



# Voluntary

# Blood

# Donation

# Programme

*- An Operational Guideline*



National AIDS Control Organisation  
Ministry of Health and Family Welfare  
Government of India  
New Delhi





# Voluntary Blood Donation Programme

*- An Operational Guideline*

"Safe Blood Starts With Me"

DONATE BLOOD : SAVE A LIFE



**National AIDS Control Organisation**  
Ministry of Health and Family Welfare  
Government of India  
New Delhi



**2007**

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*Produced and published by* : National AIDS Control Organisation  
Ministry of Health & Family Welfare, Government of India

Published in July 2007

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# Foreword

Voluntary Blood Donation programme is the foundation for safe and quality Blood Transfusion Service as the blood collection from Voluntary non-remunerated blood donors is considered to be the safest. In order to augment Voluntary Blood Donation in the country, there was a felt need to develop an operational guideline which can provide all the necessary information on recruitment and retention of voluntary blood donors and guide organizations for this important activity.

Recruitment of safe donors is a challenging task. It is necessary that people realize that blood donation is their responsibility. No Blood Bank, hospital or Government can sustain health care without adequate blood from such donors and Blood Donor Organisations plays a very crucial role in this endeavor.

In order to improve upon the voluntary blood collection through a comprehensive voluntary blood donation programme, this guideline will serve as an important tool as it covers every aspect of the programme including the organization of the VBD camps. This will also be of immense help to all those who are involved with the voluntary blood donation programme in the country.

I would like to acknowledge the contribution made by Mrs. Kanta Swaroop Krishen, Mr. Apurba Ghosh, Mr. Debabrata Ray and Mrs. Malti Chibber for framing these guidelines. I hope that this book will guide organizations to change the mindset of the community, particularly the youth of the country towards the concept of voluntary blood donations.

(K. Sujatha Rao)

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अपनी एचआईवी अवस्था जानें; निकटतम सरकारी अस्पताल में मुफ्त सलाह व जाँच पाएँ।

**Know your HIV status; go to the nearest Government Hospital for free Voluntary Counselling and Testing.**



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# Abbreviations and Acronyms

AIDS	Acquired Immune Deficiency Syndrome
BTS	Blood Transfusion Services
CBO	Community Based Organisations
DCG (I)	Drug Controller General of India
HBV	Hepatitis B Virus
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
I/C	In-charge
IEC	Information Education Communication
IRCS	Indian Red Cross Society
MO	Medical Officer
NACO	National AIDS Control Organisation
NACP	National AIDS Control Programme
NBP	National Blood Policy
NBTC	National Blood Transfusion Council
NCC	National Cadet Corps
NGO	Non-Government Organisation
NSS	National Service Scheme
RRC	Red Ribbon Clubs
SACS	State AIDS Control Society
SBTC	State Blood Transfusion Council
TTI	Transfusion Transmissible Infections
VBD	Voluntary Blood Donation





# Why : Voluntary Blood Donation

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Voluntary blood donors are the cornerstone of a safe and adequate supply of blood and blood products. The safest blood donors are voluntary, non-remunerated blood donors from low-risk populations.



# Why : Voluntary Blood Donation



Voluntary blood donors are the cornerstone of a safe and adequate supply of blood and blood products. The safest blood donors are voluntary, non-remunerated blood donors from low-risk populations.

Despite this notion, family/replacement donors still provide more than 45% of the blood collected in India. Such donors are supposed to be associated with a significantly higher prevalence of transfusion-transmissible infections (TTIs) including HIV, hepatitis B, hepatitis C, syphilis and malaria,.

For a safe blood service in our country, where comprehensive laboratory tests are neither possible nor pragmatic, it is best to switch over to 100% voluntary donations, as it is now established that only voluntary non-remunerated regular donation is the safest. Thus, one of our key strategies to enhance blood safety is to focus on motivating non-remunerated blood donors and phasing out even replacement donors.

The key to recruiting and retaining safe blood donors is good epidemiological data on the prevalence (and incidence, where possible) of infectious markers in the general population to identify low-risk donor populations coupled with an effective donor education, motivation and recruitment strategy to recruit new voluntary non-remunerated blood donors from these populations. A pleasant environment in the blood bank, good donor care, polite and effective communication between staff and donors are all important factors for the retention of blood donors.

A guideline designed to assist those responsible for blood donor recruitment and implement a programme to improve communication with blood donors has been developed. These guidelines provide approaches for organizing, collecting information and developing plans; as well as providing ideas that individual centres might consider for recruiting, educating and retaining safe donors.





# Definitions Related to Blood Donors/Donations

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Voluntary non-remunerated blood donor : A person who gives blood, plasma or other blood components of his/her own free will and receives no payment for it, either in the form of cash or in-kind which could be considered a substitute for money.



# Definitions Related to Blood Donors/ Donations



## A. Voluntary non-remunerated blood donor

1. A person who gives blood, plasma or other blood components of his/her own free will and receives no payment for it, either in the form of cash or in-kind which could be considered a substitute for money. This includes time off work, other than reasonably needed for the donation and travel. Small tokens, refreshments and reimbursement of the direct travel costs are compatible with voluntary, non-remunerated blood donation.
2. "Voluntary" blood donation refers to "unpaid, non-remunerated" blood donation.
3. An altruistic donor who gives blood freely and willingly without receiving money or any other form of payment.

## Categories of Voluntary blood donor

1. New voluntary donor: A voluntary non-remunerated blood donor who has never donated blood before.
2. Lapsed voluntary donor: A voluntary non-remunerated blood donor who has given blood in the past but does not fulfill the criteria for a regular donor.
3. Regular voluntary donor: A voluntary non-remunerated blood donor who donates blood on a regular basis without any break for a longer duration between two donations.

## Regular Voluntary Non-Remunerated Blood Donor

A voluntary non-remunerated blood donor who has donated at least three times, the last donation being within the previous year, and continues to donate regularly at least once per year.

## B. Other categories of blood donors

### i) Family / Replacement blood donor

1. A donor who gives blood when it is required by a member of the patient's family or community. This may involve a hidden paid donation system in which the donor is paid by the patient's family.
2. A family / replacement donor is one who gives blood when it is required by a member of his/her family or community. This often involves coercion and/or payment which compromise the safety of the blood.





