



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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Succession Planning: A Critical, but Not Formal, Process

Issue #6
February 17, 2017

Blood centers have historically high turnover rates. The 2016 ABC Human Resources Compensation and Benefits Survey report showed a 23 percent average turnover rate per year at participating blood centers. In comparison, the nonprofit research group Nonprofit HR [compiled a list of over 460 nonprofits in 2015](#) to show an average 19 percent turnover rate in nonprofit organizations.

While layoffs and terminations are down from years prior, a number of employees are voluntarily leaving, including those in the C-suite level retiring. As Michael Zwell, PhD, CEO of Zwell International, told the ABC Summer Meeting attendees in Hawaii last August, every day thousands of Americans are turning 65 years old and switching their ties for bathing suits in retirement.

Blood centers are not alone. The Harvard Business Review noted in their December 2016 issue that somewhere between [10 to 15 percent of all corporations will need a new CEO](#) in the next year and most boards are ill-equipped to find a successor.

One of the biggest issues with succession planning is that boards wait too long to start the process, noted Sandi Lemons, Chief Human Resource (HR) Officer for Versiti. While Versiti, San Diego Blood Bank (SDBB), and Mississippi Valley Regional Blood Center (MVRBC) do not have formal processes written out on paper, their succession planning processes are all ongoing.

“I think leaders in particular make the mistake that they have the gift of time. Maybe you don’t have someone ready now, but if you planned three years out, you could have enough time to develop someone,” said Ms. Lemons. “You

should *always* be preparing for change and preparing for that transition. Make sure you have a deep bench to offer stretch roles so you are ready when opportunity arises.”

Talent development from within can pose its own challenges at blood centers. For many blood centers, being able to develop talent from within can be a struggle, because many of the roles are front-line facing, noted Jennifer Feeny, Vice President of HR for MVRBC. To grow these front-facing employees into director-level managers, there is a lot of training that needs to be done. Introducing new opportunities, such as working on a project, can keep an employee tied to their current operational responsibilities, while stretching their skill set and exposing them to a different environment. Effective succession planning should include a mix of both internal development and external talent-scouting. There is a balance many centers need to find to bring in a fresh set of eyes, but also have that passion and drive for the cause, noted Lemons.

To find a fit for BloodCenter of Wisconsin’s CEO role, Lemons worked as the “ambassador” to the Versiti board in helping with the succession planning. The talent scouting started six months ahead of time, before former CEO and President Jacquelyn Fredrick publically announced her retirement plans. One of the biggest factors in hiring Chris Miskel as their new CEO and President was his cultural fit to the organization and center.

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OUR SPACE

FABC President and CEO of Central Jersey Blood Center Pascal George

Ways to Contribute to the Cause

As the end of our fiscal year approaches, the Foundation for ABC (FABC) is taking stock of its accomplishments. In the past two years we have raised over \$500,000 in support of the ABC Professional Institute (API); funded scholarships for emerging leaders to attend ABC Meetings and Specialty workshops; and revised our bylaws and re-established our relationship with ABC—resulting in a reduction of administrative costs and enabling a larger portion of collected donations to directly fund our projects.

The API Learning Portal was rolled out in October 2016 and, recently, the first homegrown course, “Introduction to the Blood Banking Industry,” was released to great acclaim. So far, close to 500 ABC members have accessed the API over 2,200 times. While most of the funding for the API was obtained from our industry partners and was restricted to the API project, as with any foundation, the FABC still incurs costs to maintain day-to-day operations and continue the mission of supporting ABC members--this is where we need your assistance! I want to share a few ways you can help us achieve our fundraising goals before this year ends.

First, please consider entering the ABC’s Got Talent Show Season II, which will take place after the ABC *Awards of Excellence* on March 27 at the ABC Annual Meeting in Washington, D.C. Those who attended the first show, two years ago, remember what a joyous and inspiring evening it was. We had an incredible display of talents—musicians, singers, dancers, and lasso performers to name a few! The audience was warm and supportive—we are a big family after all. So don’t be shy, take a few minutes and film your talent, send it to [Jodi Zand](#) and she will do the rest for you. The top five competitors will be invited to perform at the Annual Meeting. Remember, without talent, there will be no talent show, so whatever your talents are, let them shine, you won’t regret it! Encourage your colleagues, whom you know have a talent to share it with us. If you don’t want to share your talent, that’s okay—you still have the power to contribute by voting for your favorite act, maybe [mine](#) or Eva Quinley’s (coming soon!). Season 1 raised over \$30,000 in unrestricted funds! We are all looking forward to a great evening of relaxation, good humor, camaraderie, and amazement at Season II’s show!

