

2023 #27

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## Are Self-identity and Psychological Ownership Drivers of Blood Donor Retention?

Researchers in *Vox Sanguinis* [hypothesized](#) that “increasing a [blood] donors’ subjective sense of psychological ownership over a blood collection agency (BCA) may provide a potential novel avenue to strengthen donor identity.” Their study was rooted in the premise that new or first-time donors are “primarily motivated by external factors such as social pressure.” However, as these individuals continue to donate blood regularly, they transition to repeat or regular blood donors “who develop a role identity (a self-concept based on a performed role) from their increasing familiarity with blood donation. With repeated donations, this donor role identity is validated” becoming a self-identity.”

The study evaluated the perception of the role of psychological ownership on donor retention by recruiting participants online who were “Australian residents, aged 18+, who believed themselves eligible to donate blood. [Those] recruited through [a platform for online researchers called Prolific] were compensated at an average rate of £6.00 per hour. Participants [recruited] through an online blood donor community page (not affiliated with a BCA) could enter a prize draw to win one of four \$50 gift cards.” A total of “255 donors recruited through Prolific (n = 175) and the community group (n = 80)...Eighty-seven individuals who had not attended a BCA in the past two years (lapsed donors) and 126 participants who had never attended a blood collection site before (non-donors) [were included]. Lapsed donors had made an average of 6.10 (SD = 7.02) donations, with 72.41 percent having donated whole blood and 5.75 percent having donated plasma.”

The researchers explained that “[p]articipants’ experience of psychological ownership over a BCA and blood donor self-identity were assessed using adapted versions of established measures...All responses were made on a seven-point Likert scale from one (strongly disagree) to seven (strongly agree).” The authors discovered that “psychological ownership, self-identity and intention were all significantly positively correlated. Analysis of the associations between psychological ownership and other measured constructs revealed that psychological ownership was distinct from other variables typically associated with donor identity...Participants recruited through the blood donor community group were label[e]d ‘committed donors,’ while donors recruited through Prolific were label[e]d ‘donors’...[A] multivariate analysis of variance was conducted with donor status (committed donor, donor, non-donor, and lapsed donor) as the predictor and psychological ownership, self-identity and intention as dependent variables...Consistent with our theoretical argument, psychological ownership as well as self-identity and intention differed by

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Are Self-identity and Psychological Ownership Drivers of Donor Retention? (continued from page 1)

donor category. Specifically, non-donors experienced the least psychological ownership followed by lapsed donors, donors, and then committed donors. These key findings replicated when donor participants were grouped based on past donation behavior (<10 total donations performed, >10 total donations performed).”

The study concluded that the findings “support the inclusion of psychological ownership within a model of sustained blood donation behavior. Interventions based on psychological ownership of a BCA have the potential to foster donor self-identity and unlock the key to blood donor retention. Psychological ownership-based interventions should now be tested with the end goal of ensuring a stable donor panel and sufficient blood supply.”

**Citation:** Edwards, Abigail, Masser, B., and Barlow, F. “[Psychological ownership and identity motives in blood donation.](#)” *Vox Sanguinis*. 2023. ♦

**WORD IN WASHINGTON**



The National Institutes of Health’s (NIH) [announced](#) that Jeanne M. Marrazzo, MD has been named director of NIH’s National Institute of Allergy and Infectious Diseases (NIAID). She currently serves as the director of the Division of Infectious Diseases at the University of Alabama at Birmingham. “Dr. Marrazzo brings a wealth of leadership experience from leading international clinical trials and translational research, managing a complex organizational budget that includes research funding and mentoring trainees in all stages of professional development,” said Lawrence A. Tabak, DDS, PhD, acting director of

NIH, in a news release. “I look forward to welcoming Dr. Marrazzo to the NIH leadership team. I also want to extend my gratitude to Hugh Auchincloss, Jr., MD, for serving as acting director of NIAID after long-time director Anthony S. Fauci, MD, stepped down in December 2022.” According to the agency news release, “Dr. Marrazzo is a [f]ellow of the American College of Physicians and of the Infectious Diseases Society of America and is board certified in infectious disease. She earned her bachelor’s in biology from Harvard University, Cambridge, Massachusetts, her medical degree from Thomas Jefferson University, Philadelphia, and a Master of Public Health in Epidemiology from the University of Washington, Seattle. Dr. Marrazzo also has chaired the American Board of Internal Medicine (ABIM) Council, and the ABIM Infectious Disease Specialty Board.”

