of a nationally coordinated intergovernmental blood service include;

i. **Achievement of Economies of Scale:** Standardization of consumables will leverage power from volumes of commodities, reagents and equipment parts for contingencies.

ii. **Introduction of specialized and updated processing equipment:** A nationally supported plant and equipment infrastructure guided by standards will enhance capacity for regularly update and introduce highly specialized equipment and platforms across the country thus increased consistency of practices and products.

iii. **Improved surveillance, development of registries and implementation of early warning systems:** Aggregation of data at national level, supported by a robust monitoring and evaluation framework will provide the opportunity to develop a national projection of blood and blood product needs informed by clinical requirements, and establishment of blood and bleeding disorders registries that will guide County planning and management of transfusion services.

iv. **Emergency preparedness:** Blood emergencies will require a central point of command and coordination, regardless of their geographical area of occurrence.

v. **Equitable access to blood and blood products:** Blood requirements range the ABO rhesus positive and negative needs; and a range of products. A National system of re-allocation and distribution will ensure that blood products can be transported from point of availability to point of need to ensure equitable access for any Kenyan in need wherever they are.



5.

The proposed model for coordination of blood transfusion services in Kenya

The key objectives of Blood Transfusion services include:

- i. Adequacy.
- ii. Safety.
- iii. Quality of product and service.
- iv. Appropriate and efficacious use.

The pillars to support delivery of the objectives include:

- i. Legislation, governance and a functional regulatory environment.
- ii. A policy framework.
- iii. Sustained regular blood donation
- iv. A function based model for coordination and delivery of blood transfusion services across the two levels of Government.
- v. Secure supply chain.
- vi. An accountable and equitable supply and distribution system.

5.1 Legislation, governance and a functional regulatory environment

A body with legal mandate will provide regulations and oversight for quality and safety. Regulation of blood transfusion services will include the following:

- i. Standards that conform with Global requirements.
- ii. Regulations to ensure compliance with standards and registration of blood transfusion service centres nationally.
- iii. Guidelines for service delivery including collection, transportation, distribution rational use and haemovigilance.



According to (WHO) in 2018, **72%** of reporting countries, or **123 out of 171**, had a national blood policy. Overall, **64%** of reporting countries, or **110 out of 171**, have specific legislation covering the safety and quality of blood transfusion.

5.2 Policy framework:

The National Policy of Donation, Transfusion and Transplant of Human Derived Medical Products is developed to provide policy directions, institutional arrangements for implementation of efficient, safe, equitable and ethical blood and services. It provides for the development of an Inter-Governmental coordination framework for blood transfusion services.

5.3 A function based model for coordination and delivery of blood transfusion services across the two levels of Government

To deliver coordination blood transfusion services, it is proposed that:

- i. A new categorization of blood transfusion services based on the functions.
- ii. Registration, licensure and accreditation for all blood transfusion services.
- iii. Quality management and quality control systems.

5.4 Sustained regular blood donations

The Kenya Blood Transfusion Service in partnership with county Governments will undertake the following to promote the establishment of pools of regular donors across the country who will be encouraged to donate within Satellites and blood collection centres:

- i. Develop a National Calendar of Blood Collection events.
- ii. Implement the donor notification program through a national Blood Management Information System(BMIS).
- iii. Carry out donor education program on donation of blood and blood products accountable blood banking and equitable supply and distribution system.

5.5 A secure supply chain and emergency preparedness

A national forecasting and quantification system will be developed and regularly updated between the national and county governments. The KBTTS will develop an emergency response plan of deployment system for Kenya.

5.6 An accountable, equitable supply and distribution system

KBTTS will install a blood management system that will be able to monitor the blood transfusion process from the time blood is donated, tested, product preparation, dispensing of blood and blood products up to the end point of consumption by a patient. The system will provide visibility and notify the donor on the date the blood was utilized. An accountable system will give confidence and security to blood donors at all times. It will be visible to national and county governments.