Another way to help raise funds is to attend the FABC reception at the luxurious Hay-Adams rooftop in D.C. on March 26. There will be views that are out of this world, wonderful food and drinks—including a very special cherry blossom martini—as well as entertainment, and a chance to catch up with your peers. If you can’t make it to either event, you can, of course, provide funds the old-fashioned way: write a tax-deductible check to FABC to help us close the year in good standing! Thank you for your support! ♦

pgeorge@cjbcblood.org

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ABC is an association of not-for-profit, independent community blood centers that helps its members provide excellence in transfusion medicine and related health services. ABC provides leadership in donor advocacy, education, national policy, quality, and safety; and in finding efficiencies for the benefit of donors, patients, and healthcare facilities by encouraging collaboration among blood organizations and by acting as a forum for sharing information and best practices.

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INSIDE ABC

The programs and services described in the Inside ABC section are available to ABC member blood centers and their staff only, unless otherwise specified.

Participate in Valuable ABC Surveys, Deadline Approaching

The ABC Finance Committee and API Curriculum Development Committee would like your participation in two important blood center performance metric surveys. Both surveys will take less than 15 minutes to complete, and your participation will make a positive impact.

Financial Ratio Metric Assessment. The ABC Financial Ratio Task Force would like to gauge your interest on the financial metrics previously collected and distributed by Bill Coenen, along with some additional financial metrics. This survey is used to gather strategic financial information on blood banking trends. With greater than 95 percent participation, members are afforded a valuable opportunity to benchmark with other similar-sized centers across the blood banking industry.

Blood Center Performance Metrics Survey. This survey is meant to identify the importance of blood center performance metrics for ABC member executives. Multiple member executives per blood center are welcome to respond. The combined results of this survey and the Financial Ratio Metric Assessment will be presented and discussed in the Business Forum at ABC's 55th Annual Meeting.

Please complete both surveys by Friday, February 24, 2017. Click [here to take the surveys](#).



America's Blood Centers®
Professional Institute

New Developments in Hemoglobin-Based Oxygen Carriers Webinar

The Scientific, Medical and Technical Committee of ABC is sponsoring this evidence-based webinar, presented by Prolong Pharmaceuticals. Prolong, a N.J.-based pharmaceuticals company, will be discussing their developmental hemoglobin-based oxygen carrier (HBOC), SANGUINATE™. The product is in clinical testing, focused on treating the comorbidities of sickle cell disease and other disorders caused by anemia or hypoxia/ischemia. Scientific representatives of the company will describe the chemistry, mechanisms of action, and its options for clinical trial design.

This webinar is on February 28, at 3:00 p.m. and is open to non-members for the introductory registration fee of \$25, and is complimentary to ABC members. Click [here for more details](#). ♦



SUCCESSION PLANNING (continued from page 1)

“Cultural fit matters. It’s very important to me,” agreed Mr. Miskel. “When I became aware of the opportunity at Versiti and learned more about it, it moved me—not only because I’ve been in healthcare my entire career, but also because the mission of Versiti is so strong that it’s palpable.”

SDBB CEO David Wellis, PhD, echoed the belief that cultural fit is as important as experience and skill. “Don’t be afraid to look outside the industry, look broadly, and pay serious attention to cultural fit.”

But cultural fit, explained Dr. Wellis, does not necessarily mean staying within the blood center culture. One of the biggest misconceptions Dr. Wellis said he sees is that leaders look for professionals to fill a C-suite level role who have decades of experience working in the blood industry and do not broadening their search’s scope. Blending the C-suite team with professionals from for-profit backgrounds with non-profit backgrounds can help improve everything from communication to a developing new avenues for the organization.

“Reflect on whether you are hiring in your own image,” urged Mr. Miskel, “or what you think the profile should look like. Usually those breakthrough ideas come from a leadership team who complement each other with a diversity of experience and working styles.”

Having a vision for what qualities are non-negotiable in a candidate helps.

“Take out a blank sheet of paper—what qualities are critical? Is being an excellent communicator more important than being a strong technical person? What do you need, why do you need it, explain it well, and have it align with your strategy and goals and create the depth you want on your C-suite team,” said Feeney. “You need to be blunt and honest.”

What qualities can be taught, and what is the vision of the company for the future? Bringing in a C-suite level person opens up the organization to take on a new design and new focus. Having that broadened scope and blend on your C-suite team can help with creative out-of-the box thinking—like the new tech and research focuses at SDBB after Dr. Wellis was hired. The reinvention of SDBB and addition of Dr. Wellis is helping transform their organization from a blood collection institute to a cutting edge research-centered entity. The shift in focus is causing extra caution when picking their next chief medical officer as well—a spot still open for those interested. The shift in the next CMO’s role has led to a change in what qualities the SDBB board is looking for in the candidacy search—which has lengthened the process considerably in hiring a new CMO. But the extra time is critical to ensure they get the right candidate to help push their organization ahead on the right path.

“It’s my job to help get the right people on the bus to keep driving us forward,” said Dr. Wellis. ♦

MARK YOUR CALENDAR!

ABC SMT Journal Club Webinar
Monday, March 13
1 to 2 p.m. EST

Details to come!



