

## 2010 Regional Road Shows

### Feedback from participants attending the Stock Sharing Workshop

#### **Objectives of workshop**

- To share experience of stock sharing relationships
- Network with group members
- To capture learning points for sharing with the wider group

#### **Workshop Topic Areas**

- Stock sharing – what experience do you have?
- What are the benefits?
- What are the barriers?
- Possible solutions to the barriers

#### **Workshop Feedback**

##### **Benefits**

- **Efficiency**
  - Reduction of time expired units
  - More efficient use of the valuable resource, blood, and donors' effort
  - "We have a moral duty to use the resource"
- **Finance**
  - Reduction in ad hoc deliveries
  - Reduction in costs due to lower wastage
  - Depending on the type of sharing agreement, cost reduction by usage of older and discounted units.
- **Contingency**
  - Using stock sharing in case of emergencies when the blood service cannot deliver due to unforeseen events such as blocked roads etc.
- **Allows Platelets and rarer phenotyped red cells to be stocked**
  - Enables smaller hospitals to stock platelet components and move them to a larger hospital when the units are close to expiry. Without the partnership it would not be possible to stock platelet, as the risk of expiry would be too high.
  - Allows access to rarer phenotyped red cells through collaboration through stock sharing relationships.
- **Skills of stock management**
  - Extends skills in stock management and increases efficiency.
  - Team approach.

- **Bridges the lead time gap between remote hospitals and the blood service.**
  - Allows quicker access to resources of sharing partners where the blood service takes a long time to deliver.
  - Increases support systems between hospitals.

## Barriers & possible solutions

- **Cold chain validation**
  - Standardised transport box, to allow easy exchange of boxes
  - National transfer policy required.
  - MHRA requirements.
  - Requires trust in the relationship. How and by whom were the units handled prior to sharing?
- **Cost allocation / Finance**
  - Where and how is wastage accounted for?
  - How are units close to expiry charged?
  - Which model is used?
  - How are receiving hospitals incentivised to accept units close to expiry?
- **Geography**
  - Transport: Use of own drivers or use of blood service drivers? How are drivers handling the units – does this comply with MHRA regulations?
  - Is the transport system reliable?
  - Could the blood service have stock depots at major “hospital-hubs” to shorten the lead time?
- **Staff attitude**
  - Problem of motivation of staff to change things and allocate time to something new
  - Requires a “Champion” as a passionate & motivated driver to set up stock sharing
- **Confidentiality**
  - Hesitation to share information and provide detailed insights into own operations.
- **Time & resources**
  - Especially problematic if only very small numbers are shared where the benefit may not justify the effort from a financial perspective.
- **Set-up of sharing relationship**
  - Setting up new sharing agreements requires lots of paperwork such as SOPs, SLAs, contracts etc.

- Template SLAs, SOPs etc could be provided in order to reduce the effort required to set up new relationships. These documents should meet MHRA requirements in order to enable effortless verification.
- Requires extra training and confidence.
- **Paperwork**
  - Requires uniform and nationwide standardised paperwork
  - Suggestion to provide templates for service level agreements and SOPs
  - Discussion over which body should publish guidelines/paperwork.
- **New skill set**
  - Requires adjusted SOPs, training, paperwork etc.
- **Data**
  - As data is available it should be used to identify potential stock sharing agreements and make hospitals aware of the opportunity.
- **Communication**
  - The communication between sharing partners must work properly.
  - Hospitals should be aware of excess stock: Do we need some kind of broker or neutral place where hospitals can “advertise” excess stock?
  - Who benefits? – needs to be beneficial to all and potential benefits need to be visible.

### Key learning points:

1. Stock sharing is a good thing and can reduce wastage and hence make more efficient use of the valuable resource, blood.
2. A stock sharing toolkit should be provided including templates for SOPs, SLAs and guidelines in order to reduce the effort in setting up new relationships and meet regulatory requirements in an easy way.
3. Uniform processes and paperwork should be provided in order to standardise sharing nationwide.
4. Stock sharing requires a motivated and passionate “Champion” as a driver to push it forward.