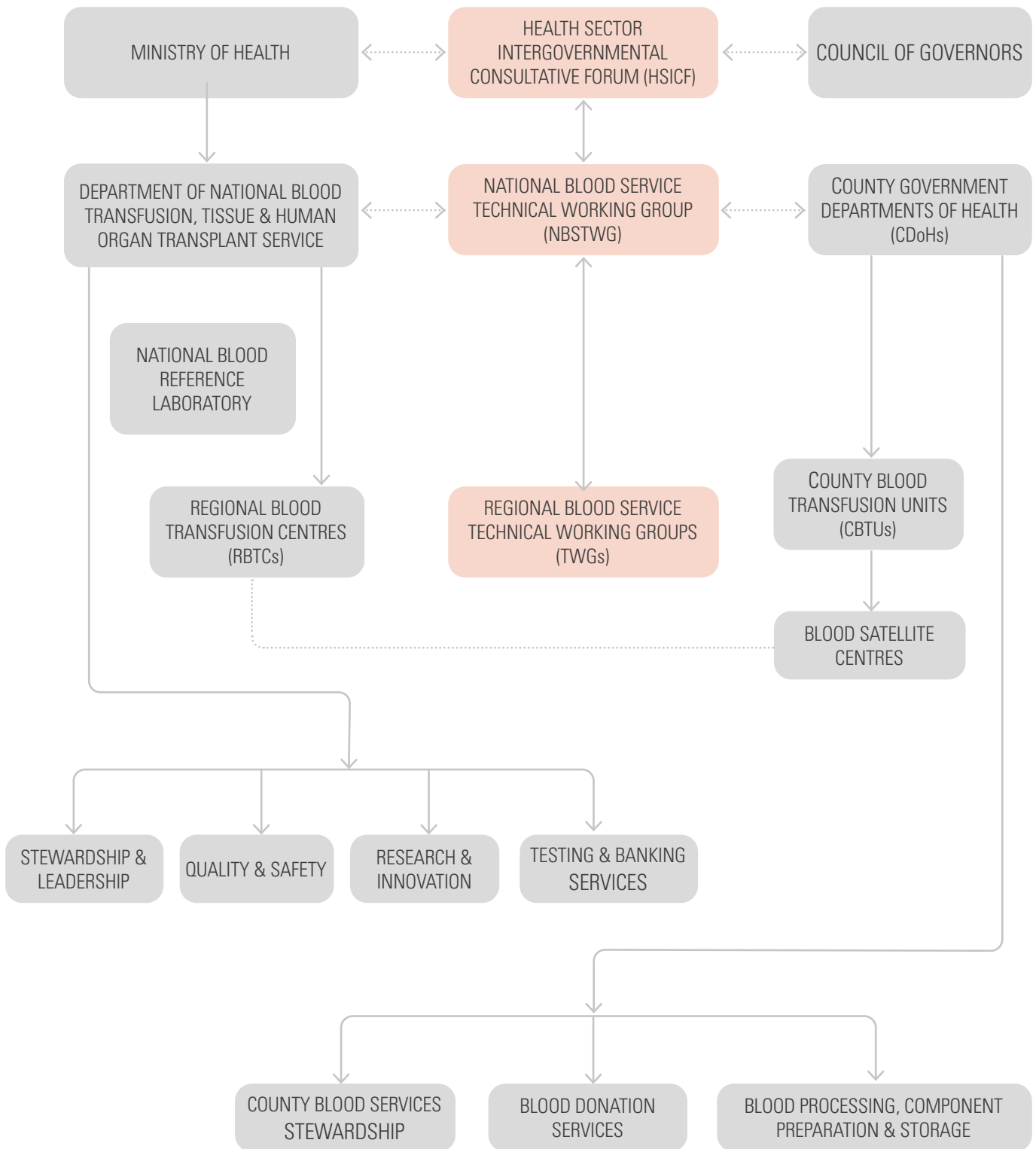


06.

The Intergovernmental Blood Service Coordination Framework

The coordination structures elaborated in Figure 1 will guide the sector in the implementation of the Intergovernmental Blood Service Coordination Framework.

