

Board Meeting Minutes

Date and time: Dec. 3, 2021
10:30 a.m. – 2:30 p.m. ET **Session type:** Open

Chair Mel Cappe **Recording secretary** Ashley Haugh

Attendees **Board:** Bob Adkins; Kelly Butt; Craig Knight; David Lehberg; Anne McFarlane; Lorraine Muskwa; Dr. Brian Postl, Dunbar Russel; Dr. Jeff Scott; Judy Steele; Glenda Yeates; Victor Young

Executive Management Team: Jean-Paul Bédard (Vice-President, Plasma Operations), Judie Leach Bennett (Vice-President, General Counsel and Chief Risk Officer); Dr. Christian Choquet (Vice-President, Quality and Regulatory Affairs); Dr. Isra Levy (Vice-President, Medical Affairs and Innovation); Ralph Michaelis (Chief Information Officer); Andrew Pateman (Vice-President, People, Culture and Performance); Dr. Chantale Pambrun (Co-Acting Vice-President, Medical Affairs and Innovation); Dr. Tanya Petraszko (Co-Acting Vice-President, Medical Affairs and Innovation); Pauline Port (Chief Financial Officer and Vice-President, Corporate Services) Rick Prinzen (Chief Supply Chain Officer and Vice-President, Donor Relations); Ron Vezina (Vice-President, Public Affairs); Dr. Yasmin Razack (Chief Diversity Officer)

Guests

Regrets Dr. Graham Sher (Chief Executive Officer)

1. Call to order (M. Cappe)

Mel Cappe, Chair, called the meeting to order and welcomed all in attendance to Canadian Blood Services' virtual open board meeting.

1.1 Acknowledgment of traditional territory (M. Cappe)

It was acknowledged that the land that the board gathered on is the traditional unceded territory of the Algonquin Anishinaabeg People, whose presence reaches back to time immemorial.

1.2 Introduction of board members and executive management team (M. Cappe)

Members of the board and executive team were introduced, including the new Chief Diversity Officer, Dr. Yasmin Razack.

2. Approval of agenda (M. Cappe)

*After review, **ON MOTION** duly made and seconded, the agenda for the meeting was approved.*

3. Declaration of conflict of interest (M. Cappe)

There were no conflicts of interest declared.

4. Patient story

Canadian Blood Services' commitment to patients is a primary focus for the board. The board reinforces this commitment by starting each board meeting with a patient story; in-person or by video.

Colin MacPhee and Gerri Corcoran shared their story as stem cell donor and recipient. Just over two years ago, C. MacPhee donated stem cells to G. Corcoran after she was unable to find a family match. At the time, the donation was anonymous, but after a year both consented to waiving the confidentiality and began communicating. This past Thanksgiving (2021), he travelled to PEI to meet G. Corcoran and her family. G. Corcoran expressed her thanks to C. MacPhee and Canadian Blood Services for providing life saving products. C. MacPhee shared that the process was easy, and the donation only took eight hours (while he watched a couple of movies) and has changed G. Corcoran's life as well as his own.

5. Report of the Chair (M. Cappe)

M. Cappe, Chair, shared:

- Dec. 3, 2021 is International Day of Persons with Disability which reminds us of our responsibility to better understand disability issues and promote the rights and well-being of persons with disabilities in all parts of society.
- Our thoughts are with provinces and territories (PTs) that have been suffering with extreme rainfall and weather. During this time, Canadian Blood Services has had to

cancel or postpone some donation events but has managed blood inventory by leveraging national reserves.

- On Nov. 29, 2021, Canadian Blood Services hosted its annual Honouring Canada's Lifeline which recognizes donors, volunteers, partners, fundraisers, and employees for the work they do for **Canada's Lifeline**. As always, it was wonderful event filled with stories of people from all over the country doing incredibly selfless things and is a reminder that what we do matters.
- Board members Craig Knight and Dunbar Russel are completing their terms on the board and were thanked for their valuable contributions to Canadian Blood Services.
- M. Cappe noted he is finishing his term as board chair and that it has been a privilege to serve Canadian Blood Services and Canadians and thanked the dedicated and committed employees, volunteers, and donors of Canadian Blood Services. Dr. Brian Postl has been appointed the new chair of the board.
- P. Port thanked M. Cappe for his dedication to Canadian Blood Services as board chair.
- Canadian Blood Services now has a fully vaccinated workforce; employees are doing their part to keep the working environment safe.
- Canadian Blood Services engages in ongoing research to enhance transfusion and transplantation system and to ensure the utmost safety. One of the most recent and exciting innovations being implemented for the first time in Canada is pathogen-reduced platelets.
- Work continues to increase plasma collection which will help mitigate the risk to the Canadian supply of plasma for immunoglobulin. Plasma donation centres (PDCs) in Sudbury, ON; Lethbridge, AB; and Kelowna, BC, opened on time and on budget with two more PDCs opening in spring 2022 in Ottawa, ON and Brampton, ON. Planning is underway for six more centres. The organization is grateful to Health Canada for funding start up costs for upcoming PDCs and the ongoing operational costs from the PTs.
- Another advancement in plasma this past year was the expansion of screening practices to enable some gay, bisexual, and other men who have sex with men (gbMSM) donate plasma at centres in Calgary, AB and London, ON. This was one important step in the ongoing journey toward creating a more inclusive blood system.
- On behalf of the board, thank you to Canadian Blood Services' dedicated employees and volunteers, especially those on the frontlines, for providing excellent service and keeping **Canada's Lifeline** strong.