(Source: NIH [News Release](#), 8/2/23) ♦

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ABC advocates for and advances policies that promote the role of independent blood centers in providing life-saving blood products and recognizes the continuous need for a safe and robust blood supply. ABC exists to advocate for laws and regulations recognizing the essential role that independent blood centers play in the health care system; promote partnerships, policies, and programs that increase awareness about the need for blood donation; and serve as a thought leader in the advancement of evidence-based medical and scientific solutions related to health and safety.

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## RESEARCH IN BRIEF

**A Donor's Impact on Cold-Stored Platelets.** The aim of a [study](#) in *Vox Sanguinis* was “to assess the impact of donor variation on cold-stored platelets (CSP) and room temperature-stored [platelets] (RTP).” The authors explained that “[d]ouble platelet donations (n=10) were collected from regular male apheresis donors...Each platelet was split equally into two bags, stored in 100 percent plasma, and randomly assigned to non-agitated CSP or agitated RTP...The quality and function of the platelets on days 1, 4 and 8 (expiry) were assessed.” The researchers noted that “[a] significant drop in platelet concentration was observed in CSP following the first day of storage...A significant increase in the percentage of platelets exhibiting activation and apoptotic markers was observed in CSP, with higher levels of expression of both CD62P and Annexin V-PS ( $p < 0.05$ )...The mean donor age was  $49 \pm 9$  years (range 37–63 years); age only had a marginal correlation  $r = -0.641$  ( $p = 0.046$ ) with carbon dioxide ( $PCO_2$ ) in CSP on day four...The donors had an average body mass index (BMI) of  $29.5 \pm 3.8$  and were categorized in two groups, BMI  $\leq 29$  (n=6) and BMI  $>29$  (n=4).” The study found that “[a] strong correlation in CSP was observed between BMI and platelets concentration on day four ( $r=-0.674$ ;  $p=0.033$ ) and day eight ( $r=-0.695$ ;  $p=0.026$ ) of storage, respectively...Overall, the higher the donor BMI, the lower the platelet concentration in CSP, and donors with BMI  $>29$  had the lowest platelet concentration at the end of storage ( $p < 0.05$ )...CSP from donors with a BMI  $>29$  had the lowest activation response to the thrombin agonist at the end of storage ( $p < 0.05$ )...There was increased oxygen concentration in RTP, whereas levels remained unchanged over storage at 4 degrees Celsius. This correlates with the significantly higher glucose concentration in CSP compared with RTP ( $p < 0.05$ ), indicating decreased metabolic activity.” The authors concluded that “[b]lood products are inherently variable and there is limited data on the specific donor-related factors influencing the optimal storage of platelets following donation...The findings support BMI as a possible factor impacting the quality of CSP.”

**Citation:** Lorusso, A., Croxon, H., Faherty-O'Donnell, S., Field, S., Fitzpatrick, Á., Farrelly, A., *et al.* [The impact of donor biological variation on the quality and function of cold-stored platelets.](#) *Vox Sang.* 2023.

Contributed by Richard Gammon, MD, Medical Director at OneBlood 

### Upcoming ABC Webinars & Virtual Events – Don't Miss Out!

- **ABC Scientific, Medical, and Technical Committee Journal Club Webinar** – Aug. 11. More information available to ABC Members, including a link to registration, in [MCN 23-063](#).
- **ADRP: The Association for Blood Donor Professionals Spanish Donor Recruitment Webinar** – Aug 30. [Registration](#) is open. More information available [here](#).
- **ADRP Masterclass: Change Is Good – The Journey of Donor Eligibility** – Sept. 20-21. [Registration](#) is open. More information available [here](#).





**America's Blood Centers®**  
It's About *Life*.

## INSIDE ABC

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

### **UPCOMING ADRP Webinar: Spanish Donor Recruitment**

[Register](#) today for the ADRP [webinar](#) titled “Spanish Donor Recruitment.” This webinar will take place Wednesday, August 30<sup>th</sup> at 1 p.m. EDT and attendees will hear how their peers use creative marketing, donor service training, and translation services to create better experiences for their Spanish-speaking donors. Speakers include:

- Ramona Moise, director of Marketing at Gulf Coast Regional Blood Center;
- Liz Parker, training manager, Donor Services at Versiti; and
- Clinton McCoy, director of Mobile Donor Recruitment and Regional Operations at Carter Blood-Care.