America's Blood Centers New Board of Directors Candidates for FY 2018 & 2019



During the ABC Board of Directors retreat three weeks ago, the Nominating Committee finalized the slate of board candidates for the Fiscal Years 2018 and 2019. While the following executive officers will continue in their roles, the new at-large candidates will be voted upon at the ABC Annual Meeting during the members meeting on March 26: Diane Merkt, Chief Administration and Chief Compliance Officer at the Institute of Transfusion Medicine, will continue to serve as the Vice President; Jeff Bryant, President and CEO of Inland Northwest Blood Center, will continue on as Treasurer; and Rob Purvis, Vice President of Customer Service at New York Blood Center, will continue as Board Secretary.

Martin Grable, President and CEO of the Community Blood Center of the Carolinas, will take over the position of President of the Board of Directors from Susan Rossmann, MD, PhD, Chief Medical Officer of the Gulf Coast Regional Blood Center, as was approved during last year's Annual Meeting. Dr. Rossmann will stay on as immediate past president.

The at-large director positions are divided into three categories: small, medium, and large blood center board positions. The small center candidate is John Miller, CEO of Lifeline Blood Services, headquartered in Jackson, Tenn. Mr. Miller has been involved in the blood industry, and ABC, for many years. He has spent the last 23 years providing safe blood products to the medical community working at five different blood centers. During his blood banking career, Mr. Miller has worked in education, testing, labeling, component production, Irradiation, special manipulations, Inventory management, customer relations, and logistics. He has also helped three blood centers merge operations. Mr. Miller received his Master's in Business Administration from the University of Phoenix in 2012. With that he hopes to continue to foster relationships with blood centers and hospitals to maintain win-win solutions for the coming years.

"I believe in the advocacy mission of ABC," said Mr. Miller. "Someone in the blood bank industry must knock on the doors of congressmen/women's offices, get their attention, and tell them what is important to our industry. Standing idly by, hoping the knowledge will come to them as they vote is not a solution. We have to ask for their time and attempt to educate them one-by-one. Like it or not, it's how Washington, D.C., works. I believe that ABC does exactly that on the behalf of all blood centers nationwide."

John Hagins, CEO of the Community Blood Center (CBC), headquartered in Appleton, Wisc., will represent medium-sized blood centers on the board. Previously at the American Red Cross for over two decades, Mr. Hagins was also the ADRP president for five years from May 2006 to May 2011. He has served on the Blood Centers of America board as well and became CEO of CBC in 2013.

"I am very pleased to be considered for a position on the ABC Board. I believe that ABC has a tremendous opportunity to have a positive impact on advocacy and education issues for blood centers. I have volunteered to join the Board to assist in the establishment of strategies and goals for the organization and to help drive program implementation that provides real and tangible benefits to the member blood centers."

Julie Cruz, MD, associate medical director of Indiana Blood Center (IBC), part of Versiti, will be representing larger-sized blood centers. Dr. Cruz previously served as the ABC Scientific, Medical and Technical Committee chair. Dr. Cruz is a past president of the Indiana State Association of Blood Banks, and currently serves on the AABB Circular of Information committee and is the program director of IBC's Specialist in Blood Banking (SBB) Program. Most recently she coauthored a chapter on Blood Utilization Management for Modern Blood Banking and Transfusion Practices, 6th ed. (Denise M. Harmening, ed., in press).

(continued on page 6)



ABC NEW BOARD NOMINATIONS (continued from page 5)

Dr. Cruz is responsible for clinical consultation in all areas of blood center operations, including donor/patient services, clinical services, HLA/DNA lab, immunohematology lab, determination of medical suitability for community blood donors and consultation regarding specific patient or transfusion medicine issues with medical professionals at IBC's customer hospitals. She received a bachelor's degree at the University of Alabama and Manchester College, followed by her medical degree from the Indiana University School of Medicine. She completed a Pathology Residency and Transfusion Medicine Fellowship at Indiana University School of Medicine and Indiana Blood Center.

Delisa English, CEO of The Blood Connection, will also serve as a large-sized blood center representative on the board. Ms. English has a long-standing career in blood banking that started with ground-up experience with the American Red Cross (ARC) Biomedical Services. From 1997 through 2004, she directed plasma services, and then moved to an operations role for ARC's Southwest Blood Services Region in Tulsa, Okla. Most recently, she held the Chief Executive Officer position for the ARC's Carolina Blood Services Regions in Charlotte, N.C., and for the South Carolina Blood Services Region, Columbia, S.C. She holds a bachelor's degree in Business Administration from Auburn University and an MBA from the University of Tennessee.

"It's an honor to be nominated to serve on the ABC Board of Directors, particularly during this time in blood banking history when things are changing and evolving so rapidly," said Ms. English. "I believe the future of ABC and our own individual organizations will be full of many, many challenges, but I also believe some great opportunities lie ahead of us. I'm delighted to be part of a group that can help frame and shape our future."