6. Report of the CEO (P. Port)

P. Port, Chief Financial Officer and Vice-President, Corporate Services, presented the 2021-2022 mid year review, including an overview of:

- Key highlights – continued to ensure that Canadian patients have reliable access to safe, high-quality products
- COVID-19 – managed COVID-19 impacts; supported COVID-19 clinical research; continuing to evaluate COVID-19 immunity among blood donors to inform public health policies
- Blood for life
 - Ongoing surveillance indicates that the risk of transfusion-transmitted pathogens remains low
 - Continued to successfully manage the supply and demand of fresh blood products
 - Red blood cell (RBC) shipments and collections returned to pre-pandemic levels while inventory and discard rate decreased
- Plasma for life
 - Continued to mature the plasma protein and related products program to benefit patients
 - Demand for immunoglobulin continued to grow but at a slower pace than pre-pandemic
- Stem cells for life
 - Overall continued growth of the stem cell registry remains a challenge during the pandemic
 - Reviewed Canadian stem cell transplants and cord blood units distributed for transplant
- Organs and tissues for life
 - The organ and tissue donation and transplantation program worked to mature national programs and improve system performance
 - Reviewed statistics regarding kidney paired donation (KPD) program and highly sensitized patients (HSP) program

- Innovative research and development to meet changing patient needs
- Strategic plan, *Keeping the Promise*:
 - Meet changing patient needs by providing lifesaving products and services - continued to innovate products and services to meet patient needs
 - Build and deepen relationships with the donors of the future - continued to focus on the donor experience during the pandemic
 - Ensure a secure supply of Canadian plasma for immunoglobulin – growing domestic supply for Canadians
 - Creating an engaging and empowering employee experience - identified critical areas to enhance the employee experience; proactively acted throughout the year to support the mental and physical well-being of the workforce; diversity, equity, and inclusion; evolving eligibility gbMSM; recognized for leadership and innovation in occupational health and safety
 - Achieve organizational excellence - continued to advance organizational excellence by making progress in critical bodies of work; reviewed quality indicators and productivity results
- Reviewed summary of financial results

Discussion included:

- There is ongoing review and monitoring of the impact of climate change on transfusion-transmitted parasite infections.
- Platelet pathogen reduced inventory is on track for a phased rollout. The first phase will take place in eastern Ontario (approx. 10-15% of national inventory) before rolling out to the entire country with an expected completion date / 100% pathogen reduced platelet inventory in mid-2023. Solvent detergent (SD) plasma (pathogen reduced) is also moving forward and in approximately 18 months it is expected there will be 100% SD plasma inventory. At this time, there is no technology for pathogen reduced red blood cells; research continues around the world to advance this technology.
- Canadian Blood Services continues to be in touch with colleagues at NHS Blood and Transplant (UK) regarding the June 2021 implementation of their sexual behaviour-based screening implementation and any relevant data and learnings for Canadian Blood Services.

7. Public questions and answers

A question and answer period, open to any member of the public was held during the meeting.

Question: I keep seeing posts online about how vaccinated blood isn't being accepted in parts of the world. Is there any truth to this, and does Canadian Blood Services keep a supply of unvaccinated blood for patients?

Answer: From a context of blood safety, Canadian Blood Services scientists review all vaccines for the potential need to defer blood donation. The regulator (Health Canada), manufacturers, and Canadian Blood Services have looked at vaccine data and determined it is safe for donors to donate after receiving a COVID-19 vaccine and it safe for a patient to receive blood from someone who has recently been vaccinated. In Canada, there is no regulatory requirement or blood quality or safety standard that requires that the vaccination status of the blood donor be indicated on the label of a blood product.

Question: I'm just curious about how the ongoing pandemic impacts the way you collect and manage the blood inventory. There is constant flux in the healthcare system now in terms of staff and scheduling procedures, what's the impact been on the management of the blood supply?