Figure 1: Intergovernmental Blood Service Coordination Framework

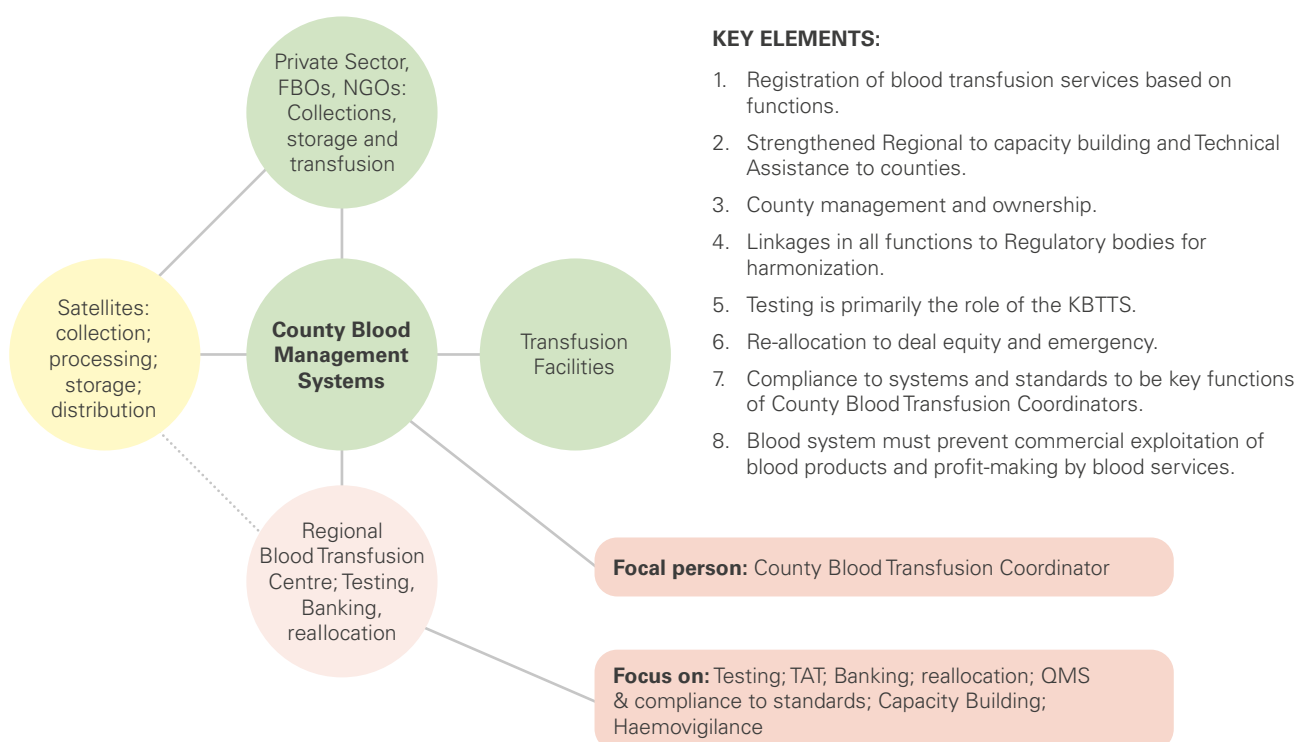


6.1 Implementation of a hub and spoke model

A hub and spoke model will be implemented by the Kenya Blood Transfusion Services for the management of blood transfusion services.

- i. The Hub: the Regional Blood Transfusion Centres will act as the Hub providing testing services, quality control and quality assurance, training and support supervision and storage for National reserve.
- ii. The spokes:
 - a. These will include Counties with the functions of: availing adequate space and efficient staffing for blood collection centres and satellites.
 - b. These will include: blood collection centres and satellites, with the functions of blood collection, processing of blood products, storage services, distribution of blood and blood products to transfusing facilities. These facilities will be expected to undertake quality management services.
 - c. These will include private and public health facilities that undertake blood transfusion services with the functions of patient treatment, storage, implementation of haemovigilance services, and provision of required reports. These facilities will be expected to undertake quality management services.