ABC member voting representatives are encouraged to attend the ABC Members Meeting on March 26 during the Annual Meeting in Washington, D.C. to vote on the nominees for the board of director. ♦

ABC 2017 Meetings & Workshops

Join us at the 2017 ABC Meetings and Workshops. We are thrilled to welcome ADRP to our lineup of premier education offerings this year. For more information on any event, email [Lori Beaston](mailto:Lori.Beaston@abc.org).

ABC Annual Meeting and International Blood Safety Forum

March 24-28, Washington, D.C.

Non-members register [here](#);

Sponsors email [Jodi Zand](mailto:Jodi.Zand@abc.org); members [Lori Beaston](mailto:Lori.Beaston@abc.org)

ABC Summer Meeting, MD Workshop and FABC Links for Life Golf Tournament

August 1-4, Providence, RI

Registration coming this spring

ADRP Conference

May 1-3, Chicago, IL

Register [now](#)

Technical/Quality Workshop

June 6-8, Omaha, NE

Registration opens in March

Financial Management & IT Workshops

September (Dates TBD), Houston, TX

Registration coming this summer





RESEARCH IN BRIEF

Older red blood cell (RBC) units were associated with a higher rate of hospital admission for infection in sickle cell disease (SCD) patients after transfusion. In a retrospective cohort study of 28 adult SCD patients, researchers studied the age of leukoreduced, CEK-matched RBC units and the rate of emergency department visits or admission for infection after transfusion. A total of 627 units were stored from two to 42 days and given to SCD patients in 281 outpatient transfusions. The older the units, the higher incidence of infection prior to the next transfusion for the patients. There was no increase in admission for pain, however.

Citation: Karafin M.S., Carpenter E., Pan A., *et al.* Older red cell units are associated with an increased incidence of infection in chronically transfused adults with sickle cell disease. *Transfusion and Apheresis Science*. February 8, 2017 online. DOI: <http://dx.doi.org/doi:10.1016/j.transci.2017.01.008>.

RhD-negative patients with solid cancer or myelodysplastic syndrome who receive D-positive red blood cells have an increased rate of D alloimmunization after transfusion than those with other cancers. In a four year retrospective analysis of 936 RhD-negative oncology patients, 545 patients received 4,295 RhD-positive red blood cell transfusions. The alloimmunization rate was highest for those with solid cancers (22.6 percent) or myelodysplastic syndrome (23 percent) compared with those who had other hematologic malignancies (7 percent).

Citation: Arora K., Kelley J., Sui D., *et al.* Cancer type predicts alloimmunization following RhD-incompatible RBC transfusions. *Transfusion*. February 12, 2017. DOI: 10.1111/trf.13999.

Eleven possible cases of autochthonous vector-borne transmission of *Trypanosoma cruzi*, Chagas disease, were found in south central Texas and linked to where people lived. There are approximately 300,000 *T. cruzi*-infected people in the U.S. Blood donors must be screened for prevalent infection at least once in their lifetime to donate. Researchers from two ABC member blood centers, Gulf Coast Regional Blood Center and South Texas Blood & Tissue Center, along with Baylor College of Medicine, evaluated potential transmission sources of infection among south central Texas blood donors with *T. cruzi* antibodies. Antibodies were found in donors who denied risks for infection outside the U.S. Those living in rural communities had a higher risk of becoming infected than those in more urban areas, specifically those who lived near animals. Hunting and other outdoor activities were less of a risk factor than expected. Two of the 11 had tested positive in the past and were told their results could be false-positives, because they had no travel history to endemic areas.

Citation: Gunter S.M., Murray K.O., Gorchakov R., *et al.* Likely Autochthonous Transmission of *Trypanosoma cruzi* to Humans, South Central Texas, USA. *Emerging Infectious Diseases*. March 2017, ahead of print. DOI: 10.3201/eid2303.161157.

Platelet counts were found to be directly associated with iron stores in a new review. A retrospective record review on the National Institutes of Health Blood Services' data was performed. The data showed 1,273 whole blood donors were deferred for finger-stick hemoglobin levels of less than 12.5 g/dL between December 2005 and January 2014. Deferred donors with low ferritin levels had higher platelet counts than those donors with normal ferritin levels, among both men and women. Iron replacement therapy decreased platelet counts in the iron-depleted donors, but not in the donors who had normal or stable ferritin levels. Since frequent plateletpheresis donors have significant iron loss, these findings have implications for iron replacement programs in blood centers, said ABC Chief Medical Officer Louis Katz, MD.