The webinar is free for ADRP members. Non-members may register for \$25 and \$50 for industry partners. Please contact [us](#) with questions.

(Source: ADRP [Announcement](#), 8/2/23)

### **July Blood Bulletin Available**

America's Blood Centers (ABC) has published the July 2023 edition of the [Blood Bulletin](#). The issue, titled “Individual Donor Risk Assessment and Blood Safety,” is available in [PDF](#) or [MS Word](#). The article was written by Louis Katz, MD, Chief Medical Officer Emeritus at ImpactLife; Daniela Hermelin, MD, Chief Medical Officer at ImpactLife; Kip Kuttner, DO, Vice President and Medical Director at Miller-Keystone Blood Center; Richard Gammon, MD, Medical Director at OneBlood; Debra Smith, MD, PhD, Medical Director at Carter BloodCare; Courtney Hopkins, DO, Senior Medical Officer at Vitalant; Nancy Van Buren, MD, Medical Director at Innovative Blood Resources and Community Blood Center of Kansas City, divisions of New York Blood Center; and Jed Gorlin, MD, MBA, Chief Medical Officer at America's Blood Centers. [Blood Bulletin](#) is a quarterly publication reviewed and edited by ABC's Scientific, Medical, and Technical (SMT) Publications Committee. An archive of Blood Bulletin issues prior to 2022 are available exclusively to ABC members [here](#).

(Source: [MCN 23-066](#), 7/17/23)

### **August SMT Journal Club Webinar Articles Announced**

The ABC Scientific, Medical, and Technical (SMT) Journal Club Webinar will take place on August 11th at 1 p.m. EDT and feature the articles below:

- [Comparison of platelet quality and function across apheresis collection platforms](#) (*Transfusion*);
- [Emergency transfusion with whole blood versus packed red blood cells: A study of 1400 patients](#) (*Transfusion*); and
- [Severe complications in a 25-year-old male after brown recluse spider bite treated by therapeutic plasma exchange: A case report and review of other case studies](#) (*Journal of Clinical Apheresis*).

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Additional details including a registration link to sign-up for the webinar are now available to ABC members in [MCN 23-063](#). Please contact [us](#) with questions or to receive a copy of the MCN.

(Source: [MCN 23-063](#), 7/11/23)

## Register Today for the ADRP Masterclass: Change is Good — The Journey of Donor Eligibility

Registration is open for [ADRP's Masterclass](#), “Change is Good — The Journey of Donor Eligibility,” taking place September 20<sup>th</sup>-21<sup>st</sup>. While navigating changes in donor eligibility can feel overwhelming at times, this virtual conference is designed to equip industry professionals with invaluable insights, strategies, and best practices to confidently address such challenges and turn them into opportunities. This Masterclass is about more than just implementing a single deferral change. Instead, attendees will hear from award-winning leaders from outside the blood community. These speakers will share insights into building a culture that helps your blood center be more adaptable to future changes, tips for managing challenging conversations on and offline, and cutting-edge strategies being embraced across other industries so they can thrive in a challenging environment. Participants will also get the latest industry data, hear best practices, and be a part of thought-provoking conversations with industry peers. 💧

## INFECTIOUS DISEASES UPDATE

### DENGUE

The Centers for Disease Control and Prevention’s (CDC) *Morbidity and Mortality Weekly Report (MMWR)* recently [published](#) a report titled “Travel-Associated Dengue Cases — United States, 2010–2021.” The authors explained that “a total of 7,528 confirmed or probable travel-associated dengue cases were reported to ArboNET” from 2010-21. “Among these, 1,474 (20 percent) occurred in 2019, representing a 168 percent increase over the annual average of 550 cases during 2010–2018 and 2020–2021, and a 61 percent increase over the 913 cases reported in 2016, the year with the second highest number of cases. The lowest annual number of cases reported (205) was in 2021, when travel patterns were substantially altered because of the COVID-19 pandemic.” The report noted that “[d]uring the entire period, most cases (90 percent) were associated with travel outside U.S. states or territories. The most frequently visited region among travel-associated cases in 2019 was the Caribbean (39 percent), followed by Asia (27 percent) and North America (14 percent)...Travelers returning from the top 10 countries of acquisition during 2010–2021 accounted for more than two thirds (69 percent) of cases reporting an international travel history.” Dengue is “the leading cause” of arboviral disease globally and can lead to death without treatment. Currently, “dengue vaccine is recommended for routine use in children and adolescents aged 9–16 years with laboratory-confirmed previous dengue virus infection who live in areas of the U.S. where dengue is endemic. [V]accination is not recommended for travelers. Dengue [can be] prevented while traveling by taking measures to prevent mosquito bites, including using Environmental Protection Agency–registered insect repellent, wearing protective clothing, and staying in lodging that has air conditioning or window screens.”

