

Board Meeting Minutes

Date and time:	June 17, 2022 10:30 a.m. – 2 p.m. ET	Session type:	Open
Chair	Dr. Brian Postl	Recording secretary	Ashley Haugh
Attendees	<p>Board: Bob Adkins; Kelly Butt; Bobby Kwon; David Lehberg; Anne McFarlane; David Morhart; Dr. Jeff Scott; Judy Steele, Glenda Yeates; Donnie Wing</p> <p>Executive Management Team: Dr. Graham Sher (Chief Executive Officer); Jean-Paul Bédard (Vice-President, Plasma Operations); Judie Leach Bennett (Vice-President, General Counsel and Chief Risk Officer); Jennifer Camelon (Chief Financial Officer and Vice-President, Corporate Services); 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); Rick Prinzen (Chief Supply Chain Officer and Vice-President, Donor Relations); Dr. Yasmin Razack (Chief Diversity Officer); Richard Smith; (Chief Information Officer); Ron Vezina (Vice-President, Public Affairs);</p>		

Guests

Regrets Lorraine Muskwa; Victor Young

1. Call to order (B. Postl)

Dr. Brian Postl, Chair, called the meeting to order and welcomed all in attendance to Canadian Blood Services' open board meeting.

Acknowledgment of traditional territory (B. Postl)

It was acknowledged that the land that B. Postl was gathered on is the original land of Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene peoples, and on the homeland of the Métis Nation.

June is National Indigenous History Month. Highlighting and celebrating Indigenous cultures as well as contributions by Indigenous peoples to our work at Canadian Blood Services is one of our goals. Canadian Blood Services has a role to play in improving relationships within these communities and building trust with First Nations, Métis and Inuit peoples. The progress we make is important in helping us better meet the needs of Indigenous patients. We recently shared our organization's Reconciliation Action Plan with employees. It was created following almost two years of collaborative work and will be shared publicly later in the year. We look forward to putting those guiding principles into action.

1.1 Introduction of board members and executive management team (B. Postl)

Members of the board and executive team were introduced, including the new Chief Financial Office and Vice-President, Corporate Services, Jennifer Camelon, and the new Chief Information Officer, Richard Smith.

2. Approval of agenda (B. Postl)

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

3. Declaration of conflict of interest (B. Postl)

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.

Brandon Peacock shared how blood and blood products saved his life after being hit by three stray bullets in a drive-by shooting in June 2020. Due to the quick action of a police officer who immediately provided first aid, medical professional, and blood donors, he survived, and he quickly became an advocate for blood donation as well as started a charity to help provide resources to trauma survivors for rehabilitation. Recently, he joined Canadian Blood Services as a community development manager and continues to raise awareness of the need for blood products with the public and partner organizations.

5. Report of the Chair (B. Postl)

B. Postl, Chair, shared:

- The week of June 8 is National Blood Donor Week. The board thanks all the committed blood, plasma and platelet donors who are part of Canada's Lifeline.
- Inventory and supply levels have been facing challenges with a shrinking group of donors during the pandemic. If you are eligible, please book an appointment today and encourage your friends and family to donate as well.
- Canadian Blood Services' plasma program continues to expand. There are now five dedicated plasma donation centres with the recent opening of centres in Brampton and Ottawa, Ontario. The organization continues to be on a journey to reach 50% domestic plasma sufficiency.
- Under the leadership of Dr. Yasmin Razack, Canadian Blood Services' first Chief Diversity Officer, the organization continues the necessary steps to evolve its diversity, equity and inclusion practices and policies. The goal is to build a national transfusion and transplantation system that ensures the safety and sufficiency of blood products while also maximizing participation in Canada's Lifeline.
- Recently, the organization received approval from Health Canada to change donor screening questions so it will no longer ask men if they have had sex with another men, but instead ask all donors, regardless of their gender or sexual orientation, about sexual behaviours with a higher chance of acquiring a new infection. This change will be implemented in September 2022 and the organization is looking forward to welcoming new donors to Canada's Lifeline under these more inclusive practices. This is just one step and there is still a long road to repairing relationships with the 2SLGBTQIA+ community.
- Phase one of pathogen inactivation technology was implemented this year starting with platelets in the Ottawa region. The plan is to roll this out more extensively, applying it to all platelets across Canada, over the next 18 months. By 2024, it is hoped that we will also be applying pathogen inactivation technology to all plasma collected in Canada.
- 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 (G. Sher)