Structural Framework for Intergovernmental Coordination of Blood Services



6.2 Roles of MoH/KBTTS and County Governments

Specific Roles of National and County Governments Leadership and stewardship		Responsibility
Policy Development	Development of policy on Donation, transfusion and human derived products.	MoH/KBTTS & CG
Development of guidelines, regulations and standards	Establish requirements for the operation of blood collection, blood processing, blood storage, and blood transfusion services.	MoH/KBTTS & CG
	Establish requirements for quality, safety, and accessibility of blood.	MoH/KBTTS & CG
	Establish processes, procedures, mechanisms, and instruments to assess compliance with requirements.	MoH/KBTTS & CG
	Establish rules and regulations.	MoH/KBTTS
	Define roles and responsibilities of institutions, departments, offices, organizations, and individuals involved in blood services at national and county levels.	MoH/KBTTS & CG
	Facilitate training of personnel.	MoH/KBTTS
	Facilitate quality audits.	MoH/KBTTS
	Resource mobilization	Conduct resource mobilization to support the National Blood Services.
Provision of blood processing commodities, storage and equipment.		MoH/KBTTS & CG
Establish relationship and agreements with partners.		MoH/KBTTS & CG
Defining roles of partners and evaluating their contributions.		MoH/KBTTS & CG
Definition on the role of private hospitals in blood management.		MoH/KBTTS
Organizational and operational aspects	Develop an organizational structure in management of blood services.	MoH /KBTTS & CG
	Develop a strategic plan for KBTTS.	MoH/KBTTS
	Guide on human resource establishment in each level of blood transfusion service.	MoH/KBTTS
	Develop a budget and its implementation.	MoH/KBTTS & CG
	Establish the TAT of every process and ensure its adherence.	KBTTS & CG

Specific Roles of National and County Governments Leadership and stewardship		Responsibility
Safety and technology		
Establishment of National blood Reference Laboratory	Establish national reference blood laboratory.	MoH/KBTTS
	Develop a national quality control & quality assurance program for all blood management sites in the Country.	MoH/KBTTS
	Facilitate research and innovation on key blood thematic areas.	MoH/KBTTS & CG
	Ensuring quality and safety of blood and blood products.	MoH/KBTTS & CG
Development of a blood management information system	Provision of a national Information, Communication and Technology platform for management of blood services.	MoH/KBTTS in consultation with CG
	Monitor the TAT for all blood services processes.	KBTTS & CG
	Accurate information on banking of strategic reserves of blood and blood products.	KBTTS & CG
	Accurate and reliable data for use in planning for blood services.	MoH/KBTTS & CG
	Tracking of blood and blood products at national and county levels.	KBTTS/CG
Training ,Research and Development	Conduct training needs assessment of staff.	MoH/KBTTS & CG
	Plan and implement training of human resource.	MoH/KBTTS & CG
	Education of donors on benefits of regular donations.	MoH/KBTTS & CG
	Understand the local epidemiology of risk behaviours and factors that will determine deferral of potential donors, in order to better target population groups with low risk levels.	MoH/KBTTS & CG
	Support supervision and on job training.	MoH/KBTTS & CG
Monitoring and evaluation of performance and implementation of the Country's blood services policy and strategic plans	Establish a feedback mechanism of the blood donor services.	MoH/KBTTS & CG
	Establish the performance of the blood donor services.	MoH/KBTTS &CG
	Ensure preventive measures are put in place.	MoH/KBTTS & CG