3. A member of the family or a friend of the patient who donates blood in replacement of blood needed for the particular patient without involvement of any monetary or other benefits from any source.

ii) Paid / Professional blood donor

A donor who donates blood in exchange of money or other form of payment. The professional Blood donation is banned in our country w.e.f. 1<sup>st</sup> January 1998.

iii) Forced blood donor

A person who is not willing to donate blood on his/her own, but is being forced by their superiors or employer for donation. There is always a fear of losing ones own job or promotion.

iv) Autologous blood donor

A patient who donates his/her blood to be stored and reinfused, if needed, during surgery. The patient themselves acts as a blood donor.

v) Autologous blood donation

The process of donating one's own blood prior to an elective surgical or medical procedure to avoid or reduce the need for an allogeneic blood transfusion.

vi) Apheresis donor

A donor who donates only one of their blood components through the process of cell separation. This donor may be either voluntary or replacement donor.





# Goal & Objectives of Voluntary Blood Donation

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Goal : To wipe off the scarcity of blood and ensure availability of safe and quality blood and other blood components, round the clock and throughout the year. This will lead to alleviation of human sufferings, even to the far-flung remote areas in the country.



# Goal & Objectives of Voluntary Blood Donation



## Goal

To wipe off the scarcity of blood and ensure availability of safe and quality blood and other blood components, round the clock and throughout the year. This will lead to alleviation of human sufferings, even to the far-flung remote areas in the country.

**Objective :** Voluntary blood donation is perhaps one of the most perfect examples of altruism in action. The objective of collecting blood through Voluntary blood donation are:

- Provide safe and quality blood and blood components collected from voluntary donors, round the clock, at affordable cost to the general public and free of cost to the poor.
- Ensure safety and quality of blood.
- Motivate and maintain a permanent well-indexed record of voluntary blood donors.
- Educating the community on the beneficial aspects of blood donation and harmful effect of collecting blood from paid donors.
- Actively encourage voluntary blood donation and gradually eliminate professional blood donors.
- Promote AIDS awareness and education to the general public.
- Assists the various Organizations, Clubs, Colleges, Public & Private Institutions and the Public to conduct voluntary blood donation drives and arrange for motivational talks to enable progressively increase the number of voluntary non-remunerated blood donors every year.





# Who Are Eligible to Donate Blood ?

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Any healthy adult, both male and female, can donate blood. Men can donate safely once in every three months while women can donate every four months. Good health of the donor must be fully ensured.



# Who are Eligible to Donate Blood?



Any healthy adult, both male and female, can donate blood. Men can donate safely once in every three months while women can donate every four months.

Good health of the donor must be fully ensured. The universally accepted criteria for donor selection are:

- ✿ Age between 18 and 60 years
- ✿ Haemoglobin - not less than 12.5 g/dL
- ✿ Pulse - between 50 and 100/minute with no irregularities
- ✿ Blood Pressure -Systolic 100-180 mm Hg and Diastolic 50 - 100 mm Hg
- ✿ Temperature - Normal (oral temperature not exceeding 37.5°C)
- ✿ Body weight - not less than 45 Kg
- ✿ Health conditions: The donor should be in a healthy state of mind and body. They should fulfill the following criteria:
  1. Past one year - not been treated for Rabies or received Hepatitis B immune globulin.
  2. Past six months - not had a tattoo, ear or skin piercing or acupuncture, not received blood or blood products, no serious illness or major surgery, no contact with a person with hepatitis or yellow jaundice.
  3. Past three months - not donated blood or been treated for Malaria.
  4. Past one month - had any immunizations.
  5. Past 48 hours - taken any antibiotics or any other medications (Allopathic or Ayurveda or Sidha or Homeo)
  6. Past 24 hours - taken alcoholic beverages
  7. Past 72 hours - had dental work or taken Aspirin
  8. Present - not suffering from cough, influenza or sore throat, common cold
  9. Women should not be pregnant or breast feeding her child
  10. Women donor should not donate during her menstrual cycles
  11. Free from Diabetes, not suffering from chest pain, heart disease or high BP, cancer, blood clotting problem or blood disease, unexplained fever,



weight loss, fatigue, night sweats, enlarged lymph nodes in armpits, neck or groin, white patches in the mouth etc.

12. Ever had TB, bronchial asthma or allergic disorder, liver disease, kidney disease, fits or fainting, blue or purple spots on the skin or mucous membranes, received human pituitary - growth hormones etc

To find out the eligibility of the blood donors and to rule out any contra indication for blood donation all the donors will be elaborately interrogated for the history and the incidence of the specific ailments by a planned questionnaire (see Annexure-3). Only after satisfactorily fulfilling the laid down basic criteria, the blood donors will be selected.



# Policy on Voluntary Blood Donation

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For providing good quality blood, the transfusion service must necessarily be supported by voluntary blood donors.



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For providing good quality blood, the transfusion service must necessarily be supported by voluntary blood donors.

Consequently, the recruitment of donors becomes one of the most important aspects of Blood Transfusion Services. Thus, healthy, responsive and motivated voluntary blood donors are the back-bone of any service. The professional donor system was banned in the country with effect from January 1, 1998 as per the Honourable Supreme Court Judgment. The Policy therefore, aims at catalyzing a situation of near total voluntary blood donation programme and phasing out even the replacement donor system.

## INCENTIVE & ITS ROLE IN BLOOD DONATION

An incentive is defined as something that motivates a person to take action. In the case of blood donation, incentives should not influence people's decision to donate blood and/or compromise the safety of the blood supply.

Incentives should not be conditional on a person actually donating blood. Incentives could be harmful not only to the recipient but also to the donor. Incentives will differ from country to country depending on each person's hierarchy of needs e.g. cultural beliefs, personal values, economic factors etc.

If an incentive fulfils a person's basic needs, this is viewed as payment. Incentives should not have a monetary value. Examples of acceptable incentives depending on the circumstances are:

- Health screening
- Promotional campaign items e.g. T-shirts, meal vouchers, entertainment passes, etc.
- Recognition items e.g. certificates, pins, medals, badges, pens, etc.
- Free refreshments
- Time off work





# Voluntary Blood Donation Programme

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The programme is to be implemented by Blood Banks, State Blood Transfusion Councils and recognised Voluntary Blood Donor Organisations, IRCS, CBOs, NGOs.



# Voluntary Blood Donation Programme



The programme is to be implemented by Blood Banks, State Blood Transfusion Councils and recognised Voluntary Blood Donor Organisations, IRCS, CBOs, NGOs as per the following broad parameters.

## 1) Need Assessment

In India, out of a total population of about 1000 million, the gap between demand and supply can be bridged by carrying out a proper assessment so that the demand can be met through planned donor recruitment and planned production of blood components and plasma derivatives.

A Directory of NGOs and agencies engaged in the field will need to be prepared and made available to Blood Transfusion Councils and State/UT Governments.