G. Sher, Chief Executive Officer, presented the organization's 2021-2022 end of year review:

- Continued to ensure that Canadian patients have reliable access to safe, high-quality products
- Successfully managed the COVID-19 impacts in the past twelve months
- Continued to contribute to COVID-19 research
- High-impact research and development – introducing new products, advancing patient care, building the donor base and making it more inclusive
- Blood for life
 - Timely surveillance, testing and investigations are central to the safety of the blood supply
 - Monitoring emerging pathogens and other threats of concern
 - 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
 - The stem cell program continues to adapt and improve to meet patient needs
 - 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
- Canadian Blood Services is an integral partner in the national Organ Donation and Transplantation Collaborative (ODTC)
- Strategic plan, *Keeping the Promise*:
 - Re-visited the strategic plan to respond to disruptions of the pandemic
 - Meet changing patient needs by providing lifesaving products and services - continued to innovate products and services to meet patient needs; continued to focus on the donor experience; new sexual behaviour-based screening criteria will be in place no later than Sept. 30, 2022
 - Ensure a secure supply of Canadian plasma for immunoglobulin – new plasma centres in Brampton and Ottawa, Ontario; growing domestic supply for Canadians
 - Creating an engaging and empowering employee experience - identified where to enhance the employee experience; supported the mental and physical well-being of the workforce; advanced diversity, equity and inclusion work
 - Achieve organizational excellence - 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 and other factors on transfusion-transmitted parasite infections.
- Earned and paid media related to National Blood Donor Week led to an increase in collections.
- Pathogen inactivation technology for red blood cells is still a number of years away, at minimum three to five years. Management continues to monitor its progress.
- In selecting new communities for opening collection centres – for blood or plasma – the impact on the rest of the Canadian Blood Services network is considered. As commercial plasma collections have expanded in Canada, the location of these sites also needs to be taken into consideration.
- Donor experience is an important element for Canadian Blood Services and is taken into consideration when setting donation frequency targets for plasma collections.

- Volunteers are a key part of the Canadian Blood Services team. Work is being done to engage volunteers in new ways.
 - **ACTION:** Update the board on the volunteer experience, demographics, engagement, etc.

7. Approval of the Audited Consolidated Financial Statements (J. Steele)

The board received the Audited Consolidated Financial Statements. Discussion included:

- The external auditors have completed their audit and will issue a clean audit opinion.
- The Finance and Audit committee reviewed the results and met with the external auditors to discuss the audit.

*After review and discussion, **ON MOTION**, duly made, seconded and carried, **IT WAS RESOLVED THAT** the board approve the Canadian Blood Services Audited Consolidated Financial Statements for the year ended March 31, 2022.*

8. Public questions and answers

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

Question: Across health care we are seeing a need to do more with less. The COVID pandemic will impact funding envelopes for years, if not decades to come. I am concerned about the impact this will have on our ability to innovate and implement new therapies and techniques. Do you see this as a problem for Canada's blood system as well?

Answer: Canadian Blood Services provides essential life saving services. The board and managements recognize the challenging fiscal environment that governments currently face. Important investments are needed in the blood system over the next number of years to drive innovation, modernize infrastructure, and ensure the appropriate products and services are available for Canadian patients. As a steward of public funds, Canadian Blood Services is committed to doing this in an efficient and productive manner.

Question: I saw that blood services opened a new clinic in Orleans (Ottawa, ON) recently. Why is it only to donate plasma? Is plasma more important than blood?

Answer: Blood and plasma are both life saving products and are equally important. The demand for red blood cells has been static or declining in the last 5-10 years, while the demand for plasma / products made from plasma has been increasing. To meet this growing demand, more plasma needs to be collected in Canada and it is a more efficient model to have dedicated plasma centres in addition to the already existing blood network. Five plasma donation centres have been open with another six to be opened in the next few years.