Citation: Eder A.F., Yau Y.Y., and West K. The effect of iron balance on platelet counts in blood donors. *Transfusion*. November 29, 2016 online. DOI:10.1111/trf.13881. ♦



BRIEFLY NOTED

A new study helps highlight the future of blood donor behavioral in six countries. In a large multi-national study from the Alliance of Blood Operators and the Donor Engagement and Relationship Group, societal changes and trends affecting blood donor behaviors were surveyed to help establish methods for recruiting donors in the future. The study collected surveys from 7,170 donors at eight blood services in six countries (U.S., Australia, Sweden, Canada, Germany, the Netherlands, and the U.K.) in 2014. The questionnaires highlighted five main areas of change: 1) demographic; 2) technological developments; 3) health innovations; 4) public, behavioral, and attitudinal aspects; and 5) political, economic, and environmental issues. Findings were variable depending on the country and some countries had more respondents than others. Donors desired an increase in the age limit of 69 years for donation; donors liked electronic forms of communication; felt having a “better awareness of need” and to “feel better about themselves” were motives for donating; and most countries’ respondents did not look favorably on financial incentives to spur more donations. ABC members can access the study results [here](#).

Citation: Sundermann L.M., de Kort W.L. and. Boenigk S. The ‘Donor of the Future Project’ — first results and further research domains. *Vox Sanguinis*. Ahead of print. DOI: 10.1111/vox.12484.

Holes still exist in clinical trial reporting policies decades after the establishment of a global trial reporting system was put in place. The International Committee of Medical Journal Editors established a policy regarding clinical trials in 2004 to only publish results of trials if the trial was registered before the first patient was enrolled. Before this policy, there was no public way to know if a trial had unpublished results or if the published results accurately reflected the trial protocols. There are remaining gaps in the system and a lack of adherence to the policy. This article highlighted the issue of how some unregistered trials, or trials with late registration—even up to a year, were still being published. A lack of standards for structured protocols also “allows for internal inconsistencies and uncertainty about key study-design features,” noted the authors. The efforts and regulations from the Food and Drug Administration Amendments Act of 2007 and the National Institutes of Health requiring the research community to more swiftly register trials and their results may help ensure more valid interpretation of trial results and a consistent set of standards, the authors noted.

Citation: Zarin D.A., Tse T., Williams R.J., *et al.* Update on Trial Registration 11 Years after the ICMJE Policy Was Established. *The New England Journal of Medicine*. January 26, 2017, DOI: 10.1056/NEJMSr1601330.

Morbidity from transfusion of Zika RNA positive blood components not apparent in French Polynesia. Forty-two of 1,505 retrospectively tested blood components were transfused during the French Polynesian outbreak. Among 12 completed follow-up investigations, no morbidity attributable to Zika was identified in the recipients.

Citation: Bierlaire D. Manguin S., Broult J., *et al.* Zika virus and blood transfusion: the experience of French Polynesia. *Transfusion*. February 10, 2017. DOI:10.1111/trf.14028.

The Food and Drug Administration’s Center for Biologics Evaluation and Research (CBER) held a human cells, tissues and cellular and tissue-based products (HCT/Ps) workshop. This two-day [public workshop](#) last week discussed methods to identify and characterize infectious disease risks associated with HCT/Ps. According to AABB, the blood community was held up as a model for effective screening, implementation of testing and processing of safe human-based products for which the HCT/Ps community could learn from. Three sessions in this workshop covered: development of modeling systems for predicting



BRIEFLY NOTED (continued from page 7)

infectious agent development and spread; giving background of past and emerging infectious diseases in regards to donors of HCT/Ps; how the agency determines if infections are “relevant communicable disease agents or diseases” for HCT/Ps; and how these diseases are screened and tested for in HCT/Ps. (Source: AABB Weekly Report, February 10, 2017) ◆

INFECTIOUS DISEASES

With temperatures rising and an influx of refugees and immigrants to Europe, the continent is confronting a growing concern and risk for infectious disease outbreaks. According to *Reuters*, dengue and chikungunya are increasingly present in Italy and Greece; Lyme disease is also spreading from Russia to Britain and down to Croatia; and now Zika, West Nile virus, and malaria are becoming growing concerns for the European region. In 2015, approximately 590 million people arrived in the E.U. via airports, couple that figure with the increasingly warm temperatures attributed to climate change, and infectious diseases are more likely to spread and survive in Europe. Of the biggest concern right now is Zika, not only because of the health concerns, but the financial burden it could place upon economies that are already shaken with the impending exit of Britain from the E.U. (Source: *Reuters*, [From Zika to dengue, a warming Europe faces new disease threats](#). February 9, 2017)

Citation: Guzzetta G., Montarsi, F., Baldacchino F.A., *et al.* Potential Risk of Dengue and Chikungunya Outbreaks in Northern Italy Based on a Population Model of *Aedes albopictus* (Diptera: Culicidae). *PLOS Neglected Tropical Diseases*. June 15, 2016. DOI: <http://dx.doi.org/10.1371/journal.pntd.0004762>.