## 2) Education

a) There should be a planned programme to create awareness amongst the general public so as to ensure a regular supply of good quality blood without having to experience seasonal shortages. The educational programme, therefore, should be so designed that the community understands in depth the advantage of regular blood donation

b) The donor education and information material, donor questionnaire and donor consent forms should be prepared in simple language and translated for use in local areas.

## 3) Awareness campaigns for the people

a) Education programmes in schools where a community of future blood donors could be created.

b) Short-term training courses for donor motivators, social activists, trainers, blood bank personnel and volunteers who have an aptitude to serve the cause.





### 4) Donor Motivation

The underlying principle of donor motivation is to make the voluntary blood donor feel important and needed. It should aim at creating general awareness and to imbibe essence of firm determination in the minds of the potential donors. Any hesitance on the part of the donor will have to be tackled skillfully. The motivation of donors should be carried out as follows:

- a) By holding symposia, seminars, talks, discussions, get-togethers and street corner meetings at regular intervals.
- b) By displaying posters and hoardings at prominent places. These hoardings and posters should be appropriate and attractive and should be replaced at regular intervals.
- c) By holding competitive contests and public exhibitions.

Following groups may be considered for motivation:

Educational Institutions, Industrial and Commercial Houses, Social and cultural organisations, Religious and spiritual groups. Political organizations, Uniformed services, Medical Institutions, Women's organizations, Fan groups (Film artists or Sportsmen) and Government organisations.

### 5) Donations

One key secret of the success of blood donor recruitment is to go to the donor, rather than expecting the donor to come to the blood bank. The policy for blood donations aims at:

- a) Organising and holding blood donation camps in centres of public assembly, viz. educational institutions, youth groups, offices, factories, etc
- b) By identifying and popularising specific ways of motivation of different communities and social groups. Blood donation drives should be evenly spread out throughout the year
- c) Voluntary donations at the Blood banks will continue to be encouraged.

### 6) Recognition

Blood donors should be treated as a valuable resource and deserve courtesy and recognition. The policy therefore, should aim at rewarding and honouring donors and donor organisations through awards, certificates, badges and trophies.

A list of honoured donors and panel donors should be compiled and maintained.

Preference may be provided to blood donors identified by the Blood Bank for queues in hospitals, banks, railway booking centres, etc

### 7) Media

Mass media approach for raising the awareness of the people and sensitising





them towards their participation is the most effective way to mobilise voluntary blood donation. All channels of media therefore, have to be utilized fully through a regular and sustained publicity campaign with a professional approach. To mobilise the media there should be a three pronged approach:

- a) Mass approach: Newspaper advertisements, articles, supplementary/articles in periodicals, journals, house magazines, stickers, posters, hoardings, radio programmes and TV spots should be used extensively.
- b) Group approach: Use of audio visual aids like posters, stickers, folders and hoardings are useful.
- c) Personal approach: Letters, face-to-face discussion, distribution of campaign material, newsletters, bulletins, telephone requests for repeat donation or on-call donations and emergency donations give good results.

## 8) Database of Donors

- a) To maintain a detailed database of names, addresses and contact numbers of blood donor organisations and also data base of blood donors for ready and easy access at the time of need.
- b) To network between the states so as to make data on blood donors available to the State Governments and donor organisations.

## 9) Interaction and sharing of experiences

All efforts should be made to facilitate blood donor organisations and blood donors to interact and share experiences by holding conferences, workshops, seminars, consultative meetings, colloquiums etc. These would help in bringing the organisations together and sharing information and experience on related areas.

## 10) Publications

- a) The State Blood Transfusion Council should bring out a quarterly News Bulletin (bulletins in different regional languages) for wide circulation.
- b) Regular publication of annual, six monthly and quarterly reports should be brought out and distributed for extensive publicity purposes by NACO/SACS.
- c) Publication of working manuals for voluntary workers, guide books for blood bank associates and for teaching personnel in adequate quantities for circulation.

## 11) Policy regarding legislation and regulations

Regulations governing blood transfusion services should encompass the infrastructure facilities including manpower, equipment, space, and testing as well as donor selection procedures. The regulations must be in line with the National Blood Policy.



## 12) Donor Organisers



Individuals involved in organising blood donation campaigns should be provided adequate training in communication skills and motivation. Office infra-structure, telephone, vehicle, staff are essential to make them effective.

All Blood Bank staff should be properly and smartly dressed, polite, sympathetic and trained in public relations.



# Role of Voluntary Blood Donor Organization

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An ideal model for the foundation of a safe blood supply is a committed group of healthy, altruistic blood donors who have been recruited by a well-organized and dynamic blood donor organization



# Role of Voluntary Blood Donor Organization



## A. The importance of a voluntary blood donor organization

An ideal model for the foundation of a safe blood supply is a committed group of healthy, altruistic blood donors who have been recruited by a well-organized and dynamic blood donor organization. Countries that have efficient voluntary blood donor organizations are able to sustain a constant inflow of donors.

The goal of securing a sufficient number of voluntary, non-remunerated blood donors for a regular and safe supply of blood has not yet been achieved. A blood donor organization can be critical in ensuring that there is a sufficient blood supply. This Fact Sheet outlines how to set up and administer such an organization in your community. Who should be involved? A few highly enthusiastic volunteers should be found, preferably at the local level, should be identified to form a motivational body

While medical doctors are experts in their field, they often have little or no experience in marketing, public advocacy, media strategy, fund-raising, or law. It is in these areas that the expertise of volunteers can be especially helpful. The volunteers should be supported by an adequate budget that will cover logistical expenses and also pay for outreach campaigns.

## B. The Role of Volunteers

The role of volunteers within a blood donor organization should include:

- ✿ Maintaining close contact with local blood centres to ascertain the need for donors.
- ✿ Urging lawmakers to enact legislation, where necessary, to prohibit the practice of paid or family replacement donation.
- ✿ Working closely with health authorities to establish the necessary guidelines for blood donation - for instance maintaining the anonymity of both donor and patient - and ensuring that blood centres are sufficiently modern and efficient.



## Voluntary Blood Donation Programme



- Experience shows it is difficult to retain donors if collection facilities are shoddy and blood centre staff inefficient and badly trained.
- Enhancing donors - experience by greeting, guiding and accompanying them throughout their donation experience.
- Helping educate current and potential blood donors about the crucial service they can provide by avoiding high-risk behaviour.
- Urging other voluntary organizations - such as religious bodies, youth organizations, labour unions and sports teams - to support and participate in the movement
- Forming partnerships with curriculum coordinators of schools and colleges so blood donor information becomes part of their educational programmes.