Specific Roles of National and County Governments Leadership and stewardship		Responsibility
Physical Infrastructure		
Provision of infrastructure for setting up blood service unit	Identify a building/construct and Modify to conform with the standards of setting up a blood service unit.	CG
	Equipping of the unit with blood collection, processing and storage equipment.	MoH/KBTTS & CG
Human resource		
Provision of human resource at county blood satellite centre	Appointment of CBTC (medical laboratory Technologist with at least 2 years' experience in blood transfusion).	CG
	Deployment of appropriate staff to the satellite (3 medical laboratory technologists, 1 nursing officer and data clerk/medical records).	MoH/KBTTS & CG
	Allocation of responsibilities to the staff.	CG
	Staff appraisal.	CG
	Ensure biomedical engineers are allocated duties at blood centre.	CG
Duties and responsibilities of human resource	Conduct Donor education and recruitment.	KBTTS & CG
	Collection of blood and preparation of blood products.	CG
	Storage and distribution of blood and blood products.	KBTTS & CG
	Generation of reports and forwarding to the respective offices.	CG
	Conduct haemovigilance and report.	CG
	Do daily maintenance of equipment.	CG
Maintenance	Renovation and maintenance of the building (determined on ongoing basis).	MoH/KBTTS & CG
	First line assessment of equipment and reporting.	CG
	Preventive maintenance as per the service contract for plant and equipment.	MoH/KBTTS
	Training on preventive maintenance.	MoH/KBTTS
	Procurement of spare parts.	KBTTS & CG



07.

Conclusion

Universal and timely access to safe blood and blood products and their appropriate use are essential components of good health care provision. With the goal of ensuring universal access to safe blood and blood products, KBTTS has been at the forefront of the movement to improve safety and availability as mandated by the Ministry of Health. However, Counties in the Country still face major challenges in providing access to sufficient, affordable and sustainable supplies of blood and blood products, while also ensuring the quality and safety of these products in the presence of known and emerging threats to public health.

This strategic coordination framework has been developed to address the challenges identified and to guide both levels of Government in developing and strengthening national blood service systems. This will ensure the continuity, sufficiency, sustainability and security of national supplies of safe and efficacious blood and blood products to meet the needs of patient populations.

The following will guide implementation of the framework;

- i. Implement the proposed actions as outlined in the strategic framework, through broad-based partnership with County and National Governments with full involvement of partners and stakeholders.
- ii. Use the framework to guide the development/review of national blood policies and strategic plans aligned with the overarching national health plans and Universal Health Coverage strategy.
- iii. Ensure provision of adequate financial, human, infrastructural and technical resources for implementation of the intergovernmental blood service coordination through sound resource planning and program budgeting, leveraging the support available from domestic, national and international sources.
- iv. Build and expand the mechanisms and institutional base for monitoring and evaluation of blood transfusion services and of the progress towards implementation of national blood legislation, policies and strategic plans.
- v. Counties should carry out a review of their blood transfusion services regularly and develop their own strategic and operational plans, guided by the national strategic plan, in order to address county-specific needs in accordance with their existing resources.
- vi. Develop a joint framework for action to summarize priority interventions and actions by both levels of government with support from KBTTTS, along with indicators, baseline and targets to assist monitoring of implementation.

ANNEX 1: Development and Validation of the Inter-Governmental Framework on Coordination of Blood Transfusion Services

Date	Name of the Meeting
20th July to 15th August 2021	Internal Review Meetings and drafting of the Inter-Governmental Framework with KNBTS Managers.
14th September 2021	Presentation and deliberation at the Senior Management Meeting of the Ministry of Health
25th and 26th October 2021	Consultative meeting on Inter-Governmental Framework with County Blood Transfusion Coordinators (CBTC)
4th and 5th November 2021	Consultative meeting on Inter-Governmental Framework with County Directors of Health (CDH).
11-12th November 2021	Consultative meeting on Inter-Governmental Framework with County Executive Committee Members (CECM) of Health and Council of Governors (CoG).
18th November 2021	Final consultative meeting on Inter-Governmental Framework with County Executive Committee Members (CECM) of Health Caucus and Council of Governors (CoG).
26th November 2021	Consultative meeting with the Chair of the Health Committee of the Council of Governors
11th December 2021	Approval of the Inter-Governmental Framework on Coordination of Blood Transfusion Services by the Health Sector Intergovernmental Consultative Forum.

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