Bolivia sees its first case of yellow fever in a decade. A Danish tourist tested positive for yellow fever in Bolivia after visiting a jungle in the far west side of the country. Brazil is currently experiencing a rural outbreak of the virus in rural parts of the country, and which borders Bolivia, where at least 69 people have died from the disease. (Sources: *Reuters*, [Bolivia reports first yellow fever case in a decade](#). February 10, 2017; *Washington Post*, [Yellow fever kills 600 monkeys in Brazil's Atlantic rainforest](#). February 10, 2017)

Zika virus (ZIKV) RNA persistence in tissues confirmed. A prospective cohort study was performed in Puerto Rico with 127 ZIKV positive, mostly symptomatic, participants. Their blood, urine, saliva, semen and vaginal secretions were tested with reverse-transcriptase–polymerase-chain-reaction (RT-PCR) weekly after diagnosis for the first month and then at two, four, and six

WORD IN WASHINGTON



Centers for Medicare and Medicaid Services (CMS) Administrator nominee Seema Verma fielded questions from the Senate Finance Committee hearing on Thursday. As president, CEO, and founder of a national health policy consulting company SVC Inc., Ms. Verma has been praised by Republican leaders, including the new Department of Health and Human Services Secretary Tom Price, MD, for her overhaul of the Medicaid system in Indiana (called Healthy Indiana Plan—HIP). She is also credited with creating HIP 2.0, which helped expand Medicaid under the Affordable Care Act to more people in the state, but limited the expansion, under Vice President Mike Pence when he was Governor of Indiana. HIP 2.0 is a high deductible health plan that requires participants to pay monthly contributions in a health savings account. The federal government, along with the monthly contributions from the users, fuel the system. Ms. Verma also worked on waivers to the Medicaid expansion in Ohio, Kentucky, and Iowa. Democrats have asked her about her views for women paying more for healthcare as well as potential conflict of interest concerns. (Sources: C-SPAN, February 17, 2017; *Indiana Star*, [Who will benefit from Indiana's HIP 2.0? January 27, 2015](#)) ◆

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INFECTIOUS DISEASES (continued from page 8)

months. The median days to clear the ZIKV RNA from serum was 14 days (95 percent confidence interval [CI], 11 to 17) and 54 days for 95 percent of the participants to be cleared. For semen, the median was 34 days with 95 percent at 81 days (95 percent CI, 64 to 98). Because ZIKV RNA and not infectivity was studied, the clinical/epidemiological relevance is not clear.

Citation: Gabriela Paz-Bailey, Rosenberg E., Doyle K., *et al.* Persistence of Zika Virus in Body Fluids — Preliminary Report. *The New England Journal of Medicine*. February 14, 2017. DOI: 10.1056/NEJMoa1613108. ♦



ABC's
Got Talent

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Season II is Here

MARCH 27, 2017

Submit Your Video
to Jodi Zand



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WASHINGTON, D.C.**

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- Learn from your industry peers in breakout sessions and networking events.

[click here to learn more or register](#)



"The 2016 ADRP Conference was a perfect blend of Recruitment & Collections content. To hear leaders in our industry from around the world share best practices was priceless.

—Pamela B. Rascon, Director, Community Resources, Sheppard Community Blood Center, GA

**May 1-3, 2017
Chicago, Illinois**

Subscribers Registration: \$550

Hotel Rate for ADRP: \$199/night

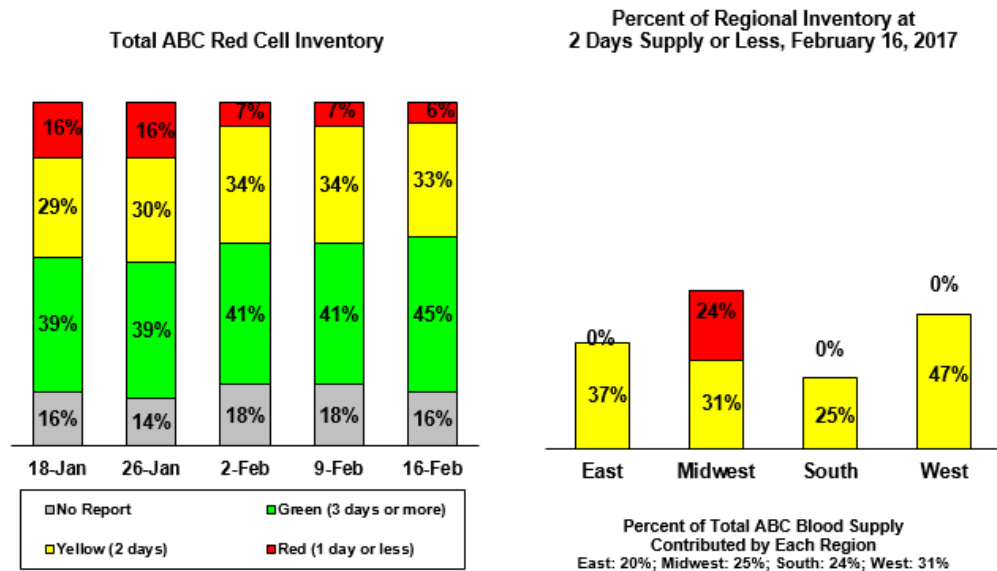
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adrp.org/annual-conference