### C. Creating a National Network

When a number of local donor organizations have been established, a national organization of voluntary, unpaid blood donors can be created. The national organization should have a board that would include a medical advisor, a coordinator of information activities, and a legal expert who can advise on legislative matters. The national donor organization should, at an early date, establish a comprehensive database of local blood donor organizations and seek funds "preferably from public sources" for the establishment of a national office. These funds would be used to facilitate:

- Participation in exchange visits and National Donor Federation meetings.
- The purchase of office equipment, computers, and a phone line with a permanent and easily recognized phone-number.
- The production of press packets to target media and regular newsletters for public distribution.
- The purchase of software to create on-line campaign materials and recruitment tools.
- The development of a logo, T-shirts and other recruitment material geared toward attracting new donors.
- Training seminars for new volunteers.

Developing a strong donor culture and efficient donor organizations may take years, considerable patience and work. But the rewards "a network of efficient blood donor organizations and a regular and safe blood supply" are well worth the effort.

### D. Strategies to encourage repeated blood donation.

The National Blood Transfusion Council along with State Blood Transfusion Councils with support from IRCS or NGOs has to carry out extensive work for donor motivation and retention. Below are some of the findings and methods that can help recruit and retain blood donors.



- Session availability encourages donation.
- Donor frequency and donor retention are largely determined by session availability.
- All donors should be processed promptly. If people are forced to wait for unacceptable periods of time they perceive the staff to be inefficient. If beds are empty while people are waiting to donate, negative impressions tend to be reinforced.
- Good treatment of donors promotes retention: donors must be treated as individuals. The manner in which thanks, rewards and recognition are offered has an effect on retention, as does giving more bedside care to first-time donors.
- The aura of a professional and organized "medical" environment is also essential to maintain motivation. Donors tend to be put off if they have unpleasant experiences, such as failed puncture of the vein or bruises or double pricks.
- Continued reinforcement keeps donors involved: Donors should constantly be made to feel good about belonging to a select group of people. They must be educated about the need of blood, as the knowledge that blood donation is essential to prevent deaths is a strong motivation.
- Written communication can be used to inform and educate, but must appear in jargon-free language and not give the perception of wastage of blood through over collection.

Repeat blood donors perceive that there is a constant need for blood and approach blood donation with feelings of duty, responsibility and pride. They tend to feel that the service they receive from staff is professional, caring and appreciative, and are more willing to forgive or ignore any negative experiences they might have had.







# Where Can One Donate Blood

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Voluntary Blood Donation programmes - retention and recruitment are about people and community, about understanding them, capturing their interest and influencing their behaviour.



# Where Can One Donate Blood



Voluntary Blood Donation programmes - retention and recruitment are about people and community, about understanding them, capturing their interest and influencing their behaviour.

Once a blood donor motivator raises awareness, they must motivate and persuade people to donate blood.

One key secret of successful blood donor recruitment is to take blood collection procedure, close to blood donor, on their convenient date and time rather than expecting donor to come to the blood bank. The closer the blood collection site to potential donor, the stronger is likelihood of success. This is possible only through outdoor Blood donation camps.

## LOCATION

A person can donate blood either in a licensed blood bank, blood donation camps or at a blood mobile.

1. Blood Banks - Any person can walk-in voluntarily any time round the clock at their own convenience to donate blood in a licensed blood bank.  
Beside, an In-house camp can be organized in a blood bank on pre-fixed dates with the Organisers and Blood Bank In-Charge.
2. Outdoor camps - pre-fixed venues by Organisers like educational institutions, industrial and commercial houses etc. Blood Banks organize camps in these sites/ premises on a fixed day as decided by SBTC.

Involvement of following partners is essential to hold a blood donation camp

### 1. State Blood Transfusion Council (SBTC)

To provide permission to Blood Bank to hold the camp. Beside regular camps, each SBTC should fix a particular date every month in their state, to organize blood donation camps throughout the districts of their state. This date should be widely publicized to make people aware of the sites of camps on that particular date so that they can visit the camps according to their convenience.

### 2. Blood Banks

Collect blood in the premises, offer refreshments and allow display of relevant banners

### 3. Blood Donor Organisation / NGOs/ Red Ribbon Clubs

To coordinate a planned schedule of camps.





#### 4. Organisers

Providing infrastructure to hold the camp and list of committed healthy blood donors

#### 5. Donor Motivators / Social Workers

For motivating the community and providing supervisory support during the camp.