Answer: Supply and demand volatility has been closely monitored during the pandemic. Safety protocols such as personal protective equipment (PPE), greater spacing between donor beds, fully vaccinated workforce, etc. have enabled Canadian Blood Services to continue to meet demand. The organization remains agile and ready to meet future demand.

Question: I am a regular blood donor and have had all my COVID vaccines. I am not asked for proof of vaccination when I donate blood. Is this because donors are not required to be vaccinated?

Answer: Canadian Blood Services is aware from surveys and from seroprevalence studies that over 95% of donors are fully vaccinated. Safety measures such as PPE, physical distancing, wellness screening, etc. help provide extra protection to everyone, regardless of donor vaccination status.

Question: My 4-year-old son asked me the other day why human blood is red. I realized I didn't know the answer! Then I saw blood services was accepting questions and I thought I'd go ahead and try asking! Thanks for getting my son and I the answer.

Answer: Blood gets its bright red color when hemoglobin in the blood binds with oxygen in the lungs. It then distributes (via arteries) the oxygenated blood to different parts of the body. Deoxygenated blood, traveling through veins back to the heart and lungs, is a duller red.

Question: Why do I have to wait 2-months between blood donations?

Answer: The donation intervals exist to help protect the health and well-being of donors as it takes time for the body to regenerate the blood that has been donated (and replenish iron stores). Plasma is regenerated more quickly, so has a shorter donation interval.

8. Public Presentations (M. Cappe)

At each open board meeting, members of the public and stakeholders are given the opportunity to present to the board. The following individuals presented to the board, and all will receive a written response following the board meeting.

8.1 Kat Lanteigne, Executive Director and Co-founder, BloodWatch.org

K. Lanteigne expressed concern regarding the epidemiology summary conducted by Public Health New Brunswick regarding the neurological disease cluster in New Brunswick and that a formal working group should be established that includes Canadian Blood Services. It was also expressed that Canadian Blood Services should move away from the use of products manufactured from American paid plasma.

Response: Canadian Blood Services is regularly and proactively engaged with public health experts in New Brunswick regarding the neurological disease cluster, and management has initiated an investigation into any individuals that may have intersected with the blood system. None of the evidence to date, nor any of the investigations undertaken have indicated any risk to the blood system. This evolving issue will continue to be closely monitored.

Canadian Blood Services is preparing to engage key stakeholders in a dialogue to gather perspectives on plasma collection and plasma sufficiency in this country and is looking forward to BloodWatch's participation.

8.2 Angela Diano, Executive Director, Alpha-1 Canada

A. Diano expressed Alpha-1 Canada's ongoing concern regarding access to augmentation therapy for Alpha-1 patients. In fall 2021, CADTH began its review of a new augmentation therapy (ZEMAIRA®); Alpha-1 Canada is requesting an expedited decision from the provinces and territories once the CADTH review is complete. Several stories of Alpha-1 patient trying to access products were shared with the board.

Response: Canadian Blood Services is pleased that ZEMAIRA® has been submitted to CADTH for review and look forward to the results of this process over the next several months.

8.3 Lanre Tunji-Ajayi, President/CEO, Sickle Cell Awareness Group of Ontario and Dr. Jacob Pendergrast, Sickle Cell Awareness Group of Ontario; Associate Professor, University of Toronto; Associate Medical Director, University Health Network Blood Transfusion

L. Tunji-Ajayi and J. Pendergrast shared that they believe that a permanent deferral for individuals that have had malaria is no longer required and that it poses a barrier to the collection of an adequate supply of phenotype matched blood for patients with sickle cell disease.

Response: The malaria deferral is one that impacts a significant number of people, particularly those from certain parts of Africa, or that travel to those areas. Last year, Canadian Blood Services was able to reduce the deferral period for those that have immigrated from a malaria-endemic region (and do not have a history of malaria), as well as the deferral for those that visited a malaria-endemic region. These changes have allowed thousands of new donors to participate in Canada's lifeline.

There is still work to do to continue to study and evolve screening criteria, and the organization is committed to undertaking that work with stakeholders such as the Sickle Cell Awareness Group of Ontario and others from the community.

Canadian Blood Services is acutely aware of how important finding best matched blood is for patients with sickle cell. There is a great deal of work that is either planned, or already underway, to best understand the needs of these patients. Some of that work includes reviews of donor screening criteria around hemoglobin levels, optimized genotype testing schemes and improved recruitment efforts for rare donors.

It is important for Canadian Blood Services to engage the community in these discussions, and the stakeholder engagement team will be following up to discuss next steps.

- **ACTION:** Management to update the Safety, Research and Ethics committee (SREC) on malaria donation-related criteria.

M. Cappe thanked the board, management, employees, stakeholders, and members of the public for participating in the virtual open board meeting.

The open board meeting adjourned at 2:30 p.m. ET

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