Question: It seems like modern technology is moving so quickly. Do you think there will ever be a time when blood can be made in a lab without the need for blood donors?

Answer: Many companies are trying to develop synthetic red blood cells, but to date, all have failed or are in early development. Any possible development is likely decades away.

Question: There have been messages and ads lately talking about low blood inventory. At the same time successful blood clinics are being shut down and replaced with these plasma centres. I understand the importance of this too, but shouldn't blood be your main focus?

Answer: There needs to be a focus on both blood and plasma. When considering switching a market from blood to plasma collection, part of the consideration is where blood collection can be expanded in other areas to ensure ongoing inventory.

Question: Why isn't organ donation consent mandatory across Canada? What is Canadian Blood Services' policy on this? Is an opt-out consent system better?

Answer: Health policy is set by the provinces and territories (PTs), not Canadian Blood Services. When individual PTs have examined this issue, Canadian Blood Services has provided evidence from other jurisdictions regarding different organ and tissue programs. Regardless of the option selected by a jurisdiction, people letting their families know their wishes about organ donation and having health professionals educated and prepared to have these difficult discussions are key to increasing organ donation.

Question: I appreciate all Canadian Blood Service has done to help donors feel safe in the blood clinics. The protocols you've put in place have helped me feel comfortable continuing to donate during this pandemic. As things are opening up across the country, will Canadian Blood Services continue to do these things to promote donor health?



Answer: Measures put in place during the pandemic are evaluated on an almost weekly basis. As PTs continue to ease restrictions, Canadian Blood Services will review public health requirements, epidemiology, etc. to determine next steps.

Question: I give plasma on a weekly basis. I keep hearing about the reduction in donations and increasing needs. Over the last year, I have had some of my appointments cancelled due to insufficient staff. What is Canadian Blood Services doing to avoid losing scheduled donations and the associated blood product?

Answer: Like other organizations, the pandemic has had an impact on Canadian Blood Services' operations. The organization has worked hard to maintain operating hours, but during different waves of the pandemic, there have been times when appointments needed to be postponed or cancelled. We know this is disappointing to donors, and we apologize for this inconvenience. The organization appreciates the dedication of donors who have continued to donate during the pandemic.

Question: During Brandon's story he mentioned the importance of O-negative blood. What is it about this blood type that makes it usable by everyone?

Answer: O-negative blood has no antigens on red blood cells, so it will not trigger an immune response even if the recipient has a different blood type. This is why it is used in trauma situations when there is no time to determine a recipient's blood type.

Question: To address the need for greater plasma collection, Egypt recently created a public/private partnership to open 20 plasma centres that will compensate donors. In Romania, Donam Plasma is seeking a private sector partner to build 10 plasma centres in a public/private partnership that will also compensate donors to help address the shortfall in plasma collection. Has Canadian Blood Services considered creating a similar partnership that will permit donor compensation for plasma collections in Ontario and British Columbia, where Canadian Blood Services is exempt from the prohibition on compensation? If so, when might we hear about it? If not, why not?

Answer: Canadian Blood Services operating model is non remunerated, and the organization continues to expand its plasma collection program under this model. The organization has active discussion with federal, provincial and territorial governments regarding plasma sufficient and the role of the commercial sector in Canada and always keeps the needs of patients central to discussions.

9. Public Presentations (B. Postl)

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.

9.1 Christine Duncan, Board Chair, Canadian Immunodeficiencies Patient Organization (CIPO)

C. Duncan expressed support for Canadian Blood Services' expanded plasma collection, but CIPO does not believe this will be enough to meet patient needs and that models other than the non-remunerated donor model need to be considered. Options such as private public partnerships, tax breaks, time off for donations, tuition credits, etc. should all be examined. Plasma products have a long manufacturing process and can take up to 18 months to get from donor to recipient, so it cannot be ramped up quickly if there is a shortage. Canadian Blood Services must ensure patients have access to necessary therapies.