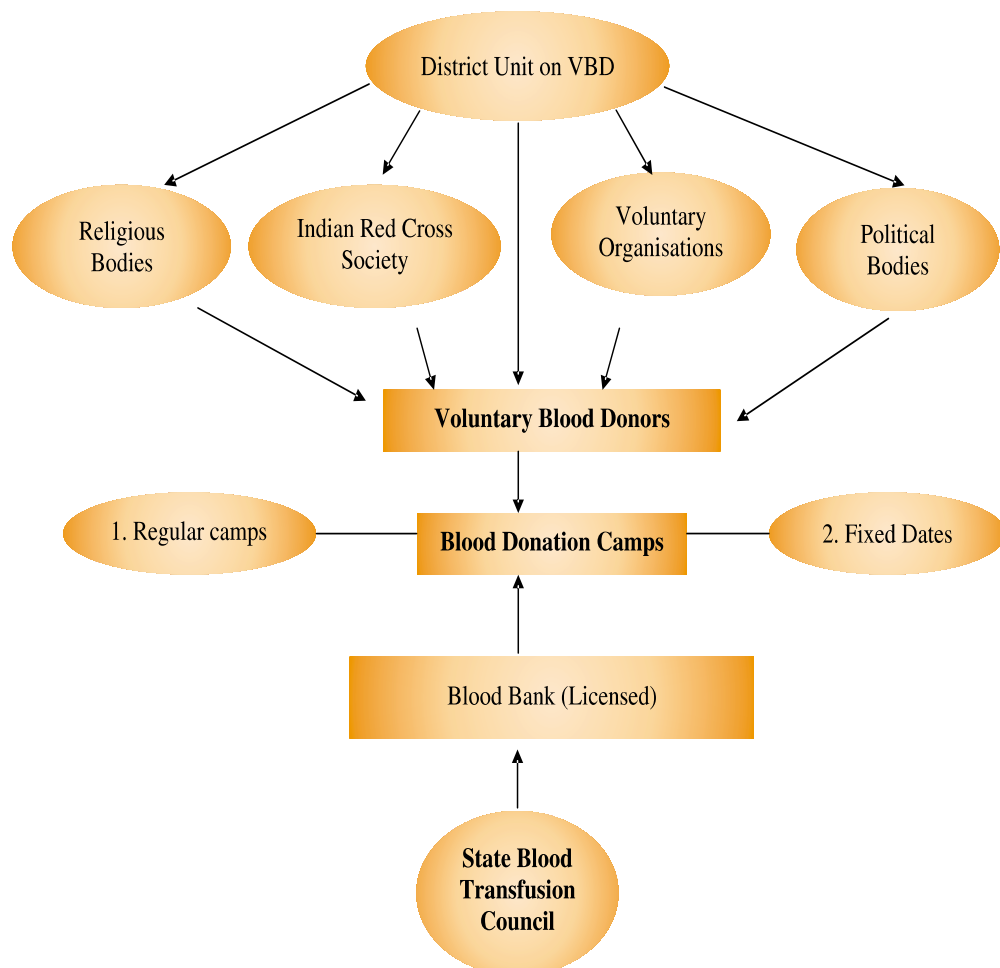
#### 6. Media

Publicity of the camps, preferably with photos.

#### 7. Sponsor

Financial support to meet the expenses of camps and publicity

### Organogram for VBD Programme at district level



## Outdoor Voluntary blood donation camps are organized in three phases

1. Pre-camp
2. Camp
3. Post-camp



### Pre-camp phase

1. The blood bank estimates its requirement of blood units for a particular period.
2. Based on the availability of blood units in their stock, they determine the number of blood units required by them through camps.
3. Blood Banks provide their requirement to the Blood Donor Organisation and request to arrange camps for them.
4. Blood Donor Organisation coordinates with various schools / colleges / universities, industries, religious bodies, etc for organizing camps.
5. Date, time and venue are fixed with the organisers.
6. The number of donations required is discussed with the organisers.
7. Organisers provide a list of committed healthy blood donors
8. Blood Donor Organisation liaises with Blood Bank and the camp gives about a mutually convenient date.
9. Blood Banks takes a prior permission from SBTC.
10. Medical Director of the Blood Bank visit the site of the venue to inspect its suitability for the camp - A checklist may be provided to the organiser
11. Few days before the camp, NGO/ Social Worker/ Donor Motivator can arrange a talk on the importance of voluntary blood donation to the potential donors.
12. IEC materials on the subject should be provided to the organisers to be displayed in their working premises.
13. Media may be approached to give adequate coverage to the camp.
14. Sponsor may be located to provide financial support for media coverage, refreshment, publicity material and to honour blood donors through badges/ pins.
15. Relevant correspondence should be documented for future reference.

### Camp phase

- a) The blood bank team arrives at the venue of camp well before the time given to donors.
- b) Supervise the venue for adequate facilities like space, furniture, heaters/coolers.
- c) Inspect pre-donation, donation and post-donation areas as per standards.
- d) Liaise with the Organiser and Voluntary Donor Organisation.
- e) IEC materials and banners should be displayed everywhere.
- f) Arrange for inauguration of the camp by a celebrity.





- g) The camp should be started on time.
- h) Screening and medical examination of blood donors by Medical personnel.
- i) Over-crowding of the area should be prohibited.
- j) Comfortable and adequate seating arrangement for blood donors.
- k) Bleeding area should have adequate lighting and proper ventilation.
- l) Bleeding procedures should be as per standards.
- m) Provision for donor refreshment
- n) Provision for cold chain maintenance.
- o) Provision for management of donor reactions.
- p) Area should be cordoned off from other persons.
- q) Camp should be completed at the stipulated time.
- r) All the discarded blood bag tubing and needles have to be segregated separately for disposal as per bio-safety protocols and waste management. **THEY SHOULD NEVER BE LEFT UNATTENDED.**
- s) Needles, lancet and syringes should be destroyed with the needle cutter.
- t) The entire area should be cleaned with a disinfectant (sodium hypochlorite - working area and phenyl or bleaching powder- floor) after the camp is over.
- u) The collected units should be kept under cold chain maintenance.
- v) Before leaving the camp premise, Blood Donors and Organisers should be appreciated for their gesture. They should be encouraged to donate again and organize similar camps in future.
- w) The blood bank team should reach their destination in time.

### Post-camp phase

- a) Medical Director must send letters of appreciation to the Organiser for arranging the camp.
- b) They should be encouraged to organize similar camps on a regular basis.
- c) Blood Donors of the camp should receive thank-you letters and blood group cards either individually or through their particular organization.
- d) Constant touch with blood donors should be maintained through birthday cards, anniversary cards, etc.



# Checklist for VBD Camps

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List of staff attending the camp: Medical Officers, Technicians, Nursing staff, Attendants, Driver and Social Workers





# Checklist for Voluntary Blood Donation Camps



Name of the blood bank holding the camp: .....  
Place of the camp: .....  
Date of the camp: .....  
Starting time of camp: .....  
Camp inaugurated by: .....  
Ending time of camp: .....  
Total duration of camp: .....  
Name of the organisation holding the camp: .....  
Name of the organiser with whom correspondence made: .....

## Other Checklists

1. List of staff attending the camp: Medical Officers, Technicians, Nursing staff, Attendants, Driver and Social Workers
2. Availability of staff on the day of camp - their number
3. Attendance of staff
4. Availability of vehicle.
  - a) Check for condition of Tyre/Tube
  - b) Presence of extra tyre/tube
  - c) Check for Diesel/Petrol
  - d) Check for Brakes
4. List of equipment to be carried to camp:
  - a) Sphygmomanometer
  - b) Stethoscope
  - c) Blood Mixer
  - d) Tube sealer
  - e) Donor Weighing machine
  - f) Hemocue / Hemoglobinometer
  - g) Refrigerated boxes to carry blood bags
  - h) Portable donor couches (if available)
  - i) Arm rest, hand sponges



- j) Linen, mattresses, pillows
- k) Artery forceps, scissors, tongue depressor, kidney trays, etc
- l) Needle cutter
- m) Oxygen cylinder
- n) Infusion stand
- o) Bins for collecting infectious and non-infectious waste materials

*Note: Depending on the estimated collection of blood units, the number of each equipment varies.*

- 5. List of Consumables to be carried along with:
  - a) Single/Double/Triple blood bags - 350/450 ml capacity
  - b) Test tubes - large and small
  - c) Donor card with questionnaire forms
  - d) CuSO<sub>4</sub> solution
  - e) Disposables lancets
  - f) Cotton, swabs, band-aids
  - g) Antiseptic solution
  - h) Anti-sera (optional)
  - i) Glass slides, Glass beakers, Pasteur pipettes
  - j) Sodium Hypochlorite solutions
  - k) Emergency medicines
  - l) Markers, donor identification stickers
  - m) Macintosh
  - n) Anti-coagulant solution
  - o) Dry-ice or coolant

