

March 19, 2020

Dear Emergency Management Agency,

I appreciate all that you and your team are doing to respond to the Coronavirus (COVID 19) pandemic. I am writing to make you aware of an important aspect of your emergency public health response. Many of the blood drives that are critical to ensuring an adequate supply of blood to treat patients in hospitals who need emergency surgery or trauma patients have been cancelled at workplaces and college campuses across the country. Your assistance is needed to ensure that your jurisdiction's emergency planning efforts appropriately prioritize the availability and accessibility of blood and blood products.

Blood and blood products are an essential treatment in trauma and are also required to meet the needs of patients with chronic conditions. During a time of crisis, patient access to blood and blood products is often critical. In the U.S., blood is typically collected, processed, and stored at regional non-profit blood centers and is distributed to hospitals on a daily or weekly basis. In some cases, a blood center may be located several hours away from the hospitals it supplies; thus, problems with the local infrastructure can create a set of logistical challenges that can impact the availability and accessibility of blood and blood products.

Blood supply is recognized by the Department of Health and Human Services (HHS) as essential and integral component of the Emergency Support Function (ESF) #8 of the National Response Framework. Under ESF#8, HHS monitors and coordinates the need for blood and blood products and related medical supplies in coordination with the American Association Blood Banks (AABB) Interorganizational Task Force on Domestic Disasters and Acts of Terrorism (AABB Disaster Task Force).

Despite the recognized importance of the safety and availability of blood in disasters, blood centers have encountered recent obstacles during disasters and emergencies. For example, in the aftermath of recent events, some blood centers encountered difficulties (1) obtaining fuel for generators that are needed to collect and maintain blood supplies and for vehicles (including staff vehicles); (2) accessing emergency transportation (helicopters and vehicles) to distribute blood and blood products with a limited shelf-life; (3) having utilities restored; (4) gaining re-entry access into affected areas; and/or (5) procuring reliable access to emergency communications and frequencies. These deficits represent significant vulnerabilities in our readiness, and place patients, including disaster survivors who may need blood and blood products for injuries, as well as patients with an ongoing need for transfusion-related therapies, at unwarranted risk.

I respectfully request your assistance in working with the community blood centers in your region to ensure that blood and blood products are available where and when they are needed in a disaster.

Donating blood is a safe process and people should not hesitate to give. It's important to note that blood drives have the highest standards of safety and infection control. We need your support to make sure healthy individuals in your community know that we need them to still donate blood as volunteer blood donors are the only source of blood for those in need. Just as the social distancing guidance recommends that it's okay for people to leave home for necessities like groceries, or a doctor's visit, or the pharmacy—donating blood is a necessity.

Longer term, this can be accomplished by integrating the community blood centers responsible for the collection and distribution of blood and blood products into your emergency management planning efforts, including the addition of blood-related scenarios in your drill and exercise programs. I also ask that your agency considers developing plans that ensure Food and Drug Administration (FDA) licensed or registered blood centers are appropriately prioritized for access to fuel, emergency communications equipment and frequencies, transportation during disasters, restoration of utilities, and re-entry access into affected disaster areas.

The AABB Disaster Task Force has encouraged all community blood centers to contact their emergency management agencies to participate in the emergency management planning process. The AABB Disaster Task Force also advocates the education of emergency management personnel on the unique needs of collecting and distribution blood and blood products to victims of a disaster while maintaining routine support for ongoing patient care. As you revise and exercise your ESF#8 plans, the blood collection facilities and the AABB Disaster Task Force should be an asset and considered essential partners in preparedness planning.

I appreciate your prompt attention to this important issue and thank you for your ongoing commitment to preparing for and protecting the public during disasters.

Sincerely yours,

Rete Gaynor Administrator

e: AABB Disaster Task Force