Response: Increasing Canada's plasma sufficiency is a top priority for the organization. Canadian Blood Services and federal, provincial and territorial governments are having ongoing discussions regarding Canada's need for an end-to-end domestic supply chain to secure a minimum target of 50 per cent plasma sufficiency in the quickest time possible for patients who have a critical need for immunoglobulin. The organization is carefully examining and giving due consideration to all available options to ensure that no Canadian patients will go without the products they need.

9.2 Jennifer van Gennip, Executive Director, Network of Rare Blood Disorder Organizations (NRBDO)

J. van Gennip expressed that increased supply and having access to products when needed are essential to people with rare blood disorders who receive blood and blood products. Patient groups support Canadian Blood Services recent plasma expansion but are concerned about meeting the 50% sufficient rate in a timely way and urge the organization to consider remunerating donors. NRBDO is committed to ensuring the patient voice is heard.

Response: Canadian Blood Services and federal, provincial and territorial governments are having ongoing discussions regarding Canada's need for an end-to-end domestic supply chain to secure a minimum target of 50 per cent plasma sufficiency in the quickest time possible for patients who have a critical need for immunoglobulin. This remains a top priority for this organization. While the organization's preference is still to achieve sufficiency targets

within our existing, non-remunerated system, the organization is carefully examining and giving due consideration to all available options to ensure that no Canadian patients will go without the products they need.

9.3 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 and the timelines to review products. Alpha-1 Canada is requesting an expedited review process for a new augmentation therapy (ZEMAIRA®). Via video, Judy, an Alpha-1 patient, shared her story of living with Alpha-1 and the need for access to augmentation therapy.

Response: Canadian Blood Services understands patients' desire to see a decision made as quickly as possible. Once a vendor submits a product for review, CADTH conducts a clinical and pharmacoeconomic review which informs Canadian Blood Services' analysis during the second stage of review. These sequential steps facilitate the most robust assessment and recommendation to provincial and territorial governments – something that is in the interest of all stakeholders. Ultimately, provincial and territorial governments must make the decision on whether this product will be approved, and so it is vital that the review is thorough and provides decision-makers with an evidence-based recommendation. The organization appreciates that for patients, any length of time feels like too much. Canadian Blood Services is completing its review as expeditiously as possible and is on track to complete its portion of the review within the timelines identified in the review process.

9.4 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 potential neurological disease cluster in New Brunswick and that further investigation needs to be conducted. Concern regarding the safety of products collected by the commercial plasma industry was also shared with the board.

Response: Regarding the potential neurological disease cluster in New Brunswick, Canadian Blood Services was in discussion with experts from across Canada including those from the Public Health Agency of Canada, Public Health New Brunswick, the Canadian Institutes of Health Research, and from academic institutions who focus on neurodegenerative diseases. As part of this work, Canadian Blood Services conducted a trace-back for all blood products received by patient cases and found there was no evidence or indication that there was any risk to the blood system. The expert panel completed its review and determined that no such syndrome exists. Any additional evidence



BloodWatch wishes to share should be given to the relevant public health authorities in New Brunswick.

There are no documented safety concerns, nor any scientific evidence of safety risks associated with products produced with commercial plasma today. Eighty-five per cent of products on Canadian Blood Services plasma protein and related products formulary are produced with commercially collected plasma and purchased from the global market. Any commercial collectors operating in Canada are licensed by Health Canada, and recipient groups that rely on these products do not express concerns about plasma procured in this way.

9.5 David Page, National Director of Health Policy, Canadian Hemophilia Society (CHS)

D. Page expressed support for the process and outcome of the recent recombinant factor request for proposal. He also expressed appreciation for the work and outcome of the emicizumab review (even though the review process was long) and the positive impact it is having on patients, although it is hoped the eligibility criteria can be expanded. It was also expressed that there needs to be new ways to bring products to people with rare diseases.

Response: The board appreciated hearing the difference emicizumab is making for patients. It is possible eligibility criteria could evolve in the future, as supported by data. Cases of unmet need for emicizumab can be submitted as part of Canadian Blood Services' exceptional access program.

B. Postl thanked the board, management, employees, stakeholders, and members of the public for participating in the open board meeting.

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

* * *