*Note: Depending on the estimated collection of blood units, the number/volume/ quantity of each consumable/ disposable varies*

- 6. Donor Certificates and Donor pins
- 7. IEC materials
- 8. Banners
- 9. Accessories to be provided by the organizers
  - a) Furniture (donor beds, stool, chairs, tables, etc)
  - b) AC or cooler or pedestal fans or heaters (as per climatic conditions)
- 10. Refreshment for donors
  - a) Crockery and cutlery
  - b) Provision for drinking water
- 11. Information regarding units collected in the camp.
  - a) No. of blood units collected:
  - b) No. of male donors:
  - c) No. of female donors:
  - d) No. of donors deferred
    - i) *Male:*
    - ii) *Female:*
  - e) No. of donor reactions
    - i) *Male:*
    - ii) *Female:*
  - f) No. of under-collected units:
- 12. Remarks of the Visiting Officers.

# Information, Education, Communication and other Promotional Activities Related to VBD

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Organisational responsibility: Voluntary Organisations, Indian Red Cross Society, National Cadet Corps, National Service Scheme, NGOs, CBOs, Rotary & Lions Club



# Information, Education, Communication and other Promotional Activities Related to VBD



## A. Awareness programmes on Voluntary Blood Donation

The following groups to be included in the awareness programmes.

1. Organisers of Blood Donation camps
2. Youth clubs, organisations
3. Red Ribbon Clubs
4. School / Colleges/ Universities - Students / Teachers / Parents
5. Members of other clubs : Rotary, Lions, JayCee, Giants, Panchayats
6. Communities: state organizations, religious, spiritual

### Financial responsibility

*State & District AIDS Control Societies and State Blood Transfusion Council(SBTC)*

### Organisational responsibility

Voluntary Organisations, Indian Red Cross Society, National Cadet Corps, National Service Scheme, NGOs, CBOs, Rotary & Lions Club

## B. Workshops on "Strategies for Donor recruitment and Donor retention"

The following groups to be included in the workshops.

1. Donor Motivators
2. Social Workers
3. Voluntary Blood Donors





4. Voluntary Organisations / NGOs
5. Blood Bank staff

### Financial responsibility

*State AIDS Control Societies (SACS) and State Blood Transfusion Council (SBTC)*

### Organisational responsibility

Blood Banks, Voluntary Organisations, Indian Red Cross Society, National Cadet Corps, National Service Scheme, NGOs.

## C. Organisation of Competitions with theme of Voluntary Blood Donation

1. Slogan competition
2. Painting competition - different categories
3. Essay competition
4. Debates
5. Extempore speeches
6. Greeting cards design competition
7. Poster competition
8. Song/ Poetry competition

### Financial responsibility

*State AIDS Control Societies and State Blood Transfusion Council*

### Organisational responsibility

Voluntary Organisations, Indian Red Cross Society, National Cadet Corps, National Service Scheme, NGO, School/Colleges/Universities.

## D. Mass Media

### D.1. Print

1. Advertisement in newspapers / magazines, which have large penetration in the urban and rural areas. Messages and quotes by ministers, popular models, celebrities, film stars, sport persons
2. Posters - Innovative posters

### Responsibility

*National AIDS Control Organisation (IEC division), State AIDS Control Societies (Blood Safety and IEC division), National Blood Transfusion Council and State Blood Transfusion Council*

### D.2. Electronic Media

#### D.2.1. Television

National network and Regional stations of Doordarshan. Private channels may also be explored by giving,

1. Video spots by celebrities
2. Flashing short messages



## Voluntary Blood Donation Programme

3. Talk shows
4. Special programmes

### D.2.2. Radio

All India Radio station including Vividh Bharati and FM channels may be involved by giving,

1. Audio spots
2. Jingles
3. Special programmes

Since the community radio has been introduced, it may be used extensively for blood donation and related messages.



### Objectives

1. To promote voluntary blood donation
2. Provide information on all aspects, e.g.,
  - Safe blood available only from licensed blood banks
  - Do not get blood from unknown persons

### Participants

Decision makers, eminent personalities, technical experts, NGOs and popular public personalities to make appeals.

### D.2.3. Outdoor publicity

The following may be put up at strategic location

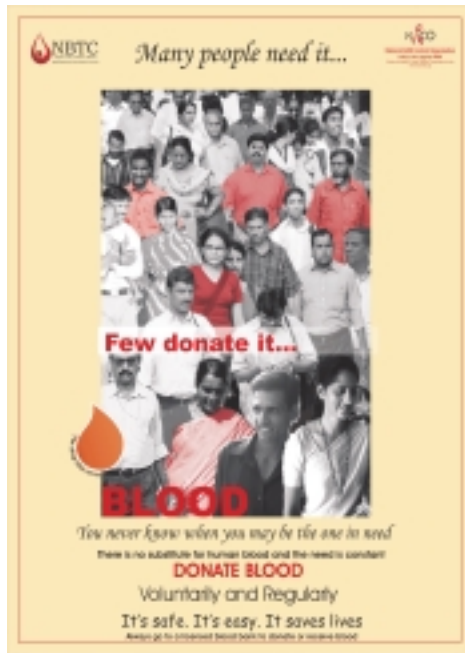
1. Hoardings and Kiosks
2. Wall writings
3. Banners
4. Digital display material

D.2.4. Short films, documentaries may be produced and shown in schools, universities, clubs, theatre halls, and rural areas by Directorate of Field Publicity, Song and Drama division and other organizations.

### Responsibility

*National AIDS Control Organisation (IEC division), State AIDS Control Societies (Blood Safety and IEC division), National Blood Transfusion Council and State Blood Transfusion Council*





Posters on Voluntary Blood Donation





# Pattern of Assistance provided by NACO for organising VBD Camps

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An amount of Rupees 2500/- per camp will be allocated to the State Blood Transfusion Council. An equal contribution will be provided by the States/ U.Ts through their state grants. Thus an amount of Rs. 5000/- should be made available for one camp.



# Pattern of Assistance provided by NACO for organising VBD Camps



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Support for conducting the camp includes:

- a) Donor refreshment
- b) Donor Certificates
- c) Donor badges/pins
- d) Facility for transportation- hiring a vehicle, POL, etc.
- e) DA for staff attending the camps
- f) Banner/Posters/IEC materials

*Note: Some of the above-mentioned activities are occasionally borne by the organisers, like donor refreshment, banners, posters, etc*

Donor certificates, Donor badges, Donor pins can be prepared in bulk by SBTC and distributed to the blood banks or camp organisers.