**Citation:** Wong, J., Rivera, A., Volkman, H. “[Travel- associated dengue cases — United States, 2010–2021.](#)” *MMWR*. 2023. 💧





## MEMBER NEWS

**San Diego Blood Bank** has [joined](#) the Blood Emergency Readiness Corps (BERC). “As we work to protect our region’s blood supply, we now have a safety net in the event of a mass trauma incident,” said Doug Morton, San Diego Blood Bank Chief Executive Officer in a news release. “We are also better prepared to serve the public – nationally if need be – to assist in the event of a mass trauma outside of our area.” BERC formed in 2021. It is a “a cooperative of currently 36 blood centers in more than 40 states that have committed to collecting extra blood units on a rotating, ‘on call’ schedule. The extra blood products will be held in reserve for any critical-need scenario, like a mass shooting, natural disaster, or any other large crisis,” according to the news release. “Since its formation in September of 2021, BERC has already responded to three mass casualty events in Tennessee, Kentucky, and Michigan.”

(Source: San Diego Blood Bank [News Release](#), 8/2/23) ◆

## GLOBAL NEWS

**The United Kingdom’s (UK) National Institute for Health and Care Excellence (NICE) [published](#) draft guidance recommending against the use of CSL Behring’s gene therapy, Hemgenix®, by England’s National Health Service (NHS) to treat adults with hemophilia B.** The draft guidance states that the recommendation “is not intended to affect treatment with [Hemgenix®] that was started in the NHS before this guidance was published. People having treatment outside this recommendation may continue without change to the funding arrangements in place for them before this guidance was published, until they and their NHS clinician consider it appropriate to stop.” NICE explained in the draft guidance that “there is not enough evidence on how well it works in the long term. An indirect comparison of etranacogene dezaparvovec with factor IX prophylaxis (FIX) prophylaxis treatments suggests that it improves bleeding outcomes. But there are problems with this evidence, such as differences between studies in the methods used, and the definition and measurement of bleeding outcomes. So, the indirect comparison results are highly uncertain. The cost-effectiveness estimates for etranacogene dezaparvovec are uncertain because of uncertainties in the long-term clinical evidence and some of the assumptions used to estimate cost effectiveness. They are also above what NICE considers an acceptable use of NHS resources.” Hemgenix® was [approved](#) by the U.S. Food and Drug Administration (FDA) in June. It was also approved by the European Commission (EC) for the European Union and European Economic Area, and was granted conditional marketing authorization by the United Kingdom’s Medicines and Healthcare product Regulatory Agency. Another meeting to reassess the recommendation based on stakeholder comments and additional data/evidence is scheduled for September. The final guidance is expected in November.

(Source: NICE [Draft Guidance](#), 8/2/23) ◆

## COMPANY NEWS

The U.S. Food and Drug Administration (FDA) has [cleared](#) a **Terumo Blood and Cell Technologies** (Terumo BCT) whole blood automation system “that processes whole blood into platelets and other components in a single centrifugation cycle.” According to a Terumo BCT news release, the Reveos system has been deployed in 52 countries and is the first whole blood automation system to receive FDA clearance that processes whole blood into platelets, plasma, and red blood cell (RBC) components in a single centrifugation cycle. “Reveos has a long-standing track record for helping blood centers globally meet the critical needs of patients while creating efficiencies in their operations,” noted Antoinette Gawin, president and chief executive officer of Terumo BCT, in the news release.

(Source: Terumo BCT [News Release](#), 8/1/23) ◆



## CALENDAR

**Note to subscribers:** Submissions for a free listing in this calendar (published weekly) are welcome. Send information to [newsletter@americasblood.org](mailto:newsletter@americasblood.org). (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

### 2023

Aug. 11. **ABC Scientific, Medical, and Technical Committee Journal Club Webinar.** More information available to ABC Members, including a link to registration, in [MCN 23-063](#).