STOPLIGHT®: Status of the ABC Blood Supply



Daily updates are available at:
www.AmericasBlood.org



AMERICA'S BLOOD CENTERS

55th ANNUAL MEETING



March 24-28, 2017 – Washington, DC

"The 2017 ABC Annual Meeting in Washington, DC is the premier place for industry leaders to experience peer-to-peer collaboration and networking, exclusive educational events and the opportunity to be an advocate for your blood center on Capitol Hill."
 – Christine Zambricki, Chief Executive Officer, America's Blood Centers

Meeting Schedule

<p>Friday, March 24 International Blood Safety Forum</p> <p>Saturday, March 25 Business Forum ABC Board Meeting</p> <p>Sunday, March 26 ABC Members Meeting SMT Forum & Celso Bianco Lectureship FABC Reception</p> <p>Hotel Information Ritz-Carlton (Pentagon City) Hotel room rate: \$249 + tax Reserve hotel by March 3</p>	<p>Monday, March 27 Blood Center Leadership Forum 20th Annual Awards of Excellence ABC's Got Talent Season II</p> <p>Tuesday, March 28 Advocacy Forum Capitol Hill Visits</p>
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Future Leader Scholarship Program (Funded by FABC)
 Details available upon registration.

Registration Fees (Member/Non-member)
 Annual Meeting: \$975 / \$1,605
 International Blood Safety Forum (Friday only): \$275 / \$275
 International Blood Safety Forum & Business Forum (Fri & Sat only): \$410 / \$410
 Business Forum through Advocacy Forum (Sat through Tue): \$760 / \$1,330
 Registration opens early December. For questions, contact [Lori Beaston](#).

Sponsorship Opportunities
 For questions or to learn more about sponsorship opportunities, contact [Jodi Zand](#).



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MEMBER NEWS



United Blood Services in the Dakotas region sent more than 100 blood products to its sister center in Oroville, Calif. this week. Oroville was under an evacuation order, just lifted Wednesday, due to fears the spillway at the country's tallest dam would fail. Some 200,000 people had been evacuated. Water had receded slightly on Wednesday, but more storms were in the forecast for the area on Thursday, Friday, and Monday next week. (Sources: *KVRR*, [United Blood Services Sending Products to Community of Oroville](#). February 14, 2017; *Sacramento Bee*, [Oroville Dam update: Spillway continues to dump water into Feather River as storms roll in](#). February 16, 2017.)

GLOBAL NEWS

Switzerland lifts its lifetime ban on men who have sex with men (MSM) from donating blood. Last month, Switzerland announced their 40-year ban on MSM from donating blood and blood products would come to an end. They will adopt the same policy as the U.S.', which prohibits MSM who have had sex within the last year from donating. The Swiss Agency for Therapeutic Products (Swissmedic), the country's regulator, approved the policy following an appeal from Swiss Transfusion SRC, a division of the Red Cross. (Source: *AFP*, [Switzerland to lift ban on gay, bisexual men giving blood](#). January 31, 2017.)

Jamaica received new testing equipment from the Pan American Health Organization (PAHO). Last week, the National Public Health Laboratory in Kingston, Jamaica, received a real time polymerase chain reaction (PCR) machine, valued at about \$50,000, to help the country test blood samples for infectious diseases such as Zika, chikungunya and dengue. As of December 2016, there were 7,052 suspected cases of Zika and 186 confirmed cases of Zika reported in Jamaica; 1,825 probable cases of dengue and 110 confirmed cases of dengue, and 204 suspected with one confirmed case of chikungunya, according to PAHO. (Source: *Jamaica Observer*, [National lab gets new testing equipment for Zika, Chik-V](#). February 11, 2017; PAHO, [Zika-Epidemiological Report](#). December 20, 2016)

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CALENDAR

2017

Mar. 2-3. [IPFA 2nd Asia Workshop on Plasma Quality and Supply](#), Yogyakarta, Indonesia. To register for the workshop, click [here](#).

Mar. 24-28. **Annual Meeting, America's Blood Centers, Washington, D.C.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Mar. 25. **Board Meeting, America's Blood Centers, Washington, D.C.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

April 6. **FDA Public Workshop: Emerging Tick-Borne Diseases and Blood Safety, Bethesda, Md.** For more information, click [here](#).

Apr. 18-19. **Heart of America Association of Blood Banks (HAABB) 50th Annual Spring Meeting, Kansas City, Mo.** For more information and to register, go to <http://www.haabb.org>.

Apr. 18-19. **Transfusion Safety Officer & Patient Blood Management Seminars (Basic & Advanced Programs), St. Petersburg, FL.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

May 1-3. **ADRP 2017 Annual Conference, Chicago, Ill.** More information is available on the [website](#).