IEC materials on Voluntary blood donation may be prepared by IEC division of SACS.

A minimum of 75 -100 blood units to be collected from each blood donation camp. (The number of donors can vary as per the site/venue of the camp and their population size)

If the number of donors are less in one camp, few camps can be added together to make the number of units as 75-100 and considered as one camp. The fund can be utilized accordingly.

State Blood Transfusion Council will estimate the number of blood donation camps to be organised throughout the state/U.T. each year, depending on the need assessment of the blood bank attending the camp.



### FORMAT FOR VOLUNTARY BLOOD DONATION CAMP



Sl. No.	Name of the Organization holding the camp	Address of the Organization	Name of the Organizer/ Head Motivator	Telephone / Mobile / Email
Date of Blood Donation camp	No. of Blood Donors expected	Venue of proposed camp	Availability of Infra-structure facilities	IEC material provided to Organizers
Arrival time at Camp venue	Starting time of Camp	No. of Blood Donors enrolled	No. of Blood Donors donated	Male Donors (A)
Female Donors (B)	No. of Blood Donors Deferred	No. of Donor-Reactions	Finishing time of Camp	Donor Certificate provided
Donor Badge/Pin provided	% sero-reactivity for HIV	% sero-reactivity for HBV	% sero-reactivity for HCV	% reactive for Syphilis
Grading of the Camp	Remarks	Signature of Medical Officer		



# Annexure - 1

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NATIONAL BLOOD POLICY



# Annexure - 1



## NATIONAL BLOOD POLICY

Government adopted the National Blood Policy (NBP) in April 2002, which aims to develop a nation-wide system to ensure an adequate and safe blood supply. Government sought to adopt a "comprehensive, efficient and a total quality management approach". The National Blood Transfusion Council is meant to oversee and coordinate the functioning of blood transfusion services. The State / UT Blood Transfusion Councils are seen to be responsible for overall implementation of an organised blood transfusion service (BTS) through a network of regional blood centres and satellite centres, besides other government, Indian Red Cross and NGO run and private blood centres. The establishment of the Drugs Controller General of India (DCGI) at the centre and in the states is to ensure quality and to monitor the functioning of blood banks. The NBP envisages technical training in transfusion medicine, and encourages the use of current technology for blood transfusion services, and even provides for a corpus of fund to be directed towards research and development in the field of transfusion medicine and related technology

The critical issue that plagues blood transfusion services is their fragmented management, a situation not conducive to blood safety. Blood banks and blood transfusion centres operate in total isolation and their standards vary from state to state, city to city and from one centre to the other even in the same city. District hospital blood banks often operate with minimal infrastructure and inadequate / irregular supply of blood. Additionally, and since it may not always be feasible to have large BTS in rural areas, we need to put in place a network of accredited regional blood centres (RBTC), blood banks (BB), inclusive of blood storage centres (SC) which will make screened voluntary blood available closer to the people.

To operationalise the National Blood Policy, 2002, we formulate an Action Plan, presented in this document, which is a dynamic process and needs to be made every 2 years. Implementation of the diverse and wide ranging operational strategies in this Action Plan, calls for a multi-agency response from government, private sector, universities, Indian Council of Medical Research, Medical Council of India, NGOs, Indian Red Cross Society and others.

### Action Plan for different policy objectives:

1. To reiterate firmly the Government's commitment to provide safe and adequate quantity of blood, blood components and blood products.
  - 1.1. Monitoring the Blood Transfusion Service.
  - 1.2. Reorganizing the Blood Transfusion Service towards a coordinated management model.



## Voluntary Blood Donation Programme



2. To make available adequate resources to develop and re-organize the blood transfusion service in the entire country.
3. To make latest technology available for operating the blood transfusion service and ensure it's functioning in an updated manner and to setup a blood product monitoring and evaluation system that ensures quality blood and blood product supply.
  - 3.1. Defining standards.
  - 3.2. Introducing accreditation of blood banks.
4. To launch extensive awareness programmes for donor information, education, motivation, recruitment and retention in order to ensure adequate availability of safe blood.
  - 4.1 Sourcing the total requirement of blood through voluntary blood donation.
  - 4.2 Increasing supply of screened voluntary blood.
  - 4.3 Increasing access to screened voluntary blood.
  - 4.4 Revealing the Transfusion Transmissible Infections (TTI) status of the individual.
5. To encourage appropriate clinical use of blood and blood products.
6. To strengthen manpower through Human Resource Development.
7. To encourage Research & Development in the field of Transfusion Medicine and related technology.
8. To take adequate regulatory and legislative steps for monitoring and evaluation of blood transfusion services and to take steps to eliminate profiteering in blood banks.





# Annexure - 2

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Blood Bank as Basic Unit of Function



# Annexure - 2



## BLOOD BANK AS BASIC UNIT OF FUNCTION

Blood Bank/ Blood Centre is defined as a building or location specifically dedicated to blood collection, component production, testing, storage, distribution, etc. In a blood centre, the space allocation, type and number of equipment, amount of consumables and the number and category of staff will vary with the quantum of blood collected and processed per annum. The scope of the centre will also depend on the size, local requirements and modus operandi.

Large hospitals with attached medical colleges or specialized medical institutions should have centres with all facilities to ensure adequate and efficient provision of blood. The small hospital-based centres can receive their blood supplies from regional or larger hospital centres in the area and may be provided only basic laboratory facilities for controlled storage of whole blood and blood components.

Basic functions of a blood transfusion centre are:

- ✿ Organizing the service
- ✿ Recruitment of donors
- ✿ Collection, processing, storage and distribution of blood and blood components
- ✿ Laboratory investigations
- ✿ Participation in clinical use of blood and blood components
- ✿ Teaching and training
- ✿ Research and development

Organization of a blood centre involves designing the premises, procurement of equipment, reagents and consumables, personnel management and continuing medical education. The blood centres should develop an interface with those involved in clinical transfusion practice. Adherence to bio-safety precaution and provision of good working environment should also form an essential part of the organization of a blood centre.

Collection of blood can be done either at a static donor session at the blood centre or at outdoor mobile donor sessions. In addition to guidelines for indoor collection of blood, standard operating procedures should also be provided for outdoor donor sessions, which should be monitored. Outdoor collections organized at railway platforms, in open grounds and other places with unclean environment, may lead to contamination of blood and should therefore be discouraged.