Aug. 14-16. **National Heart, Lung, and Blood Institute (NHLBI) Annual Sickle Cell Disease Research Meeting (Hybrid).** [Registration](#) is open. More information available [here](#).

Aug 30. **ADRP Webinar: Spanish Donor Recruitment.** [Registration](#) is open. More information available [here](#).

Aug. 30. **U.S. Food and Drug Administration's (FDA) Center for Biologics Evaluation and Research (CBER) Officer of Therapeutic Products (OTP) Town Hall: Nonclinical Assessment of Cell and Gene Therapy Products (Virtual).** More information available [here](#).

Sept. 7-9. **European Blood Alliance European Conference on Donor Health and Management. Vienna, Austria.** [Registration](#) is open. More information available [here](#).

Sept. 17-20. **American Association of Tissue Banks Annual Meeting, National Harbor, Md.** [Registration](#) is open. More information available [here](#).

Sept. 20-21. **ADRP Masterclass: Change Is Good – The Journey of Donor Eligibility (Virtual).** [Registration](#) is open. More information available [here](#).

Sept. 20. **The Department of Transfusion Medicine, National Institutes of Health (NIH) Clinical Center, NIH, and the American Red Cross 42<sup>nd</sup> Annual Immunohematology and Blood Transfusion Symposium.** [Registration](#) is open. More information available [here](#).

Oct. 9-11. **Advanced Medical Technology Association (AdvaMed) The MedTech Conference, Anaheim, Calif.** [Registration](#) is open. More information available [here](#).

Oct. 14-17. **AABB Annual Meeting, Nashville, Tenn.** [Registration](#) is open. More information available [here](#).

Oct. 18-20. **American Society for Clinical Pathology (ASCP), Long Beach, Calif.** More information available [here](#).

Nov. 18-21. **ISBT Regional Congress, Cape Town, South Africa.** [Registration](#) is open. More information available [here](#).

### 2024

Feb.7-8. **International Plasma and Fractionation Association & EBA Symposium on Plasma Collection and Supply. Leiden, Netherlands.** More information available [here](#).

Mar. 4-6. **ABC Annual Meeting, Arlington, Va.** More information available [here](#).

May 15-17. **2024 ADRP Annual Conference, St. Louis, Mo.** More information available [here](#). ♦

## CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, e-mail: [newsletter@americasblood.org](mailto:newsletter@americasblood.org)

## POSITIONS

**Director, Public Relations and Marketing.** Mississippi Blood Services (MBS) is seeking the right candidate for the highly visible position of Director of Public Relations & Marketing. We're looking for an individual with flexible skills who can oversee our Communications and Public Relations efforts to ensure we are able to collect and distribute the much-needed resource of blood donations! As the face of the company, the ideal candidate will be responsible for all aspects of Public Relations and Marketing, which includes recruitment of blood drives and telerecruitment. This individual will work with Public Relations, Marketing Representatives, Telerecruitment manager, and other managers to coordinate and organize ample daily collections of whole blood, double red cells, apheresis platelets, and plasma collections for the organization. They will also work in conjunction with other MBS management to set strategic goals and objectives for the company. Must have a bachelor's degree (BA) from a four-year college or university; three to five years' related experience; or equivalent combination of education and experience. Visit [www.msblood.com](http://www.msblood.com) to apply online.

**Fairbanks Center Manager.** The Blood Bank of Alaska (BBA) is looking for a Fairbanks Center Manager. The Fairbanks Center Manager is responsible for oversight and coordination of the daily operational collection functions and related product processing workflow for the BBAF Center. Directs the activities of such team to facilitate reaching and exceeding goal. Oversight and partnership with BBA management team in planning, program formulation, and technical decision making with particular reference to the role, functions, and operation of the blood bank's technical areas. This position is full-time exempt. The Blood Bank of Alaska offers competitive wages and an exceptional benefits plan. We offer medical, dental, vision, life, and short/long term disability programs to qualified employees. Educational assistance, paid annual leave and holidays, and a 401 (k) program are also available. The Blood Bank is an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, age, disability, marital/veteran status, or any other legally protected status. Interested candidates please apply online at <https://blood-bankofalaska.apscareerportal.com>.