May 16-17. [IPFA/PEI 24th International Workshop on "Surveillance and Screening of Blood-borne Pathogens"](#), Zagreb, Croatia. To register, click [here](#).

May 17-19. **Cellular Therapies and Transfusion Medicine in Trauma and Critical Care-Looking Towards the Future, San Francisco, Calif.** Presented by Blood Systems, Blood Systems Research Institute, and the University of California San Francisco. For more information, or to register, click [here](#).

June 6-8. **Technical & Quality Workshops, America's Blood Centers, Omaha, Neb.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

June 17-21. **27th Regional Congress of the ISBT, Copenhagen, Denmark.** Click [here](#) to register for the event.

July 26. **Transfusion Safety Officer & Patient Blood Management Seminars (Advanced Program), Ft. Lauderdale, FL.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

Aug. 1-4. **Summer Meeting, MD Workshop & Golf Tournament, America's Blood Centers, Providence, R.I.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Aug. 4. **Board Meeting, America's Blood Centers, Providence, R.I.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Sept. 11-12. [IPFA/BCA 3rd Global Symposium on The Future for Blood and Plasma Donations](#), Atlanta, Ga. [Registration is now open.](#)

Nov. 7-8. **Transfusion Safety Officer & Patient Blood Management Seminars (Basic & Advanced Programs), Jacksonville, FL.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151. Nov. 8-10. **10th World Federation of Hemophilia Global Forum, Montreal, Canada** For more information and to register, click [here](#). ♦



CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC institutional members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, contact Leslie Maundy at the ABC office. Phone: (202) 654-2917; fax: (202) 393-1282; e-mail: lmaundy@americasblood.org.

POSITIONS

Also available on our [website](#)

Chief Medical Officer. Hoxworth Blood Center seeks a Chief Medical Officer to be responsible for the medical activities of Hoxworth, oversight of the operation of the Transfusion Service, and maintains service relations with 30 other hospitals in the Cincinnati area. The position accomplishes this through a respectful, constructive and collaborative style, guided by local, state and national regulations and the objectives of Hoxworth Blood Center and the University of Cincinnati College Of Medicine. The position provides medical oversight, regulatory expertise and leadership to ensure the delivery, potency, purity and safety of blood/cell services and products. This position requires an active Unrestricted Ohio Medical License (or eligibility to obtain the license). Apply online to <https://jobs.uc.edu> (Req ID# 15461). Visit our website at www.hoxworth.org. Hoxworth Blood Center is dedicated to the promotion of research and education in transfusion medicine and cell therapies. The University of Cincinnati is an affirmative action/equal opportunity employer/M/F/Vet/Disabled

Director of Technical Services. Manages laboratory employees in testing and preparation of blood products and manages Hospital Services' employees for distribution of products. Supervises Quality Assurance functions to ensure accurate and reliable work; enforces Safety policies; and encourages and trains according to cGMPs. Oversees Technical Services' compliance with the FDA, AABB and state regulations for blood centers. Promotes positive customer relations in an effort to achieve customer satisfaction and repeat business. Assists other Senior Management Team members in carrying out Sheppard's mission and goals. Qualifications: Minimum of associates degree in a biological science; Medical Technology or Clinical Laboratory Science certification awarded by the American Society of Clinical Pathology or equivalent; minimum of an associate's degree in a Biological Science, Medical Technology or Clinical Laboratory Science certification awarded by the American Society of Clinical Pathology or equivalent. At least five (5) years progressive experience in management, SOP writing and FDA compliance. Experience in hospital transfusion medicine/blood bank. Please forward cover letter, download Sheppard's Application located at www.sheperdblood.org and resume to: sjohnston@sheperdblood.org. EEO for individuals with Disabilities & Protected Veterans.

Director of Mobile Recruitment. The Director of Mobile Recruitment is the operations leader for the mobile recruitment department. This position is responsible for the strategic development of mobile collections with an emphasis on continuous process improvement, oversees all daily operations, responsible for achieving donor collection goals, responsible for all operational activities in field recruitment, and responsible for an annual budget of up to \$3M. This individual must be an effective leader of change, constantly seeking opportunities to recognize best practices. Bachelor's degree or seven years' experience in blood center operations, masters' degree a plus, minimum of five years' experience in management with direct responsibility for staff, departmental budget and process improvement, and a minimum of five years sales management experience. We are an EEO/Affirmative Action employer. Carter BloodCare (CBC) provides equal employment opportunities (EEO) to all employees and applicants and will not discriminate in its employment practices due to an employee's or applicant's race, color, religion, sex, sexual orientation, gender identity, age, national origin, genetic, and veteran or disability status. CBC is a Pro Disabled & Veteran Employer. Please apply online at: www.carterbloodcare.org. We maintain a drug-free workplace and perform pre-employment substance abuse testing. ♦