# Annexure - 3

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Blood Donor Questionnaire & Consent Form



# Annexure III

## Blood Donor Questionnaire & Consent Form



Name and address of the Blood Bank

License No. :

Blood Unit No. :

### CONFIDENTIAL

[✓] Tick wherever applicable

*Pl. answers the following questions correctly. This will help to protect you and the patient who receives your blood.*

Name : \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_ Father's/Husband's Name : \_\_\_\_\_

Occupation \_\_\_\_\_ Organization: \_\_\_\_\_

Address for communication: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile No. : \_\_\_\_\_

Would you like us to call you on your mobile:  Yes  No

Fax No. (if any) : \_\_\_\_\_ Email (if any): \_\_\_\_\_

Have you donated previously:  Yes  No

If yes, on how many occasions: \_\_\_\_\_ When last: \_\_\_\_\_

Your blood group: \_\_\_\_\_ Time of last meal: \_\_\_\_\_

Did you have any discomfort during/after donation?  Yes  No





1. Do you feel well today?: Yes No
2. Did you have something to eat in the last 4 hours?: Yes No
3. Did you sleep well last night?: Yes No
4. Have you any reason to believe that you may be infected: Yes No  
by either Hepatitis, Malaria, HIV/AIDS, and/or venereal disease?:
5. In the last 6 months have you had any history of the following:
- Unexplained weight loss
  - Repeated Diarrhoea
  - Swollen glands
  - Continuous low-grade fever
6. In the last 6 months have you had any:-
- Tattooing
  - Ear Piercing
  - Dental Extraction
7. Do you suffer from or have suffered from any of the following diseases?
- Heart Disease                       Lung disease                       Kidney Disease
  - Cancer/Malignant Disease                       Epilepsy
  - Diabetes                       Tuberculosis
  - Abnormal bleeding tendency                       Hepatitis B/C
  - Allergic Disease                       Jaundice
  - Sexually Trans. Diseases                       Malaria
  - Typhoid (last 1 yr.)                       Fainting spells
- Are you taking or have taken any of these in the past 72 hours?
- Antibiotics                       Aspirin                       Alcohol
  - Steroids                       Vaccinations
  - Dog Bite/Rabies vaccine (1 yr.)
8. Is there any history of surgery or blood transfusion in the past 6 months?
- Major Surgery                       Minor Surgery                       Blood Transfusion
9. For women donors,
- Are you pregnant  Yes  No
- Have you had an abortion in the last 3 months  Yes  No
- Do you have a child less than one year old?  Yes  No
- Is the child still breast-feeding?  Yes  No
- Are you having your periods today?  Yes  No





# Voluntary Blood Donation Programme

10. Would you like to be informed about any abnormal test result at the address furnished by you?

- Yes                       No



11. Have you read and understood all the information presented and answered all the questions truthfully, as any incorrect statement or concealment may affect your health or may harm the recipient.

- Yes                       No

I understand that

(a) blood donation is a totally voluntary act and no inducement or remuneration has been offered

(b) donation of blood/components is a medical procedure and that by donating voluntarily, I accept the risk associated with this procedure.

(c) my blood will be tested for Hepatitis B, Hepatitis C, Malarial parasite, HIV/AIDs and venereal diseases in addition to any other screening tests required to ensure blood safety

I prohibit any information provided by me or about my donation to be disclosed to any individual or government agency without my prior permission.

Date : \_\_\_\_\_ Time : \_\_\_\_\_ Donor's signature: \_\_\_\_\_

General Physical Examination:

Weight \_\_\_\_\_ Pulse \_\_\_\_\_ Hb \_\_\_\_\_

BP \_\_\_\_\_ Temperature \_\_\_\_\_

Accept                       Defer                       Reason \_\_\_\_\_

Signature of Medical Officer : \_\_\_\_\_

Blood safety begins with a Healthy Donor





# Annexure - 4

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Visuals on Voluntary Blood Donation Camps



# Annexure - 4



## VISUALS ON VOLUNTARY BLOOD DONATION CAMPS



Female Voluntary Blood Donor



Voluntary Blood Donation Drive





Voluntary Blood Donation in a Mobile Van



Rally on Voluntary Blood Donation

# Annexure - 5

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TARGET FOR NACP-III ON VOLUNTARY BLOOD DONATION





# Annexure - 5



## TARGET FOR NACP-III ON VOLUNTARY BLOOD DONATION

Sl. No.	Name of the State/U.T	VBD		Blood Collection	
		% VBD in NACP-II	Target VBD in NACP-III	Existing Blood collection (Annual)	Blood collection targets for NACP-III
1	Andhra Pradesh	50.5	90	373105	662000
2	A&N Islands	74.4	100	3906	4000
3	Arunachal Pradesh	90.3	100	1486	4000
4	Assam	43.9	90	71178	166000
5	Bihar	22.8	90	47622	329000
6	Chandigarh	72.3	100	54138	9000
7	Chattisgarh	28.6	90	27945	208000
8	D & N Haveli	75	100	2218	2500
9	Daman & Diu	67	100	550	1500
10	Delhi	24	90	292348	400000
11	Goa	51.1	90	8276	13000
12	Gujarat	65	100	615499	620000
13	Haryana	31.3	90	125229	211000
14	Himachal Pradesh	63.3	100	15390	60000
15	Jammu & Kashmir	20.9	90	38778	101000
16	Jharkhand	25.5	90	60672	169000
17	Karnataka	51.7	90	356656	550000
18	Kerala	40.3	90	161036	317000
19	Lakshadweep	0.0	100	0	1000
20	Madhya Pradesh	40.9	90	174606	603000
21	Maharashtra	84.6	100	394868	968000
22	Manipur	7.9	90	14731	21000
23	Meghalaya	6.3	90	3174	23000
24	Mizoram	43.5	90	12241	15000
25	Nagaland	35.8	90	16720	15000
26	Orissa	55	90	156193	368000
27	Pondicherry	40.8	90	12823	15000
28	Punjab	15.1	90	203325	243000
29	Rajasthan	21.9	90	153120	465000
30	Sikkim	64	90	1218	5000
31	Tamilnadu	72.7	100	264616	624000
32	Tripura	68.8	100	17174	30000
33	Uttarakhand	24.8	90	311818	315000
34	Uttar Pradesh	13.5	90	29271	1661000
35	West Bengal	86.3	100	510465	801000
	TOTAL			4532395	10000000







**National AIDS Control Organisation**  
Ministry of Health and Family Welfare  
Government of India  
New Delhi