**Director of Hospital Services and Manufacturing.** The Blood Bank of Alaska is looking for a Director of Hospital Services and Manufacturing. The Director of Hospital Services and Manufacturing is responsible for ensuring alignment of teams with organizational goals and compliance with regulatory guidelines. Participates as a member of the blood bank's management team in planning, program formulation and decision making with reference to the role, functions and technical support of the manufacturing and distribution of blood products. Fosters and

enhances customer hospital relations. This person ensures a dedicated focus on the production and distribution of quality products in a timely manner while providing the highest level of customer service. Also ensures all procedures are followed and promotes a positive work environment. This position is full-time exempt. The Blood Bank of Alaska offers competitive wages and an exceptional benefits plan. We offer medical, dental, vision, life, and short/long term disability programs to qualified employees. Educational assistance, paid annual leave and holidays and a 401 (k) program are also available. A \$1500 retention bonus will be paid after one year of service with the Blood Bank of Alaska. The Blood Bank is an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, age, disability, marital/veteran status, or any other legally protected status. Interested candidates please apply online at <https://blood-bankofalaska.apscareerportal.com>.

**Quality Systems Specialist and Technical Writer.** The Blood Bank of Alaska is looking for a Quality Systems Specialist and Technical Writer. The person in this role is responsible for promoting organizational compliance with accrediting agency, state, and federal regulations. Managing the Blood Bank of Alaska's occurrence program which includes performing investigations for occurrences. The Quality Systems Specialist and Technical Writer writes, revises, edits, and approves Standard Operating Procedures (SOPs) along with assisting document owners in writing and revising SOPs. Assists in the management of the Blood Bank of Alaska's document control process and ensures consistency across departments when policies or procedures change. This position is full-time exempt. The Blood Bank of Alaska offers competitive wages and an exceptional benefits plan. We offer medical, dental, vision, life, and short/long term disability programs to qualified employees. Educational assistance, paid annual leave and holidays, and a 401 (k) program are also available. A \$1,500 retention bonus will be paid after one year of service with the Blood Bank of Alaska. The Blood Bank is an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, age, disability, marital/veteran status, or any other legally protected status. Interested candidates please apply online at <https://bloodbankofalaska.apscareerportal.com>.

**Laboratory Services Manager.** The Blood Bank of Alaska is looking for a Laboratory Services Manager. Under the general direction of the Director of Laboratory Services, this person is responsible for oversight of daily laboratory operations ensuring that laboratory product QC and donor test results meet CLIA, AABB and FDA compliance standards/regulations for the manufacture of blood products. The Laboratory Services Manager is also

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**POSITIONS** (continued from page 8)

responsible for oversight of laboratory personnel. This position is full-time exempt. The Blood Bank of Alaska offers competitive wages and an exceptional benefits plan. We offer medical, dental, vision, life, and short/long term disability programs to qualified employees. Educational assistance, paid annual leave, and holidays and a 401 (k) program are also available. A \$1,500 retention bonus will be paid after one year of service with the Blood Bank of Alaska. The Blood Bank is an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, age, disability, marital/veteran status, or any other legally protected status. Interested candidates please apply online at <https://bloodbankofalaska.apscareerportal.com>.

**Quality Systems Director.** Rock River Valley Blood Center, based in Rockford IL, is looking for a Quality Systems Director to oversee the strategic planning, development and execution of all quality systems and process improvement initiatives center wide. This includes business operations relating to blood collection, testing, manufacturing, distribution, document control, customer service, safety, risk management, training, internal and external audits/inspections. The position is responsible for ensuring the organization is in full compliance with all applicable federal and state regulations and professional contract requirements. A successful candidate is a self-starter who will lead and champion all quality initiatives from start to finish, taking an influential, collaborative, team-oriented and business friendly approach. Must possess strong leadership skills with advanced knowledge and business acumen in quality system concepts and process improvement. Must have advanced analytical and problem-solving skills; exceptional attention to detail; ability to prioritize tasks; effective communication skills both verbally and in writing. Strong skills in Microsoft Office applications. Qualifications include: Five plus years' experience in a progressive quality systems role within a highly regulated environment, three plus years supervisory and leadership experience, previous experience interpreting and implementing regulatory/accrediting standards, Bachelor's degree in health science, quality management or related field. M.T. or M.L.S. (ASCP) a plus. CMQ/OE and/or CQA (ASQ) highly preferred. Please visit our careers site online to apply <https://www.rrvbc.org/careers/>. 💧