



**Asia-Pacific
Economic Cooperation**

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Challenges of Centralization of Blood Services in Indonesia

Submitted by: Indonesian Red Cross



**Policy Dialogue and Workshop on Attaining a
Safe and Sustainable Blood Supply Chain
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CHALLENGES OF CENTRALIZATION OF BLOOD SERVICES IN INDONESIA



BLOOD SERVICES IN INDONESIA

5,500 Km

Population : 240 million

1950 : only 212 IRC BCs ; 2008 : additional 164 HBBCs

Total Donation of 212 IRC BCs & 164 HBBC (2013): 2.722.758 bags
→ 4,084,183 bags of blood components → fulfill ±80% of blood needs nationally
→ 84% are VNRBD

1,880 Km

41 IRC-BCs & 74 HBBCs in Sumatera island, 13% Total donation

20 IRC-BCs & 28 HBBCs in Kalimantan island; 4,5% Total donation

3 IRC-BCs & 15 HBBCs in Sulawesi island; 0,5% Total donation

20 IRC-BCs & 26 HBBCs in Sulawesi island; 4% Total donation

5 IRC-BCs & 10 HBBCs Papua islands 1% Total donation

107 IRC-BCs & 4 HBBCs Java 74% Total donation

15 IRC-BCs & 7 HBBCs in Bali, NTB, NTT islands 3% Total donation



www.Indonesia-tourism.com

Historical Overview

Past, Present and Future Direction

■ Regulation:

- Govt. Regulation, MOH Decree on Blood Services & National Blood Committee has been established
- National Standard and Guidelines are legalized
- NADFC will be responsible for controlling the quality of blood product
- National Social Health Insurance was run since 2014

■ Future Direction

- The IRC BC will be strengthened as the National Blood Center
- Standardized quality of blood and blood products
 - Implementation of GMP on Blood Establishment
 - Regionalizing blood testing and processing in Java, Bali and some part of Sumatera island → >70% of Total Donation
 - Strengthening guidance, inspection and audit involving Provincial Blood Centers, Local Health Authority and Regional NADFC



Experience

Regionalization and Centralization

■ **Regionalization/Centralization**

- The logistic for IRC BCs was centralized at the IRC CBC
- NAT testing in Java and Sumatera was regionalized in 10 IRC BCs and 2 HBBCs
- TTIs testing and blood component production was started to be regionalized in two areas involving 3-5 IRC Blood Centers since 2011
- QC for blood component was centralized in the Central & Provincial Blood Centers since 2013



Challenges

Challenges to advance regionalization or centralization

- Challenges to regionalization in **Java, Bali and Sumatera** islands:
 - Quality system and GMP implementation in Regional Processing Centers
 - Quality commitment from all the BCs staff
 - Transportation cost vs quality improvement
 - Adequacy of blood supply in all connected BCs

- In **other islands**:
 - Improving infrastructure
 - Strengthening networking of blood supply between islands
 - Improving the competency of the staff
 - Regionalization/Centralization might not be appropriate due to big geographic burden



THANK YOU

